



# Inspection Report on

**Arnold House**

## **Date Inspection Completed**

16/02/2021

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## About Arnold House

Type of care provided	Care Home Service Adults and Children Without Nursing
Registered Provider	Procure Wales Limited
Registered places	9
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection following re-registration with Care Inspectorate Wales under the Regulation and Inspection of Social Care (Wales) Act 2016
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer' of the Welsh language and demonstrates an effort to promoting the use of the Welsh language and culture

### Summary

Individuals are supported by care staff who understand their emotional, physical and behavioural care and support needs. The pre-admission process assesses and considers their care and support needs, compatibility and if the service can meet their needs. Personal plans, risk assessments and behavioural management guidelines contain detailed person centred information regarding individuals' physical, emotional mental health and behavioural needs. The documents provide care staff with clear strategies regarding how care and support should be provided. Young people are supported to attend education if required and individuals access community health and social care services. They participate in recreational and independent living skills activities and are encouraged to lead a healthy lifestyle. Individuals state they feel safe and like living at the home. Their rooms are personalised and health and safety checks are completed in a timely manner. Safe recruitment checks are completed and care staff complete an induction, access training and receive supervision. The responsible individual (RI) has an oversight of the service, is in regular contact with the manager and quality monitoring audits are completed. Further improvements are required in relation to medication management, the development of the provider assessment and supervision being completed within its identified timescale.

## Well-being

Whenever possible, individuals are supported to have control over their day-to-day life choices and are listened to. The service's statement of purpose and service users guide are available to individuals and the documents have recently been updated. Individuals can access independent advocacy services. They told us they feel "safe", are respected, can attend review meetings and know who they can speak with to raise a concern. Care staff also confirmed this and stated individuals are encouraged to state their opinions and are listened to.

Individuals have access to various health and social care services. Information regarding how their physical and emotional mental health well-being and behavioural support needs are met are contained within their care files. Individuals have access to the service's behaviour analyst as well as community based health and social care services. Care staff encourage individuals to lead a healthy lifestyle and support them to attend personal appointments.

The service has relevant policies and procedures in place to ensure individuals are safeguarded from harm. The service has adult and child protection procedures which include safeguarding, whistleblowing, anti-bullying and complaints policies. Care staff complete adult and child safeguarding training and enhanced recruitment checks are completed.

Educational provision is supported when required and individuals access community based recreational activities. Care staff transport young people to education establishments, support individuals to develop and increase their independent living skills and encourage them to participate in recreational activities which matter to them.

Individuals live in suitable accommodation which supports and encourages their well-being. Their rooms contain personalised items of their choice, are suitably furnished, have facilities which encourages their independence and enables them to have private time. There are plans in place for future refurbishment work and identified repairs and relevant health and safety checks are completed.

## Care and Support

The service's pre-admission process considers a wide range of views and information and personal plans contain detailed information regarding how individual's needs and outcomes should be met. The service's pre-admission process and documentation considers individuals' compatibility, the potential impact upon others residing at the home and if their needs can be met. Personal plans, risk assessments and behavioural management guidelines are comprehensive. They provide care staff with detailed guidelines to ensure care and support is person centred and focussed upon individuals' personal preferences. The documents are regularly reviewed and changes in individuals' health and behavioural needs are discussed with commissioning services. The service is in the process of ensuring that the comprehensive information obtained during the pre-admission and initial assessment stage is included within a provider assessment document. Care Inspectorate Wales (CIW) has requested a copy of the document upon its completion.

The service has systems in place to ensure individuals' needs are met and that they are listened to. Two individuals told us they are encouraged and supported by care staff to contribute to their care planning and this was confirmed by each member of care staff we spoke with. Individuals told us they participated in recreational activities of their preference and various documents and discussions with care staff confirmed this. The documents also highlighted individuals participated in daily tasks to further enhance and encourage their independent living skills. Individuals described care staff as *"great"*, *"fun"* and *"parchus"* (*"respectful"*). Written documentation within care files and discussions with individuals and care staff highlighted advocacy support is available and confirms individuals access external health and social care services and the service's behaviour analyst when required.

Relevant safeguarding procedures are in place. We viewed the safeguarding and the child protection policies and saw they are accessible to care staff. Written and electronic records confirms the service submits safeguarding referrals in a timely manner and notifies CIW of safeguarding incidents. Care staff told us they have access to relevant safeguarding training which the training record confirms. They also state they understand the importance of ensuring individuals are protected from harm and abuse. The individuals we spoke with state they feel *"safe"* at the service and would be *"happy"* to speak with care staff if they had any concerns. We recommended minor improvements to the whistleblowing and safeguarding policies which were addressed before the completion of the inspection report.

Hygienic practices are promoted and the service manages risk of infection. The service has an infection control policy which includes the management of a COVID-19 outbreak. Recent occurrences of COVID-19 have been successfully managed. Discussions with staff confirmed they are aware of the infection control policy and have an adequate supply of personal protective equipment and cleaning products. Observations during the virtual tour of the home showed staff were wearing personal protective equipment.

Overall, safe practices are adhered to in relation to the management and administration of medication but further vigilance is required when completing Medication Administration Record (MAR) charts to ensure correct procedures are followed. We viewed each individual's MAR chart and saw areas that required improvement. These related to the auditing of MAR charts, the correct and consistent recording of information regarding Pro Re Nata (PRN) medication and ensuring staff countersignatures are consistently recorded when prescriptions are hand written. A Priority Action Notice has not been issued in this instance as the manager and RI responded in a proactive manner and addressed the issues raised with the staff team and made improvements to the medication auditing process before the completion of the inspection report.

## Environment

Individuals live in a home that meets their needs, supports them to maximise their independence and achieve a sense of well-being. The home provides accommodation for up to nine individuals between the ages of 16-64 years. It consists of seven self-contained apartments, five of which are single occupancy and two that are dual occupancy. It is situated in a village with public transport links to other larger towns and cities which enables individuals to access community based activities. We completed a virtual site inspection and viewed the majority of the accommodation. Each individual has access to a bedroom which provides them with their own private space, kitchen/living area and a bathroom. Individuals are able to choose how they want to personalise their rooms and we saw rooms were suitably decorated and furnished. The kitchen areas contain various appliances which promotes and further develops individuals' independent living skills. The individuals we spoke with told us they liked living in the home, were happy with the size of their apartment and had been involved in choosing paint colours for their rooms. Overall, each area of the home viewed was clean and tidy. The home does not have a garden area and has limited car parking spaces available.

Health and safety checks of the premises are regularly completed. Care staff state that overall, maintenance issues are identified, reported and addressed in a timely manner. During the virtual tour we saw minor areas requiring improvement. The manager informed us these areas were identified during recent health and safety audits and the RI reports confirmed this. The manager highlighted national COVID-19 restrictions have affected the frequency of maintenance work being able to be completed and stated the work is scheduled to be completed as soon as the lockdown period has ended. The manager states the provider is supportive of change and financial investment. Discussions with care staff and written records confirms matters relating to fire safety such as alarm testing, the testing of fire equipment, electrical equipment and appliances shows they are completed within their identified timescales.

## Leadership and Management

Governance arrangements are in place to support the operation of the service and provide a sound basis to provide quality care and support for individuals. The service's manager has regular contact with the RI and members of the senior management team to discuss service objectives and individuals' progress in relation to their behavioural needs and personal goals. They state they speak on a regular basis, receive "*excellent support*", are kept informed of decisions made about the service and are able to discuss matters "*openly*" and "*honestly*".

The service is provided in accordance with their statement of purpose. The statement of purpose and service users guide accurately describe the current arrangements in place regarding the service's accommodation, referral and admission process, the type of care and support available and ways in which it is working towards providing a Welsh language service provision. The statement of purpose also includes details of the service's supervision and training arrangements for care staff. We recommended it include additional details regarding the current staffing structure and amend the detail regarding frequency of supervision and these were actioned during the inspection process.

Arrangements are in place for the effective oversight of the service through ongoing quality assurance processes. We viewed documents relating to the service's quality assurance process and saw they had been completed in a timely manner. The detailed RI reports cover a range of operational matters and identifies areas where improvements are required. Discussions with individuals, care staff and the management team confirms the RI visits the service on a regular basis, although it is noted national COVID-19 restrictions have affected the frequency of visits. Records show the service records and addresses complaints in a timely manner and the complaints policy and procedure includes information regarding how the general public can raise a complaint.

There are appropriate numbers of suitably fit and qualified care staff available and they receive supervision and training. The staff rota records show shifts are being covered and individuals receive care and support in accordance with their identified needs. Care staff told us they were also happy to complete shifts additional to their contracted working hours. Enhanced staff recruitment checks are up to date and newly employed care staff complete the service's internal induction and the Social Care Wales – All Wales Induction Framework. The staff training record shows staff have access to a variety of core training opportunities and care staff told us they were happy with the training quality and frequency. Care staff speak positively about the regular formal and informal supervision support they receive from the management team. Despite this, we recommended an improvement was required in ensuring care staff receive supervision within the service's identified timescale which was acknowledged by the manager.



**Areas for improvement and action at, or since, the previous inspection. Achieved**

**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None	
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**Areas where priority action is required**

None	
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**Areas where improvement is required**

None	
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**Date Published** 26/04/2021