

Inspection Report on

St Johns House

6 St. Johns Crescent Canton Cardiff CF5 1NX

Date Inspection Completed

14 October 2021

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About St Johns House

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	React Support Services Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Working Towards

Summary

St. Johns House is a care home that is part of React Support Services. They operate a four Stage recovery model, which provides a pathway for individuals to progress towards independent living or access different types of support, as they need. St. Johns House is a residential adapted property. People have individual bedrooms and share a lounge / kitchen / garden. People are supported to be independent in carrying out their own shopping and meal preparation. The service is staffed 24 hours with people having planned support hours at various times in the day to assist with medication/ meal preparation/ shopping / social activity. This helps people develop independent living skills and supports the services ethos of being a rehabilitation/ recovery service.

Staff know people well, interact in a friendly, calm and caring manner and provide support when and how people like it. Personal plans detail how people like their individual needs to be met and are regularly reviewed. Risk management plans and strategies are comprehensive and kept under continuous review with people's clinical staff. Risks to people are minimised through good safety measures and care planning.

There is good management oversight of the service. Audits of key elements of care are carried out. The Responsible Individual visits as required and talks to people who live in the home and staff to obtain feedback about the service. There is ongoing investment to improve the service. Staff feel supported by the manager and receive supervision. There is training in place to support staff development and help them carry out their work safely and effectively.

Well-being

People have control over their day-to-day life. Care documentation shows that people are consulted about how they want support. Risk management plans are in place that promote positive risk taking and give people opportunity to develop strategies and skills to reduce risks and harmful behaviours. People are supported to develop life skills like cooking and maintaining their environment. People have autonomy and access local area and activities independently. They can choose how and where they spend their day. People have a say in how the home is run, activities that take place and meal planning. People are supported to maintain relationships with family and friends by the service. A number of people attend college or are looking for work. One person has started planning for a more independent living accommodation. A new manager in post is improving the in house activities. People are supported to identify goals and work towards these.

People we spoke to in the service told us :-

"It's nice here, I like the staff and they help me with money, cooking and things like that. I like going to the shops myself and getting my hair done". "There is nothing I would raise, all is good here".

People receive good support to maintain their physical and mental health and wellbeing. Records show that people are supported to access a wide range of health care professionals in a timely manner. The service also employs a clinical psychologist, psychology assistants and clinical nurse specialists. In house professionals mean people can access support quickly and care plans are developed with strategies for each individual. Changes to people's needs are identified and addressed with wider care teams promptly.

Good systems are in place to protect people from abuse and neglect. Staff receive regular training on safeguarding and would report any concerns. The service assesses risks for individuals and has personal plans to provide guidance on how to reduce them. The service has good infection control measures in place.

People have good relationships with care staff, and interactions are friendly and warm. People mainly receive the care and support they need at the time they choose. We were told that sometimes staff rotas changed which occasionally affected support hours. People live in accommodation, which is suitable and well maintained. People told us they liked their home. The home has good links to the city centre, which enables people to access a number of activities independently. The service considers a wide range of views and information to confirm it can meet people's needs and outcomes. A pre assessment period is carried out before a decision is made about whether the service can meet a person's needs. This consists of multiple visits, pre assessment and planning with people's clinical team and consideration of compatibility with those already living at the home. People are encouraged to try the service by having overnight stays and building up slowly to moving in.

A comprehensive care plan system helps staff to have a good understanding of how people like to be supported. Personal plans reflect people's individual needs and are reviewed regularly. Risk assessments are integrated into people's plans. Interactions observed showed people's needs and preferences are well known. Staff are warm in manner to the people they are supporting, and good relationships are evidenced.

People are helped to maintain their physical and mental health. If wanted people are assisted to go shopping and cook and plan meals. Twice a week a communal meal is arranged with healthy food. People receive support to engage with activities, education and employment if they choose. Appointments are arranged in a timely manner to see a wide range of healthcare professionals, from GP's to psychiatrists and dieticians. There is also an in house clinical team to provide support. Staff are trained to look after medication and have their competency checked. The service carries out audits on medication to ensure good systems have been followed.

People's safety is well maintained. The service has systems in place to ensure people are safeguarded from abuse, through regular training and easily accessible policies. Infection control systems are good, and there is a wide range of measures in use to ensure people are safe from Covid 19. This includes testing visitors to the home, a designated handwashing station at the entrance, as well as good use of personal protective equipment (PPE) by staff and visitors. Cleaning schedules are in place

Environment

The service provides people with care and support in a good location and environment. Facilities and equipment promote personal outcomes effectively. The environment supports people to start to live more independently. The home is accessible and safe with appropriate security measures in place. The general environment is welcoming and clean. The new manager is making additions to the environment to make it more personalised and homely.

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Health and safety of the home is well managed. An in house team oversees all maintenance issues and has a good system in place to support this. Audits take place to ensure fire safety equipment is safe. Gas, electric and other services have been checked. Maintenance of the home is planned and it was evident that the service has a rolling programme of work in place to maintain and improve the environment.

Leadership and Management

Suitable staff support people. There are thorough recruitment processes that ensure staff are suitable to work in the service. There is a robust training system in place, and there are clinical psychologists based in the home to support staff with learning and supervision needs. Staff are supported to work through training materials on a wide range of subjects including specialist training relating to the people they support. Staff told us that there are times when they are short staffed due to unplanned absences. We saw that there were occasions where staffing levels are impacted by short notice absences. Agency staff is sometimes used to meet staffing levels but this affects the continuity of care people receive. We are mindful that there is currently a shortfall of care staff across sector. We are satisfied that the provider is taking all steps necessary to keep staffing levels as consistent as possible.

There are good systems in place to support staff, for example regular supervisions, emails to update staff on changes in practice and other offers of support. The home has a manager in post. Overall staff told us they feel well supported by the management team. We had some feedback around lone working and staffing levels that we fed back to the provider.

People express any concerns and know they will be listened to. We saw that people are given information on their rights to complain when they first visit and the complaints procedure is clear and included in the service user guide. A log of complaints is maintained and it is clear that any issues are addressed promptly. People told us that they were happy at the home and that they had no complaints and we saw that they had no hesitation in expressing their views and opinions to staff or the manager. We saw that the provider was very responsive to any issues raised by people living in the service or staff or as a result of routine monitoring, complaints received or following incidents

The provider has strong quality assurance processes. There are audits in place so key aspects of care can be monitored, for example, care plans, risk assessments, medication and infection control. The Responsible Individual (RI) carries out three monthly visits to the service and talks with people and staff. The RI reports show oversight of many aspects of the service, which helps to ensure quality of care is at the forefront of the service.

Summary of Non-Compliance			
Status	What each means		
New	This non-compliance was identified at this inspection.		
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.		
Not Achieved	Compliance was tested at this inspection and was not achieved.		
Achieved	Compliance was tested at this inspection and was achieved.		

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)			
Regulation	Summary	Status	
N/A	No non-compliance of this type was identified at this inspection	N/A	

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement			
Regulation	Summary	Status	
N/A	No non-compliance of this type was identified at this	N/A	

inspection	

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