

Inspection Report on

Mirus Supported Living and Community Support Services - Western Bay Region

Mirus Wales
Unit 5 Cleeve House
Lambourne Crescent
Cardiff
CF14 5GP

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

21/11/2023



About Mirus Supported Living and Community Support Services - Western Bay Region

	5
Type of care provided	Domiciliary Support Service
Registered Provider	Mirus Wales
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	5 April 2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Mirus provides support to individuals with a mental health diagnosis and physical and learning disabilities. Care is provided to people in their own homes including supported living settings where 24 hour support can be provided. Care is delivered by staff who are respectful and considerate. People and their families spoken with told us they are happy with the support they receive.

Support is centred on empowerment and building on strengths to achieve personal outcomes. People have choice and control over their daily lives and are encouraged to be as independent as possible. Personal plans reflect this and are created with people to ensure their voices and wishes are heard.

There is a strong management team and effective governance arrangements in place to monitor the care and support that is being delivered. Care staff feel supported and valued. There are open lines of communication throughout the service.

Well-being

People are supported to have as much choice and control over their day to day lives as possible. One person told us the best thing about their living circumstances was the 'freedom'. Records show that people and their representatives have an active part in developing and reviewing their personal plans. A family member said, "We talk things through together, they involve me in decisions". Goals are set and reviewed regularly by individuals and a plan is made how to support people to achieve their aspirations.

People have a say in who provides their care and support and how it is delivered. One person proudly told us they had helped to interview the Chief Executive Officer (CEO). Another person said, "They're a good team, the manager is very approachable. We speak to the manager to get things done".

People are encouraged to be involved in their local community. One person said, "We do our own shopping, we go out when we want, some of us work". Another person said, "I use the bus a lot to go into town." We saw photos of people taking part in events in the local community and in different settings. Achievements are celebrated, an awards evening is held annually.

The service is working towards providing the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. At present there is not a need for exclusive Welsh speaking support. People are respected as individuals as the manager recognises the importance of people's culture and language. The provider plans to translate some key documents into Welsh. A range of communication methods are used with people who are unable to communicate verbally.

Care staff have developed positive working relationships with individuals and we saw friendly interaction with banter and humour between them. Individuals who are unable to verbalise their wishes and feelings showed they have trust in care staff and are relaxed around them. Body language and gestures demonstrate they are happy and are able to communicate using a variety of other methods. A family member said, "I recently went away for a weekend and didn't hear from her so that's good, I know she was ok, safe and comfortable". Another family member said, "He didn't want to stay in the beginning but now he happily waves me off shouting bye. I find it hard to let go but the staff are great. It's lovely to see that they (individuals) are all the same age, they get on". There are open lines of communication. One relative told us, "I can get hold of them (staff) at any time".

Care and Support

People we spoke with are happy with the care and support they receive. Personal plans are developed with people and/or their representatives with an emphasis of promoting independence and achieving positive outcomes. People are empowered to do things that matter to them and have choice and control over their daily lives. We saw people being supported with daily living skills such as cooking an evening meal.

Personal records have a 'relationship circle' to show staff who is important to individuals and a one page profile has recently been developed summarising the most important aspects of the care and support plan. This enables care staff to provide the correct care and support if they are new or covering staff sickness in a setting where individuals are not so familiar to them.

Personal plans are reviewed regularly and records looked at evidence that people are fully involved in their reviews. People spoken with confirm this and told us they are asked where they would like their review to be held and who they would like to be present. One person said, "We can have it in a café if we want", whilst another person said, "They even ask us if we want any music to be played during the review".

Daily recordings show people are supported to take part in a wide range of activities, depending on their care and support needs and interests. People's levels of independence varies and some people have part time jobs. The provider promotes community involvement and we saw photos of many local projects that people are involved in. Achievements are celebrated and an annual award ceremony is held for people being supported and staff.

Risk assessments are thorough and encourage positive risk taking whilst keeping people as safe as possible. Robust recruitment systems are in place to ensure care staff have the required knowledge, skills and character to undertake their role. Mandatory and additional specific training according to people's support needs is provided and includes safeguarding training. Care staff we spoke with understand their responsibilities if they have any concerns and would not hesitate to act to safeguard those they support.

We saw safe medication policies and procedures in place. Quality monitoring arrangements have identified the number of staff that have completed medication training requires improving and this is being addressed. Detailed records are kept when additional medication is administered on a 'pro re nata' (PRN) basis, or 'as needed' to monitor the effectiveness on an individual.

Leadership and Management

The Responsible Individual (RI) and area managers have good oversight of the service and RI reports show that audit and monitoring systems in place demonstrate what is working well and where improvements are needed. People, their representatives and staff are consulted and have an opportunity to give their views on the service being provided. The provider continually strives to develop and improve the service and outcomes for people. There is a strong ethos of empowering people to be as independent as possible and the values of the service, 'Together, respectful, responsible, empowering and courageous' filter throughout the staff team resulting in positive outcomes for most people. There have been some recent issues with the manager in one of the supported housing settings. This is being addressed with a detailed working action plan and the support of the Local Authority. Experienced senior staff members are currently managing the service until a new manager is appointed and are working to ensure people being supported experience good outcomes. The RI is closely monitoring the progress being made.

During the inspection staff were complimentary of managers and on the whole feel supported and appreciated. Comments included, "I love this place, it's a nice atmosphere and there are opportunities to develop people". "Managers listen to you". Staff receive regular one to one supervision and informal guidance when required. Individual strengths are identified in addition to areas for further training and development. There are opportunities for staff to progress within the company and some staff have benefitted from the management development programme and been appointed to senior roles. One staff member said "It's a good company, so supportive. They have taught me everything I need to know". The majority of staff are up to date with mandatory training. Additional specific training is provided according to the health care and support needs of people.

Managers promote people's safety and well-being and policies and procedures are followed when concerns are raised. The provider has strong links with the local Safeguarding team and will follow the advice and guidance provided in line with policy and procedure. Care Inspectorate Wales (CIW) are notified of any such concerns and this is usually done in a timely manner. Care records and daily recordings are mainly thorough and consistent. The RI has told us they are currently focusing on ensuring all staff complete and sign records correctly and ensuring there is consistency throughout the service. We looked at several key policies and found them to be up to date and reviewed regularly.

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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