



# Inspection Report on

**Shillings Care**

**Cardiff**

**Date Inspection Completed**

08/12/2022

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## About Shillings Care

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Shillings Care Limited
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service.
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

People are satisfied with the care they receive and report no issues living at the home. Care staff are happy working at Shillings Care and feel well supported by the management. The Responsible Individual (RI) has oversight of the service and completes required visits. There are policies and procedures in place for the running of the service and people are given information about the service. Quality assurance is currently being undertaken for the first time and aims to ensure improvements can be made where required. Care staff treat people with respect and show kindness and patience toward the people they care for. The provider needs to ensure that care staff receive relevant training to meet all of the identified needs of people using the service. Improvements to assessments and personal plans of care are required to ensure the provider has a good understanding of people's needs and how they should be met. People are cared for in a suitable environment that is well maintained and safe and have access to personal space and privacy in their own bedrooms. There is a fire risk assessment in place but there needs to be a Personal Emergency Evacuation Plan (PEEP) in place for all people using the service as soon as they begin to use the service.

## Well-being

People are treated with dignity and respect, but improvements to documentation and staff training are required. Care staff engage with people positively and show kindness and patience when providing care. People are encouraged to be independent and care staff provide care in a way that promotes dignity. People are at the centre of care planning and are involved in assessment and reviews of their care. Personal plans of care include people views and wishes but need to be more detailed to ensure staff have complete information of the needs of the people they care for. People are provided with information about the service they can expect to receive and have access to a complaints process if they are not happy. Quality assurance is in the process of taking place and will seek the views of people using the service. The RI engages with people as part of monitoring visits. Staffing levels ensure that people receive care without delay and have support to maintain personal routines and activities. Staff enjoy working at Shillings Care and feel supported and well equipped to undertake their roles. Staff receive appropriate training and supervision, but the provider needs to ensure staff are fully trained in all aspects of the care they currently or intend to provide. People are cared for in single bedrooms which are personal and offer privacy.

People are protected from abuse and harm, but some improvements are required to ensure people's safety is maintained at all times. Shilling Care has a robust safeguarding policy in place and all staff receive training in the safeguarding of adults at risk of abuse. Pre-employment checks including Disclosure and Barring Service (DBS) certificates and references are applied for, but sometimes after the new staff member has started induction at the service. The provider needs to ensure that all staff have a personnel file in place and all required documents are contained within the files. The building is well maintained and safety checks are completed when required. There is a fire risk assessment in place, but provider needs to ensure that people have a detailed PEEP in place as soon as they begin living at the service.

## Care and Support

People can be assured they have choice and control over their lives. Care documentation is person centred and includes the views, likes and dislikes of the person being cared for. People are included in care planning and review processes and have access to independent advocacy if needed. People have their own personal daily routines and decide when to get up in the morning, when to go to bed at night and how to spend their time in between. There are no set mealtimes or food menus in place as people decide what they wish to eat and when. During inspection we observed staff offering choice and preparing lunch of the persons choice when they were ready to eat. People are supported to engage in activities of their choice within the home and the community and are encouraged to maintain relationships with friends and family. Visiting in person to the service has resumed after COVID restrictions have been lifted.

Improvements are required to ensure that people always receive the right care at the right time. Pre-admission assessments to the service are completed but we found one person's assessment lacked detail and significant information that staff would need to know was missing. Personal plans are in place and are reviewed regularly but again we found one persons plan to lack information and was not supported with risk assessments where they were evidently required. Personal plans are extremely important documents as they guide staff on how to care for people and without the correct information there is a risk of people care needs not being met correctly. We found no information from the Local Authority in regard to one person's admission, but the provider has made attempts to gather the information retrospectively. Whilst there has been no impact on people using the service advised the provider that improvements are required and we expect action to be taken. We observed staff providing care with kindness and patience while maintaining dignity and promoting independence. One person we spoke to told us that they liked living at Shillings Care and had no issues with the home and described the staff and food as "ok". Staffing levels are sufficient to ensure that people receive the care they require without delay.

## Environment

People live in a suitable environment. Shillings Care is a converted residential property located in a suburb of Cardiff that benefits from local amenities and good transport links. The service is set over three floors and has a stair lift in place to access the first floor but at time of inspection, the provider was still waiting for the installation of a chair lift to access the second floor, which we are told has been ordered. The home is warm, welcoming, and decorated nicely throughout. The environment is clean and no malodour was detected during inspection. There is ample communal space within the service including a large lounge and kitchen diner that enables people to spend time communally or to receive visitors. There are a sufficient number of toilets and bathrooms which are all accessible and in good working order. People have their own bedroom which are clean, warm and contain their personal items and offers space for privacy when required.

People generally live in a safe environment but some improvements are required. On arrival at the service, we found the main entrance secure and we were asked for identification before being permitted entry to the service. The building is well maintained and safety checks including gas and electricity safety testing are completed as legally required. There are window restrictors in place and all harmful chemicals are locked away safely. There is a fire risk assessment in place but on the day of inspection there was no PEEP in place for the person living at the service. We requested that the provider complete this as a matter of urgency and whilst this was completed, we felt the document lacked sufficient detail and requested the provider update the document. PEEPs are extremely important as they guide staff on how to evacuate people in the event of an emergency. Whilst there is no impact on the person using the service, we have advised the provider that this is an area for improvement and we expect action to be taken. We also noted a loose door bar at the top of the steps leading down into the kitchen and requested the provider has this fixed firmly to the floor to reduce risk of trips. We were assured this would be completed.

## Leadership and Management

People benefit from the leadership and management in place. Shillings Care benefits from a manager who is registered with Social Care Wales, the workforce regulator and an RI who has oversight of the service. The provider is in the process of completing the first quality of care review which will consider the views of people who use the service. This indicates the provider is committed to making improvements where required and providing a quality service at all times. The RI completes visits to the service in line with regulatory requirements and records the detail to support the visit. The service has robust policies and procedures in place for the smooth running of the service and people are given information about the service and how to complain if they are not happy with the service they receive. There have been no complaints to the service or safeguarding referrals made to the Local Authority since the service began operating, but the manager gave assurances that they understand safeguarding procedures.

People receive care from staff who are well supported but improvements are required to staff training and personnel files. Staff we spoke with told us they are happy working at Shillings Care and feel well supported to undertake their role. The training record indicates that all staff supervisions are up to date. Supervision is important as it is an opportunity for staff to discuss practice issues or needs in a formal setting that is recorded. Care staff training is up to date but we noted that staff had not received specific training in regard to the needs of one person using the service. We examined a selection of staff personnel files and found that some information was incomplete or missing and some staff did not have personnel files in place. We also noted that pre-employment checks were, at times, completed after employment commences but were assured that new staff do not work alone until the checks are received. There has been no impact on people using the service but we advised the provider that improvements are required and were advised that all staff now have personnel files.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
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15	Care plans do not contain detailed information about a persons needs and risks associated with these needs. There is no information available on who to contact should conditions deteriorate and no stand alone risk assessments in regard to identified risks. No evidence of information from Local Authority before admission took place.	New
20	A person living at the service had not received a copy of the service agreement.	New
35	Pre-employment checks are not being completed prior to staff coming into contact with people using the service. Some staff do not have staff files in place and required information missing from staff files in place.	New
36	The service has not provided staff specific training required to meet the needs of the people they care for.	New
57	No Personal Emergency Evacuation Plan in place when inspection took place.	New
58	Blister packs of medication were not stored correctly when inspection took place.	New

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