

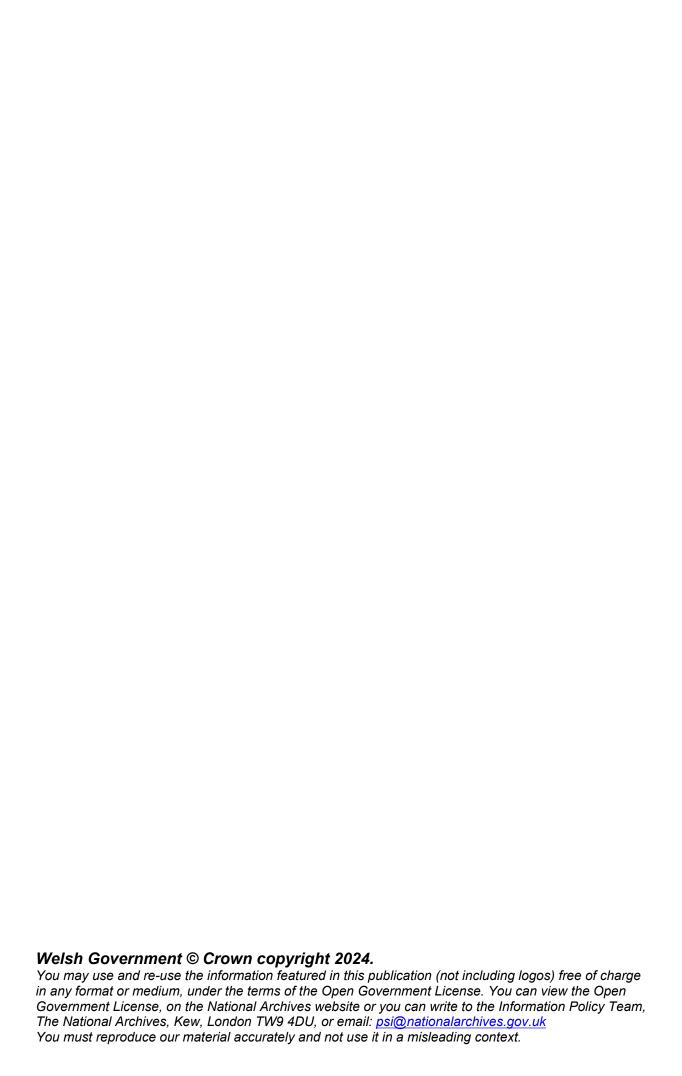
# Inspection Report on

**Mont Claire** 

**Blackwood** 

## **Date Inspection Completed**

20/09/2024



### **About Mont Claire**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Caerphilly County Borough Council Adults and Children's Services
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	29 February 2024
Does this service promote Welsh language and culture?	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 receive good quality of care and support when they use Mont Claire for short breaks, and their health and well-being is promoted during their stay. People and their relatives told us they are happy with the service and described care staff as "amazing." People are fully involved in developing their care and support plans and are supported to consider what they want to achieve and things that are important to them during their stay. The manager is continuing to develop this process for the benefit of people using the service.

The environment is homely, bright and clean throughout and food hygiene standards are good. There is specialist moving and handling equipment available in some bedrooms for people who need this.

There is a committed leadership and management team in place, which includes an experienced responsible individual (RI). Staff are safely recruited, well-supported, trained and have regular supervision meetings. Team meeting take place often and the manager uses these to develop the team and promote a positive culture within the service.

#### Well-being

People are treated with dignity and respect during their stays and are supported to make choices about what they do during their time there. We were told people often refer to staying at the service as "my holiday", with activities and day trips planned in line with people's preferences and personal outcomes.

People's care plans are personalised and reflect their individual needs, strengths and goals. Before people stay in the service, the management team carefully consider other people already staying in the home, and how they can support them to build positive friendship. Likewise, care staff support people to maintain contact with family and friends if this is something they would like.

People are supported to do things which are important to them and make them happy. This includes accessing the community and places of interest to them, and talking about topics they are interested in. A healthy lifestyle is encouraged, in a way which is individualised to each person.

There are processes in place throughout the service to keep people safe from abuse and neglect during their short breaks.

The accommodation is, overall suitable for people who use the service for respite. However, the provider recognises the demand for the service requires a bespoke building to ensure more people with a range of needs can access short breaks. Due to this, a purpose-built service is being developed.

#### **Care and Support**

People receive a good quality of care and support when having a short break at the service. Prior to people staying in the service, a wide range of information is considered to ensure their needs can be met safely, which includes speaking to the person and their families. Transition into the service is individual to the person and can include informal visits and meals at the service before staying for respite. The service has developed the way it works with people to review their care and support plans. Plans are reviewed regularly, they are outcome focused. We saw reviews are taking place regularly with copies of previous plans held electronically. The manager told us processes are continually being reviewed and built on to ensure they are as beneficial for people as possible. The manager advised they are developing how they record progress people have made towards their goals, and when they have been achieved, to help people reflect on their achievements and to set new outcomes.

All people using the service have a 'pre stay' check prior to each short break. This confirms with the person and / or their family, if there have been any changes to their needs or preferences since their last stay or if there is any information to be noted.

People told us they enjoy their break at the service, and they appeared happy and comfortable with care staff. Feedback from relatives has been equally positive. We were told "The staff are amazing" and "They ensure my son is happy and enjoys his stay".

The service engages with health and social care professionals and are involved in multidisciplinary meetings as required. They also follow the advice and guidance of specialist professionals when supporting people during their respite stays, to maintain their ongoing health, development and well-being.

People have a choice of meals, drinks, and snacks during their short break. These are made in the home style kitchen, and people can be involved in meal preparation. We saw photographs of people making meals and baking during their respite stay, and people are supported to take part safely. People are encouraged to lead a healthy diet and lifestyle during their short break is the case, and daily notes evidence how care staff enable this.

The service has processes in place to keep people safe during their stays, and people are supported by care staff who are trained in safeguarding adults.

#### **Environment**

The environment has improved to a good standard. People have their short break at a service which is appropriately secure, and we were asked for our identification prior to being able to enter. The service has made significant improvements to the environment since the last inspection. The service is clean, bright and free from clutter. Since the last inspection, the cleanliness and standard of décor has improved. Any unused moving and handling equipment is stored appropriately when not being used. There is a family style kitchen at the service which people can use. As space is limited in the kitchen, people are supported with some meal preparation or baking activities at the dining table. A 5-star Food Standards Agency rating has been awarded to the service which means food hygiene is good.

Overall, the environment is suitable to meet the needs of people who stay at the service and enables them to achieve their personal outcomes. The provider recognises the size and layout of the service does not completely allow for full accessibility or meet the increasing demand for respite. Due to this, a purpose-built service is being built, and the manager has been speaking to people about their views and what is important to them. We have been assured these ideas and suggestions will be considered within the development of the new building.

When using the service, people have their own bedrooms and overall, people have a choice of what room they stay in. Some rooms are accessible and are fitted with specialist moving and handling equipment. People can personalise their rooms during their stay with their own items. If requested, the service adds pictures to the bedrooms which represents the persons interests, to support them to feel comfortable.

There is a large rear garden which has been developed to meet needs and wishes of the people using the service. Staff told us the new alfresco dining area has been enjoyed by many.

The service completes the necessary fire safety checks and keep a record of these, along with the regular maintenance of facilities at the service. Care and support files and staff files are kept securely in the office. On the day of inspection, some files which were awaiting to be archived, were moved to a locked area to ensure they are stored in line with current guidance.

The Welsh language is promoted within the environment, and signs in the house are in both Welsh and English.

#### **Leadership and Management**

There is good and consistent leadership and management at the service. The manager has processes in place to ensure effective oversight of the service. There has been a recent introduction of regular, unannounced spot checks completed by the manager which take place during both the day and night shifts. The information gathered is used to drive further improvement in the quality-of-service provision. The RI is experienced in their role and visits the service in line with regulatory requirements. The reports completed by the RI are of a good standard and evidences they speak to people about their experience of the service. The Statement of Purpose (SoP) has been updated and accurately reflects the service provided. We also saw a copy of the service user guide which has been written in an easy read style.

There has been financial investment into the service, with redecoration and repair completed along with improvements to the bathrooms and toilets to ensure they meet the standards required. There has also been investment in the outside area to encourage people to use the garden and spend time outdoors.

The manager is committed to building a strong staff team to drive service development. Records of team meetings evidence team building and reflection exercises taking place to look at the strengths of the service and where improvements could be made. The manager is committed to promoting a positive culture within the staff team and encourages open and respectful communication between all staff at the service. We were told the RI and senior managers are visible in the service and staff are comfortable to speak with them as needed.

People can be confident they are supported by care staff who are suitably fit for the role and have adequate knowledge, skills and training to meet their care and support needs well. All staff receive formal supervision which are planned in advanced, along with an annual appraisal. Care staff are recruited safely with appropriate pre-employment checks taking place. Once in post, care staff complete a thorough induction which is overseen by a member of the leadership and management team. Most care staff are registered with Social Care Wales (SCW) who is the workforce regulator and new care staff told us they feel supported to register once their induction is complete.

There are suitable policies and procedures in place for staff to follow when carrying out their duties. These include safeguarding, whistle blowing and supporting people to manage their money. We saw financial records being made if people need assistance with their money during their stay, which is in line with the services' policy.

Records are kept of any complaints or compliments made to the service, and these were available to us on the day of inspection.

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	
73	Regulation 73(3): The RI must visit the service in accordance with Regulation 73(1)(a)-(b) at least every three months.	Achieved	
31	Regulation 31: An individual must not be deprived of their liberty for the purpose of receiving care and support without lawful authority. On the day of inspection there had been no DoLS applications made for any person staying at Mont Claire.	Achieved	
44	Premises are not consistently maintained to a safe level and represent a risk to people receiving services.	Achieved	

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.

Area(s) for Improvement			
Regulation	Summary	Status	
N/A	No non-compliance of this type was identified at this inspection	N/A	
36	Regulation 36(2)(c): All staff must receive appropriate supervision and appraisal.	Achieved	

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