

# CAERPHILLY COUNTY BOROUGH COUNCIL, DIRECTORATE OF SOCIAL SERVICES

## COMMISSIONING TEAM

### Contract Monitoring Report

**Name/Address of provider:** ALP Supported Living Ltd

**Date/Time of visit:** 18 January 2019 (office visit)  
11 February 2019 (Nelson property)  
14 February 2019 (Bargoed property)

**Visiting Officer:** Caroline Roberts, Contract Monitoring Officer (CCBC)

**Present:** Andrea Bayliss, Deputy Manager) Office Visit  
Leanne Bayliss, Deputy Manager)  
Senior Support Worker, Nelson  
Senior Support Worker, Bargoed

## 1 Background

- 1.1 ALP Supported Living Services provide personal care and support to people with a range of disabilities including Mental Health, Physical Disabilities, Learning Disabilities and also vulnerable individuals who require support to help them maximise their own potential and independence, from 18 – 70 years of age. Personal care is provided to individuals who reside in two separate houses situated within the Caerphilly borough. ALP also own two properties in Newport and offer the same support.
- 1.2 Ms Andrea Bayliss is the Responsible Individual, General Manager and Director, Ms Leanne Bayliss is the Registered Manager and Ms Pat Bayliss offers support and guidance as Deputy Manager.
- 1.3 As part of the monitoring process, the visiting officer attended the head office based in Ebbw Vale. Two staff files were viewed and also as part of the monitoring process, the officer visited the two separate houses in the Caerphilly borough. During these visits, discussions were held with the tenants and the supporting staff.
- 1.4 At the time of the visits, there were six tenants at the one property and four in the second. There were no vacancies at either house.
- 1.5 Prospective new tenants are referred to ALP Supported Living Services via the Local Authority's Assessment Care Management Team and other Local Authorities. Should a vacancy occur, compatibility between the tenants is considered prior to a tenancy agreement being offered.
- 1.6 Dependant on the findings within the report, corrective and developmental actions may be given to the provider to complete. Corrective actions are those that must be completed as governed by regulations such as RISCA (The Regulation and Inspection of Social Care (Wales) Act), and developmental actions are those that are deemed good practice.

## **2 Previous Recommendations**

### **2.1 Corrective actions**

To allow residents to choose which bedding/décor they would like in their bedrooms: (NMS 8.1) – Timescale: ongoing. Outcome: To remain ongoing as and when tenants wish to renew furnishings etc.

- 2.1.2 For all staff to have a up-to-date, signed Contract of Employment on record (NMS 22.5) Timescale: 3 months from the date of this report - *contract of services are on all employees files with the exception of 1 relief worker. The Deputy Manager is in the process of issuing a contract to the individual.*  
Outcome: MET

### **2.2 Developmental actions**

Provider to make enquiries about how the privately purchased wheelchair should be serviced. – Outcome: whilst making enquiries, a privately purchased wheelchair that is not used regularly may not require annual servicing – depends on wear and tear. MET

## **3 Findings**

### **3.1 Service Plans**

- 3.1.2 During the visits to the two houses, the visiting officer viewed four tenant files; two from each property.
- 3.1.3 A number of tenants have been residing at the properties for a considerable length of time; therefore, on the files viewed, pre-admission assessments were not observed.
- 3.1.4 Whilst viewing the four tenant's files, all had a Local Authority Care Plan and the personal plans reflected the information contained within the Care Plan.
- 3.1.5 The personal plans highlighted life skills, Health & Well-Being, hobbies and what an individual enjoys i.e. foot spa's, knitting, shopping, attending day centre, colouring, arts & craft, eating out etc. Clearly outlining the interests of the individuals.
- 3.1.6 It was observed that individual's are referred to appropriate professionals as and when required i.e. Dermatology, Dentist, Audiology, Cardiac Physiology etc. During one of the visits, the visiting officer observed one individual returning home from a cardiology appointment and the staff member updating the daily and medical records.
- 3.1.7 Only one file out of the four did not have any evidence to suggest that the tenant or family representative had taken part in the development of the personal plan. This was discussed with the Responsible Individual who advised that it is difficult for the individual to remain focussed; however, family are very supportive and involved.
- 3.1.8 Maintaining family relationships is encouraged and whilst visiting one of the properties, family members were waiting for their relative to return home from day centre. The family members received a warm welcome and also displayed a good rapport with the staff and other tenants at the property.

- 3.1.9 The files also advise the reader of what the individuals are supported to do in order to maintain independence i.e. tenants are encouraged to choose their own clothing, to assist with domestic chores, to assist with cooking and to assist with the daily running of their home.
- 3.1.10 All four files contained a photograph of each tenant, with one requiring a more up-to-date photograph. Whilst viewing the files, it was noted that there were no missing person's profiles; this was discussed with the Responsible Individual for future consideration.
- 3.1.11 The Service Plans were detailed and contained information in respect of individual's communication, whether or not they are able to verbally communicate and if not, what methods of communication is preferred. Sleep patterns describe the pattern an individual has, what time they go to bed, whether they sleep through the night or wake up at a particular time. The Service Plan outlines what relationships are important to people and how they should be encouraged and maintained. The Plan also refers to an individual's mental health, what support (if required) is given/offered in respect of managing finances. Risk assessments and behaviour plans outline what triggers a person's change in behaviour and what support is to be offered to the individual at the time.

## 3.2 Risk Assessments

- 3.2.1 Appropriate risk assessments are in place to support both the tenant and the staff. They outline the triggers that need to be identified along with what actions are to be taken to address any potential risk.
- 3.2.2 Risk Assessments observed contained detailed information and are in respect of Communication, Mobility, Behaviours that challenge, Nutrition, Financial etc.
- 3.2.3 Each file was noted to have a PEEP (Personal Emergency Evacuation Plan) in situ. In an event of an emergency, the allocated fire warden of each house will undertake a search to ensure that all individuals have vacated the building. Regular fire drills are undertaken at both properties and feedback is provided to both staff and tenants.
- 3.2.4 All staff are aware of the responsibility they have with regard to safeguarding the tenants they support, verbally evidencing to the visiting officer what action would be taken and what procedures would be followed should they believe abuse is taking place.

## 3.3 Documentation

- 3.3.1 All files were found to be securely stored at each property, including those that are held at the head office.
- 3.3.2 The daily records detail what the individuals do during the day in respect of activities. One individual, when not attending day centre, enjoys shopping and doing crafts. The records also inform the reader of information that reflects areas of the personal plan i.e. personal care, assistance and support with domestic chores, medical appointments etc.

- 3.3.3 The documentation was well laid out and the visiting officer found appropriate records/documentation with ease.
- 3.3.4 MAR (Medical Administration Records) charts were viewed at one property only and records were found to be appropriately labelled by the providing pharmacy. Each record was observed to be followed correctly, with appropriate dates and staff signatures. Appropriate records of general medical appointments were also viewed.
- 3.3.5 The service provider offers an open door policy and all members of staff are happy to discuss any concerns that may be raised in order to seek resolution. Whilst no formal complaints have been received, each property has a complaints record book and there is a complaints policy insitu.
- 3.3.6 Both Managers and staff were able to verbally evidence to the visiting officer how they would deal with any complaint received and what action, if any, would be taken to resolve matters.

#### 3.4 Activities

- 3.4.1 Most of the tenants attend day centre and have different hobbies/interests that staff endeavour to support. Some individuals enjoy knitting and were very proud to show off the items they were working on. Shopping is another activity that individuals enjoy and some of the tenants were keen to inform the visiting officer of their latest purchase and their plan to visit Trago Mills. Art and crafts, colouring, jigsaw puzzles, theatre trips, meals out are also enjoyed by the individuals.
- 3.4.2 One gentleman enjoys helping out at a local farm, and happily advised the visiting officer of the activities he had undertaken that day.
- 3.4.3 Only one individual attends Church; however, this is not on a regular basis and therefore is supported as and when they wish to attend.
- 3.4.4 There is no activity timetable in place at either property; however, the majority of tenants can verbalise their wishes and the activities they wish to undertake. For one individual who has communication difficulties but can understand what is being conveyed, a varied choice is offered and an activity can be chosen by the tenant.
- 3.4.5 Whilst visiting both properties, the majority of tenants were out undertaking activities and did not return home until late afternoon. Thus evidencing they are out in the community undertaking activities of their choice.

#### 3.5 Health and Fire Safety

- 3.5.1 Staff at both properties had attended fire drills within the last twelve months. The Senior Carer from the Bargoed property advised the visiting officer that staff and tenants took part in a recent fire drill and it was reported that all evacuated the property much quicker than the one before.
- 3.5.2 The visiting officer viewed the accident book at both properties and only one incident was recorded within the last year. No medical attention was required.

### 3.6 Mobility Aids and Equipment

- 3.6.1 One individual uses a wheelchair and the equipment is serviced by a local mobility shop. The wheelchair is fitted with footplates and a safety belt. At the time of the visit, no other specialist equipment was required.

### 3.7 Nutrition

- 3.7.1 Each resident has the opportunity to contribute to the menu at both properties. One individual is a diabetic and is encouraged to eat appropriate food and consideration is also given to portion control.
- 3.7.2 Some people choose to assist with food preparation; others choose not to partake and enjoy the meals provided.
- 3.7.3 A few of the tenants also enjoy eating out with staff, family etc. or alternatively sometimes enjoy a takeaway. However, a balanced diet is encouraged.
- 3.7.4 In both homes, the tenants have developed a routine of their meals at set times; however, they can choose where they would like to eat their meals i.e. bedroom, dining table.
- 3.7.5 Both homes endeavour to buy fresh produce and will devise a meal plan should an individual have specific needs/requirements i.e. diabetic.

### 3.8 Staffing

- 3.8.1 The provider employs support workers to assist and support individuals with in their own home.
- 3.8.2 In the last twelve months the provider has had two members of staff leave their employment. This was because one staff member was finishing on maternity leave and the other individual was retiring. No new member of staff has been employed in the last year.
- 3.8.3 The provider does not use agency staff as staff work well together and work well as a team.
- 3.8.4 The provider operates a twenty-four hour on-call system in order to provide staff with support and assistance should an emergency arise.
- 3.8.5 The visiting officer viewed two staff files for the purpose of ensuring all the necessary documents were present. On both files there was evidence of a current DBS (Disclosure and Barring Service) information, written references, employment history etc. There were also recent photographs of the members of staff. Both staff members had a Contract of Employment.
- 3.8.6 Up-to-date training certificates were observed on both files. However, whilst viewing the training matrix prior to the office visited, it was noted that one member of staff's First Aid was out of date. The Registered Manager took immediate action and was endeavouring to make the appropriate booking.
- 3.8.7 Staff also attend non mandatory training in order to meet the needs of the tenants they support i.e. Eating Well, Personality Disorder.

3.8.8 Supervision is undertaken every three months, along with annual appraisals.

3.8.9 At the time of the visit, no member of staff or tenants communicates in the medium of Welsh. However, the Responsible Individual assured the visiting officer that should a tenant wish to converse in the medium of Welsh; every effort would be made to meet the requirement.

### 3.9 Quality Assurance

3.9.1 The annual survey is an important tool to assess, improve and develop the service provided to those residing at both properties. General feedback is received on a daily basis from the tenants. Annual surveys are distributed to tenants, staff, families etc.

3.9.2 Sixteen Annual Staff Surveys were distributed in December 2018 and fifteen were returned. Ten Annual Relative Survey's were issued, with eight being returned. Ten Tenant Surveys were issued; however at the time of report writing, the Registered Manager was still awaiting returns.

3.9.3 Whilst viewing the results and feedback from the surveys, it is evident that relatives are happy with the support being offered at both homes i.e. *'X' is healthy, happy and loves his life in his home and family. He is well cared for, has more holidays than anyone I know, we are so pleased for him and that he has no problems'. 'X' is well cared for and very happy. 'X' is very happy and centred which gives us her family a sense of relief and satisfaction that she is cared for.*

3.9.4 Staff also made comments on how to improve the delivery and standard of service provided to the tenants i.e. healthier options at supper, produce meal plans to cut down on food wasted but without affecting the tenant's choice, laundry, exercise, completion of documentation.

3.9.5 It was positive to read the results and feedback provided as it demonstrates that staff are able to share their views and opinions on how to make improvements for the tenants.

3.9.6 The visiting officer also viewed the letter issued to staff and relatives with regards to sharing the results of the surveys; thus keeping all informed.

3.9.7 The Responsible Individual (RI) is required to undertake visits to the properties at least every three months and produce a report at least every six months. The visiting officer has viewed the RI's reported dated 2<sup>nd</sup> January 2019, which reports on resources, engagement with tenants, supervision of the service, record keeping and policy and procedures etc.

### 3.10 Training

3.10.1 For Induction and Training, ALP does not use the Care Council for Wales Social Care Induction framework but uses a similar one.

3.10.2 Training undertaken by staff is evaluated by staff providing verbal feedback and by observing them undertaking their daily responsibilities.

3.10.3 Staff interviewed also advised that they can request any training that they believe may assist them with meeting an individuals needs. The Registered Manager was described as being “on the ball” in respect of training.

### 3.11 Staff questions

3.11.1 A number of questions were asked of the support workers as part of the monitoring process. Both members of staff were knowledgeable about the tenants they were supporting and were observed to have a very good rapport with individuals with plenty of laughter.

3.11.2 The support workers were complimentary about the service in respect of the support they receive and advised that their views and opinions are listened to.

3.11.3 All staff met during the visits appeared to be happy and enjoyed a good relationship with the tenants.

### 3.12 Tenant questions

3.12.1 A general conversation was held with two tenants, one from each property. Questions such as ‘what do you like or not like about living here?’, ‘What kind of things do the staff help you do?’, ‘Are you happy living here? ‘If everyone else is going out and you don’t want to go, can you stay in the house?’

3.12.2 Both individuals presented well and were keen to chat with one individual advising the visiting officer ‘*I get on with everyone and I can do what I want to and go anywhere I want thank you*’. ‘*I’m very happy here thank you*’.

## 4 General

4.1 Both properties visited were decorated to a very high standard, providing tenants with a warm homely environment.

4.2 Any maintenance jobs are referred to the Registered Manager who is responsible for the up-keep of both properties.

4.3 Both homes were very inviting and it was evident that the tenants had made their rooms comfortable and contain personal items i.e. posters, ornaments, photographs.

4.4 There were no issues with regard to the cleanliness of either home.

4.5 Both properties enjoy garden areas should the weather permit.

## 5 **Corrective and Developmental Actions**

### 5.1 Corrective

5.1.2 To evidence that the individuals or family/representatives are involved in the development of their personal plans (RISCA Reg. 15)

5.1.3 For all reviews to be undertaken every quarter or sooner (RISCA Reg 16).

## 5.2 Developmental actions

- 5.2.1 For files to contain up-to-date photographs of the tenants
- 5.2.2 For the provider to consider developing a Missing Person's profile.

## **6 Conclusion**

- 6.1 All residents appeared to have a good quality of life at their home and have a good relationship with the support workers. This was evident when talking with the tenants, obtaining their feedback and also observing the interaction.
- 6.1.2 The décor of both properties is of a high standard and offers the tenants a warm, homely communal environment, along with their own inviting personal space.
- 6.1.3 The tenants clearly enjoy various activities on a daily basis and staff, at both properties, are happy to assist.
- 6.1.4 Routine monitoring will continue and the monitoring officers would like to thank all involved for their time, the information shared and the hospitality shown during the visit.

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N.B. This report will be made available via Caerphilly County Borough Council's Internet site. Hard copies of the report will also be made available to prospective residents and/or their families should they ask to see them.