

CAERPHILLY COUNTY BOROUGH COUNCIL
DIRECTORATE OF SOCIAL SERVICES

COMMISSIONING TEAM (ADULTS)

CONTRACT MONITORING REPORT

Name of Provider: Care Management Group (CMG)

Name & Address of Service: Glencourt
54 Hillside Park
Bargoed
CF81 8NL

Date of Visits: 31st May, 10th July & 17th July 2019

Visiting Officer(s): Diane Davies, Commissioning (CCBC)

Present: Fay Louise Harvey, Registered Manager

1 Background

Glencourt is a large, 4 bedroom, detached house located in a quiet residential area in Bargoed. It has a large wrap around garden with a paved patio area to the rear.

Glencourt is a residential home for individuals with Learning Disabilities which is owned and run by the Care Management Group, a registered provider within the County Borough of Caerphilly.

There are currently 4 residents residing at the property, 3 are funded by Caerphilly and one by a neighbouring Authority.

Over the course of the visits, the monitoring officer was able to view a number of files, processes, procedures and documentation, meet with the house manager, some members of staff and the residents.

Dependant on the findings within the report, corrective and developmental actions will be given to the provider to complete. Corrective actions are those which must be completed (as governed by legislation), and

developmental actions are good practice recommendations.

2 **Previous Recommendations**

2.1 Corrective Actions

The manager to ensure that all staff sign up to any updates or new Risk Assessments and Care Plans in a timely manner. (Record Keeping)

Met

2.2 Developmental Actions

Due care and consideration to be given when typing/writing information relating to individuals that the personal detail is correct. (Record Keeping)

Met

3 **Findings from Visit**

Documentation

All personal files for staff and residents are stored securely in a locked cabinet in the manager's office. Four files were viewed and all contained an index and dividers which provided easy access to locate the documentation required.

There were a number of files holding all policies and procedures and these had been reviewed in 2018 with future review dates stipulated. All documents were accessible for staff to view.

All documentation was clearly compiled and the personal profile and missing persons profile held a current photograph of the resident. The personal plan was outcome focussed and covered areas such as self care skills, communication and out in the community etc. It held a wealth of information that provided a good overview of the individual and their day time and night time needs together with their likes and dislikes.

The Service User guide was user friendly, easy read with large print and supporting pictures and this evidenced that CMG produces information in different formats as required.

All policies and procedures and all documentation viewed was accompanied by read and sign sheets with staff signatures present throughout the files to confirm their acknowledgement.

There were many risk assessments in place which provided staff guidance in areas such as the bathroom, community, medication, car, colouring hair, choking and the use of a wheelchair etc. and these were all up to date.

All historical and current DoLs were in place with new applications apparent on file.

Approach to Care

The provider is outcome focussed and will promote residents' independence by providing active support to encourage individuals to participate in as many aspects of their daily life as possible.

Throughout the visits, residents were observed being supported by staff members and it was pleasing to see individual residents in the kitchen making tea. A number of photographs of residents participating in cooking and baking were also viewed.

Throughout each visit staff were applying a person centred approach for each resident with different methods of communication to suit each residents needs i.e. verbal, hand signs and objects of reference. It was apparent that staff and residents were familiar and comfortable in each others company.

Glencourt support residents and families with maintaining their relationships and family members are always welcomed and will regularly visit residents.

Each resident has a picture planner (activity planner) on the wall which informs of activities undertaken on a weekly basis e.g. touch trust, sing along, Cardiff Bay, walking, eating out, coffee morning, trips to the coast etc. There was also evidence of arts and crafts in one of the rooms and many photographs evidencing activities such as pamper session, baking etc.

There was evidence of a holiday to Cheddar Gorge arranged for one of the residents and a pamper weekend being planned with another resident.

Health and Fire Safety

Each resident had an individual health file which contained a health action plan, medication profile, PRN protocol, MAR sheet, hospital passport etc. as well as providing general health information, communication methods, diet, weight records etc. All working documents contained staff signatures as required.

Each file held a list of professional contact numbers e.g. GP, shoe specialist, dentist, psychologist etc. and there was evidence of many visits, appointments and referrals being made.

A PEEP was available to view on file and fire drills are undertaken on a monthly basis for good practice.

Nutrition

All residents are supported to undertake shopping as and when required and staff will encourage a healthy diet, however, all residents are able to choose what they want to eat each day.

All residents participate in food preparation and staff provide active support to help residents prepare meals and make drinks etc. and this was observed during the visits.

Environment

The environment is spacious and immaculately presented throughout with a quiet, relaxed atmosphere. Each bedroom was personalised and individually decorated with items of choice and photographs displayed in each room. Grounds around the house were clean and tidy.

Staff Questions

The member of staff was fully aware of where residents' files together with care and support plans, personal plans and risk assessments are kept and informed that she is able to access them at any time. The staff member also informed that any updates to documents are noted in the communication book and staff must sign a signature sheet to confirm they have read and understood the contents.

The member of staff praised the house manager for and informed that she manages her time really well and engages well with the residents and staff. The member of staff added that she is a good manager and is approachable, supportive and fair.

The member of staff was fully aware of the activity planners in place for each resident and also informed of the in house activities that take place e.g. arts and crafts, cookery and pamper sessions. The member of staff also advised that all staff will use their initiative to identify and support residents to events/activities taking place locally. E.g Blackwood Beach.

It was apparent that the member of staff was aware of all the residents and their needs and what is important to know about them. She informed that all residents are non verbal and said that she uses sign and objects of reference to communicate with each resident.

The member of staff advised that regular team meetings and supervision sessions are held where by the general running of the home is discussed and all staff are encouraged to contribute and put suggestions for improvement forward.

The member of staff informed of the CMG training database and advised that she is hoping to progress her career within the company and is able to nominate herself for any training that she feels is required.

Recruitment, Training and Induction

Staff files contained the necessary paperwork and evidenced that a robust recruitment process had taken place with all required information such as application form, two references, job description, photo ID, up to date DBS, contract of employment, training certificates etc. available to view on file.

CMG currently provide an in-house induction to all staff and it was positive to see the newest member of staff being supported through the process.

CMG offer both mandatory and non mandatory training courses and these consist of e-learning and class room based face to face sessions. CMG provide the majority of training in-house but will use external companies for courses such as first aid. The training matrix was viewed and this evidenced that all staff are up to date with all mandatory training requirements and are supported to undertake training that is of interest.

An electronic system is used to record and store information on all training undertaken called 'fulfilling potential'. Staff members are responsible for ensuring that their training is up to date and they are able to access the site to request any training of interest.

Staff supervision dates proved to be regular and consistent.

Complaints and Compliments

Glencourt has not received any complaints for a number of years.

Quality Assurance

The Annual Quality Review for 2018, provides data compiled from responses to questionnaires from staff, residents and stakeholders and this also concluded outstanding practice.

CMG undertake an internal quality audit on each property at least three times throughout the year.

4 Corrective / Developmental Actions

4.1 Corrective Actions

None

4.2 Developmental Actions

Ensure agreements are drawn for taking and sharing resident's photographs and signatures are obtained to authorise use.

5 Conclusion

The visits were positive with a warm, welcoming and relaxed atmosphere acknowledged on each occasion with many good practices observed throughout. All staff displayed good interaction with residents and were helpful and supportive.

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 individuals and/or their families should they ask to see them.