

CAERPHILLY COUNTY BOROUGH COUNCIL DIRECTORATE OF SOCIAL SERVICES
COMMISSIONING TEAM

CONTRACT MONITORING REPORT

Name of Provider: Homes of Excellence

Name of Service: Victoria House Residential Home

Date/Time of Visit: Friday 13 August 2018

Visiting Officer(s): Caroline Roberts, Contract Monitoring Officer

Present: Deena Cromie Bolwell-Williams (Manager)

1. Background

- 1.1 Victoria House is a residential home for people with learning disabilities located in Blackwood. It is owned and run by Homes of Excellence, who are a registered provider within Caerphilly borough. The provider also runs another residential home in the borough, Luk Ros.
- 1.2 Victoria House is a large dormer bungalow, in a quiet residential area of Blackwood. At the time of the visit there were three residents; one funded by CCBC, and two funded by a neighbouring local authority.
- 1.3 The home was inspected by Care Inspectorate Wales on 16th February 2018 and there were no non compliance notices issued; however, three recommendations for improvement were made.
- 1.4 On the day of the visit, the monitoring officer was able to meet two residents, some staff, and the Manager. Paperwork was also examined during the visit, and most areas of the home were seen.
- 1.5 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 actions

2.1 Corrective Actions

- 2.1.1 Service plans to be written with involvement from service user (and/or representative) signed and dated. (NMS 6.6) **Timescale: Within 1 month of the date of this report.** Findings: Met

2.1.2 The Home to ensure that all staff members receive all mandatory training and updates in a timely manner. (NMS 26.1) **Timescale: Within 3 months of the date of this report.** Findings: Partially Met – see main body of report.

2.2 Developmental Actions

2.2.1 Staff to record compliments to celebrate the home's success and also to feed into the quality assurance process. Findings: compliments are recorded when received.

2.2.2 Home to compile a training matrix which evidences the courses attended by all staff members in one document for ease of reference. Findings: Training Matrix is now in use.

3. **Findings**

3.1 Documentation

3.1.1 Documentation was observed to be stored securely in a lockable cabinet and room.

3.1.2 Each individual has a daily diary and a report is written on a daily basis, which makes reference to what someone has done, what they have enjoyed, how their mood has been etc.

3.1.3 There was evidence within files that people are being seen regularly at health appointments. Staff complete a report of what has happened at each appointment, which evidences good practice.

3.1.4 All documentation seen was presented in a clear format, and in chronological order (where applicable), and was well presented.

3.1.5 During the visit, only one file was viewed by the visiting officer and that related to the individual who is supported by Caerphilly Borough Council.

3.1.6 Whilst the Personal Plans were person centred, there was no evidence to suggest that the individual or a representative had taken part in the development of the plan. This had been discussed during the previous monitoring visit in 2017 and the Manager was advised that individuals and/or representatives should be given the opportunity to co-produce the Plan.

3.1.7 Daily recordings are kept on individuals, describing routines such as attending Day Centre and then their routine on arrival back home. They describe evening meals, domestic tasks such as taking clothing to the laundry room, when having a spa/sensory bath and when relaxing in their pyjamas, what mood the individual has been in etc.

3.1.8 There was evidence that the individual has access to appropriate health support and is reviewed annually or when required by the Community Learning Disability Team.

- 3.1.9 The files were found to be detailed containing what the individual enjoys i.e. T.V./DVD's/Music, walking, sensory sessions, attending Church and visiting the local pub.
- 3.1.10 Individual goals are clearly recorded for the individuals to aim for i.e. encourage and support independence in the community, try different activities.
- 3.1.11 During the monitoring visit, one individual was already out in the community, whilst one lady was preparing to go out shopping and another was planning to go out in the afternoon.
- 3.1.12 A food diary is also maintained by staff and completed appropriately.

3.2 Risk Assessments

- 3.2.1 Risk Assessments were seen to be reviewed monthly, with the last review being undertaken on 2nd July 2018. Risk assessments covered such areas as using the garden swing (due the individual toppling backwards), bathing/toileting, outside area, travel by car (due to removing seatbelt) etc.
- 3.2.2 A seizure book is maintained by staff outlining the date/time/seizure length and staff are given the opportunity to provide additional comments.
- 3.2.3 The visiting officer observed a DoLs (Deprivation of Liberty Safeguards) being in place and that a best interest meeting had taken place.

3.3 Staffing and Training

- 3.3.1 During the day, Victoria House has two members of staff on duty and then one on waking nights.
- 3.3.2 Should a member of staff be absent, other members of staff will volunteer to cover the shift as the home does not use agency staff.
- 3.3.3 All staff have the responsibility for ensuring that individuals undertake various activities.
- 3.3.4 At the time of the visit, there were no staff on long term sick leave and there were no disciplinary issues.
- 3.3.5 Staff employed by Homes of Excellence use classroom based training and the home has access to courses run by the Blaenau Gwent & Caerphilly Social Care Workforce Development Team.
- 3.3.6 The visiting officer viewed the training matrix and whilst Mandatory training was up-to-date, it was noted that staff were not up-to-date with Infection Control; therefore, refresher courses are required. This was discussed with the Manager at the time of the visit.

3.3.7 Non Mandatory courses were also observed to be undertaken in order to meet the needs of the people residing at Victoria House i.e. PBM, Epilepsy.

3.3.8 Quality of training is assessed by the Manager observing staff implementing the new skills and knowledge that they have learned.

3.3.9 All staff hold the relevant QCF qualifications.

3.4 Staff Files

3.4.1 The visiting officer viewed two staff files and both files contained a job description, a signed contract of employment, a photograph and a current DBS. Both files contained two references.

3.4.2 The Manager advised that staff can also work over 48 hours per week.

3.4.3 Staff receive supervision every 2 months and an annual appraisal. Supervision of staff is undertaken on a 1:1 basis.

3.5 Nutrition

3.5.1 Victoria House has four weekly menus, which rotates. However, this can be adapted to meet an individuals requirements or at their request. Whilst the menu is set, each individual has their own taste; therefore, food available is that of their choice.

3.5.2 Most of the residents enjoy assisting staff with the preparation of the food and the timing of meal times depends on what activities are undertaken by the individuals during the day.

3.5.3 One individual enjoys assisting with the shopping and also enjoys pushing the trolley and packing the goods purchased.

3.5.4 The Manager advised that all staff ensure that the residents enjoy a variety of foods that are healthy and nutritious.

3.6 Activities

3.6.1 All three residents have active days and their own personal likes and dislikes. One individual enjoys visiting the local library and purchasing books and papers. One enjoys going out for walks and one individual enjoys "everything" and particularly enjoys shopping. Both the Manager and the Senior Support Worker advised that weather permitting; every resident goes out into the community daily.

3.6.2 Each member of staff has a responsibility for co-ordinating activities and use their own vehicles to transport individuals. All personal vehicles have business insurance.

3.6.3 There is an activity timetable in place for only one individual as this person likes to have a routine. For other people residing at Victoria House, activities are co-ordinated around the weather and their preference.

3.6.4 People's religious beliefs are met by attending Church services and coffee mornings.

3.6. The Manager advised that all residents are "constantly out" doing activities. This was evident during the monitoring visit as one gentleman had already left the property to attend Day Centre, one lady was on her way out shopping and the third individual was planning to go out in the afternoon to the library. It was positive to observe the individuals having full active lives.

3.7 Mobility and Aids

3.7.1 The property has one chair hoist for the bath and one wheelchair for one gentleman to use should an outing involve a lot of walking. The wheelchair is fitted with foot plates and a safety belt. Annual checks are undertaken.

3.8 Health and Safety

3.8.1 Whilst viewing the accident book, it was noted that one accident had occurred in May 2017 which had not been reported to CIW or the Local Authority. This was discussed with the Manager and it was confirmed that this matter was also highlighted during the CIW's inspection. The Manager was reminded that a Regulation 38 (now Notification 60) should have been completed and shared with both agencies.

3.8.2 Regular maintenance checks are undertaken by the Health & Safety Officer (Senior Support Worker) and the proprietor will replace any goods that require replacing.

3.8.3 The last fire assessment was completed by Fire Quip (Fire Safety Engineers) in March 2018 with the next review required in 2020.

3.8.4 As an outcome of the fire assessment, four recommendations were made and all four have been completed. The visiting officer viewed the appropriate records.

3.8.5 The last fire drill was undertaken in May 2018, during which 5 staff and 2 residents were present.

3.8.6 Weekly tests on the fire alarms and automatic door release are undertaken by the Health & Safety Officer.

3.9 Complaints & Compliments

3.9.1 At the time of the visit, the Manager advised the visiting officer that no complaints had been received. However, should a complaint be received in respect of a member of staff or about the service provided, staff would be advised via supervision and during staff meetings.

3.9.2 Within the last year, 3 independent professionals have provided positive feedback. An independent Support Worker commented on an individual's presentation during a coffee morning, advising that the person always looks well dressed; a Dentist commented that staff provide good oral care and a Psychiatrist also commented on an individual's presentation.

3.9.3 Should individuals residing at Victoria House require support and advocacy, family members and or staff members will assist. One individual has an advocate provided via the Deprivation of Liberty Safeguarding Team.

3.10 Quality Assurance

3.10.1 During the monitoring visit, surveys that had been issued to residents and stakeholders were viewed. For the residents, due to the communication difficulties, pictorial surveys are used.

3.10.2 Surveys are also distributed to staff and as a result of the feedback, improvements have been made to the garden and path area.

3.10.3 A report is then written based on the results obtained from the surveys. One outcome is to increase the views from professional stakeholders i.e. G.P./DNs/community members.

3.10.4 Victoria House currently has no individual that communicates in the medium of Welsh. When asked how the Active Offer is being implemented, the Manager advised that whilst she has basic knowledge of the Welsh language, consistent care in the medium of Welsh, would not be possible at present.

3.11 Manager's & Staff Questions

3.11.1 The Manager advised that there is no CCTV at the property.

3.11.2 There were no issues with equipment at the time of the monitoring visit.

3.11.3 The Manager also manages the sister home and was last visited by the RI (Registered Individual) in June and the visits will continue every 3 months. The Manager also advised that she feels supported by the RI and is supervised every 2 months and has a senior meeting every 2 months.

3.11.4 Appropriate referrals to outside agencies are made as and when required i.e. OT, SALT, GP.

3.11.5 All DoLs applications are up-to-date and the resident's file viewed by the monitoring officer, contained the appropriate DoLs documentation and was observed to be valid until 2019.

3.11.6 The monitoring officer spoke with the Senior Support Worker who was very knowledgeable about all 3 individuals residing at the property.

- 3.11.7 The staff member was aware of where to locate the care plans, personal plans and risk assessments and advised that any changes are discussed during staff meetings.
- 3.11.8 The member of staff advised that due to the residents being non-verbal there are indicators that each individual displays/triggers, that will inform staff of an indication of how an individual is feeling.
- 3.11.9 The Manager was described as being “hands on” and spends time walking around the home and assisting the residents.
- 3.11.10 When discussing activities, the staff member advised that all residents enjoy being out in the community and should the weather not permit an outside activity, they will undertake activities indoors such as domestic skills, cooking, art & crafts, playing connect 4, floor exercises, play darts etc.
- 3.11.11 When asked about a particular individual, the staff member was knowledgeable and explained in detail about the particular health issue the individual has. Due to the communication difficulties, the member of staff explained that the individual uses his own sign language which staff have become familiar with and there is certain body language that staff observe.
- 3.11.12 It was clear from speaking with the member of staff that he enjoys his role and the daily interaction with the residents.
- 3.11.13 During the visit, the monitoring officer held brief discussions with two of the residents. One gentleman was observing a paper and was waiting to be taken out whilst another resident, who had returned for a shopping trip, proudly showed the visiting officer her room. The room was of a good size, with en-suite and was personalised with family photographs, pictures of horses etc. something clearly that the individual enjoys.
- 3.11.14 Staff were observed and overheard interacting with the residents in a positive manner, which evidenced the homely feel of Victoria House.

3.12 Environment

- 3.12.1 The Manager advised that some of the rooms at the property had recently been decorated and other areas of the home will be redecorated in due course.
- 3.12.2 The visiting officer had permission to access the bedrooms used by the residents and all three were decorated and personalised according to the individuals taste.
- 3.12.3 The home was clean and tidy, with good quality furnishings.

4. Corrective / Developmental Actions

4.1 Corrective actions

- 4.1.1 For the home Manager to complete and forward a notification 60 to CIW and the Local Authority should an incident / event affect a persons well-being i.e. hospitalisation.
- 4.1.2 For all staff to be up-to-date on Infection Control Training and Epilepsy
- 4.1.3 For files to be more organised

4.2 Developmental actions

- 4.2.1 For Ageing and Death Wishes information to be up-dated.
- 4.2.2 Poor quality of photograph on staff members file to up-dated.
- 4.2.3 For staff to attend training on GDPR.

5. Conclusion

- 5.1 The monitoring visit was positive, with several examples of good practice observed. The home benefits from a stable and small staff team, who were clearly knowledgeable about the residents they support.
- 5.2 A range of activities are available to the residents, and there are daily trips out of the home ensuring community participation.
- 5.3 Routine monitoring will continue at Victoria House and the monitoring officer would like to thank all involved for their time, the information shared and the hospitality shown during the visit

Author: Caroline Roberts, Contract Monitoring Officer

Date: 6th September 2018

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