



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Inspection Report on

The Clynsaer Care Home

**Clynsaer House
Cynghordy
Llandovery
SA20 0LP**

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Description of the service

The Clynsaer is registered to provide accommodation and personal care for up to ten younger adults with a learning disability; up to two (2) people who have functional mental health ill health; and one person aged over sixty five (65) and over with a learning disability within the 10 (ten) places. At the time of the inspection the home was fully occupied and many people had lived there for a number of years.

The property is a large former Victorian house set in extensive grounds of approximately three acres. As well as the main house, there is a separate activities centre which is well utilised daily by the residents. The provider of the service is Oakview Care and they have appointed a responsible individual. A service manager is in post and has submitted an application to become the registered manager, with day to day responsibility for the running of the service.

Summary of our findings

1. Overall assessment

We found areas of consistently good person centred practice supported by effective quality assurance measures which were overseen by the Responsible Individual. People are supported in a person centred way to make choices, be active and as independent as they can be. They have a variety of things to look forward to whilst living at the home and told us they like living there. The service offers spacious comfortable and well maintained accommodation.

2. Improvements

The service continues to develop and improve the person centred practice at the home and continues to develop it's external facilities such as the day centre and gym.

3. Requirements and recommendations

Section five of this report sets out the action the service provider need to take to ensure the service meets the legal requirements and recommendations to improve the quality of the service provided to people in the care home. Below is a summary of the key issues.

- To contact the placing authorities to arrange a review of care and support provided to people living at the home.

1. Well-being

Summary

People are supported to achieve well-being by being provided with a wide range of opportunities to be active and involved in their community. They are also supported to choose how they spend their time at home, to do things they enjoy and to voice their opinions about their experience. Staff have developed good relationships with people and support them to make decisions about all aspects of their life at Clynsaer House.

Our findings

People are able to express their views and opinions. We saw that staff were very patient and understanding with people and were having conversations that put people at ease. Staff were observed to encourage people to attend to their personal care needs and people seen were well groomed and appropriately dressed with their own style visible. We also found that people were encouraged to have their say at the regular house meetings. We saw the minutes of meetings which showed the detailed planning of a party by people. Records showed that the regular keyworker reviews with individuals were very much led by the person and focused on how they felt they had been progressing with their activities and if they were what they wanted. Therefore people are able to express their feelings and are listened to.

People's potential for personal development and independence is maximised. We found that the staff empowered people to do things for themselves in a way that was reassuring and safe. During lunchtime, people were busily getting their own lunch and getting involved in cleaning up afterwards and then moving on to the next activity. One person told us that *"they are fixing the outside garden to help me to move around safely without falling and they have done up my room so I can get about the house more easily"*. Records showed that there was an emphasis on developing people's potential based on what is important to them. For example, one person was developing their independence by doing their own laundry and cleaning their own room. The agreed plan was to eventually withdraw staff support as they progressed. This clearly illustrates people are being enabled to do things for themselves, maintain, recover and develop their individual skills.

People can be involved, participate and feel valued. We saw people taking part in a variety of activities. These activities included a combination of community based activities and the use of the on site day centre. We were told by staff that there is a balance to be struck between participating in community activities and using the day centre. One person told us that he liked *"going shopping and buying the things I like and then have a hot drink afterwards"*. People told us what they liked living there and gave us examples of the many activities they took part in. These included gardening, gym, arts and crafts, woodwork and

leisure activities including multisensory sessions. The manager told us that the staff hold regular meetings with people who live at the home when they discuss what they have planned for the week ahead and where any changes wanted are made. They also discussed longer term plans in the regular house meetings and with keyworkers in the monthly activities reviews. We were shown lists of activity plans and these included: card making; arts and crafts; quiz, parties; movie nights; beauty sessions; and baking and cooking. One person told us "*that we use any excuse to have a party*". We also noted that the people had regular sessions for individuals for personal shopping and taking part in various community activities. Therefore, people have control and are offered choices in a meaningful way which ensures that they are valued and feel part of their home.

People feel they belong and have safe positive relationships. We observed positive interaction between people and staff. We saw that staff had time to spend with people living at the home and provided them with a sense of security and comfort. We saw staff being very patient and understanding and having conversations that ensured people were put at ease. Records showed that staff work closely with people to develop their person centred planning information and staff were observed to be knowledgeable about people's backgrounds, and their likes and dislikes. This information was seen in care files and it was clear that this had been read by the staff present. We were told by one person that the staff "*are great here, they help me with getting ready and like to have a laugh*". Another person went on to say that "*x is my best friend and we have known each other for years*". This demonstrates that people have stable, well developed relationships with the other people they live with. They are supported by staff that ensure they feel they belong.

2. Care and Support

Summary

People are supported by staff, who have a good understanding of their care and support needs which are underpinned by a person centred care model. People are encouraged to make decisions, be independent and to contribute to the running of the household while staying at the home.

Our findings

People receive the right care at the right time in the way they want it. Records showed that each person had a person centred plan which showed how best to support them. These plans were detailed and included a social history. They provided a sense of who is the person, showing what was important to them, their preferences and their likes and dislikes. The plans also considered what aspirations the individual had for the future. Risks assessments supported people's choices showing what was needed to be done to minimise any risks. Records showed that care planning began with thorough assessments when people first started using the service. Reviews were being carried out with people to discuss any changes to the existing care plan and monitoring progress with achieving goals. Staff told us that they discussed any changes in the persons' wellbeing, health and medication they were taking. This was illustrated in the sample of files viewed and were seen to be made easy to read using pictorial content. Our discussion with people and observations indicated that people's plans were an accurate reflection of the care and support being provided. However, copies of the placing authority's assessment and care plan were not available to underpin the home's care plan. The manager should contact the placing authorities to arrange a review of care and support provided to people living at the home and ensure that copies of the local authority assessments and care plans feed into the home's care plan. This demonstrates that people's individual needs and preferences are understood and anticipated.

People have good relationships with staff. We saw the manager and staff genuinely and sincerely engaging with people throughout the day. All interactions were relaxed and respectful and allowed people to express themselves using a range of communication techniques. We saw various members of staff communicating with people using their preferred method of communication. This skilful approach enabled people to express themselves. A social care professional told us *"staff are able to support people well because they communicate and reduce difficulties by understanding a person's needs"*. Another professional told us that *"staff are well trained and another told us that "staff seem to have a sense of responsibility towards the people they care for and take the keyworker system seriously"*. The organisation employs a maintenance worker who undertakes the day to day maintenance and carries out regular checks of equipment. One person told us

how they liked to help the maintenance person and had developed skills to do this in the day centre. Therefore, staff have good relationships with people who live in the home and all support given is person centred.

People are supported by staff, who understand and have good working knowledge Deprivation of Liberty Safeguards of (DoLS) and the key requirements of the Mental Capacity Act (MCA) which ensure that people's human rights and legal rights are respected. The manager and staff had completed all the relevant training for working with DoLS and the MCA and discussions indicated that they had a good working knowledge of this legislation. At the time of the inspection there were four (4) DoLS authorisations in place. However, the manager showed us applications for other people whose liberty may be deprived for whom the provider is awaiting a response from the local authority. The home operates an open door policy and the manager told us that risk assessments have been completed where needed and staff demonstrated an awareness of these. Therefore, people's human rights and legal rights are upheld and respected and they are treated with dignity and respect.

People are involved in making decisions about their care. People told us that they have their own routines: when to get up, go to bed, and have a shower for example. They also told us that they had their own days for doing their laundry and tidying their bedrooms and were able to have support from staff where needed. We saw that people were actively involved in all aspects of daily living. People told us they chose what they wanted to eat. When we looked at records we saw people's food preferences recorded and that people had eaten the food they had chosen. We observed people making choices about what they would eat that day. One person told us that they prepared their own meals with staff support. We saw a person making their own lunch with food they had chosen and making their own cup of tea. Following the lunchtime meal, people took part in washing their own dishes and tidying up the dining room. We saw that staff gave people support without taking over the task. Records showed us that people were being encouraged and supported to eat well and to have a good diet. There was a good quality rotating menu which was regularly updated and changes made to suit the seasons. We saw that the home was stocked with an ample supply of provisions for people to make their choices. We were told that if anything different was needed then people would go shopping for it with staff support.

People were involved in other various domestic tasks. We saw a daily cleaning schedule on display for staff to follow. We noted that staff and people staying at the home had done some of these tasks together, which people told us they enjoyed. Therefore this shows that people are actively engaged in making decisions about the service they receive and are being offered a choice of food and drink they enjoy and are supported to understand and make healthy choices.

3. Environment

Summary

We found Clynsaer House provides a comfortable, clean homely and personalised environment that is spacious and well maintained. People can be assured that there is sufficient internal and external space and facilities to meet people's needs.

Our findings

People can feel included and valued because they are supported in a personalised environment that is appropriate to individual needs. We found that the premises were warm and welcoming, comfortable, clean, homely and personalised. This was observed when we viewed four people's bedrooms which had their personal property and were arranged in the way they wanted. These reflected their personalities and we were told by a person living at the home that "*I'm really happy with my flat (room)*". Another person commented that "*This is my home and they (staff) help me to keep it tidy.*" People showed a sense of pride when telling us about their rooms and the other areas of the home. Discussions with the manager showed that the service has an ongoing programme of refurbishment and were in the process of completing refurbishment work in various parts of the home. There were also ongoing external works being completed such as an access ramp. Individual's 'Person Centred Plans' included people's preference for how they wanted their rooms. Therefore, people are cared for in a safe, clean and secure environment.

People live in accommodation which meets their needs and supports them to maximise their independence. During the tour of the property we observed the storage of materials which are subject to Control of Substances Hazardous to Health (COSHH) regulations, were safely stored in a lockable metal cabinet. We observed that mops and buckets were colour coded and stored on a rack to raise them off the ground. We viewed the laundry which was clean and had a system for preventing cross contamination. The registered manager was able to adequately explain their system for prevention of contamination and also the importance of ensuring people's property was not mixed up with others. People living at the home had care plans which indicated that part of their plan included being supported to use the laundry room to wash and dry their own clothing as well as other independent living skills such as tidying their room and shopping. People can be assured that they live in a safe, homely and comfortable environment.

People are generally cared for in a safe, secure, warm and well maintained surroundings. We saw staff knocking politely on people's doors to their bedrooms and then showing respect and dignity when entering their bedrooms which were people's own personal space. The bedrooms viewed had window restrictors in place to ensure safety. During the

tour of the property we saw that there were two (2) bathrooms and three (3) shower rooms. There were also three (3) bedrooms which were en suite. Water temperatures were appropriate. There were no personal toiletries present in the communal bathroom areas and the manager explained how people have their own toiletries. During the tour we noted that food stuffs were being stored on the floor in the storeroom and the manager explained that shelving was being fitted by the maintenance worker to address this. The maintenance records folder was viewed and we found that fire safety equipment and general safety checks were completed and up to date as well as a system for monitoring and reviewing maintenance and servicing of equipment. Therefore we found that the home generally provides a well maintained and safe environment with an ongoing schedule of improvements to the home.

People had their own private rooms and communal areas where they could socialise. The manager showed us around the home and we met various people who lived at the home and staff. Both people who lived at the home and staff were clearly proud of their home and communicated their feelings through words, hand gestures and their own signs. We saw an extensive garden area which included a well maintained front lawn, various seating areas, and a caravan and summer house. The manager told us that the caravan and summer house belonged to two people who lived at the home and used them as quiet retreats when they wanted some space to relax. We were also shown the day centre which is situated in the grounds and this was a very popular venue for people to meet and take part in a variety of activities. One person told us that "I like to use the gym in the mornings and the poly-tunnel where I grow orchids". Therefore people's relationships are enhanced by a stimulating and easy accessible environment.

4. Leadership and Management

Summary

Leadership and management at the home focussed on continuous improvement that is steered by the implementation of the home's vision and values for support. The close support of the responsible individual has a significant impact on the development of the quality of care systems at the home and motivation of the staff team.

Our findings

People know and understand the care, support and opportunities which are available to them. We saw a detailed statement of purpose and service user guide. Both documents were available in pictorial format summarising the main points. The home places an emphasis on making information easy to read and accessible to people. They described the philosophy of care and the service aims. These include treating people with disabilities as people first, focussing on abilities rather than disabilities and respecting the rights and responsibilities of people. Staff were observed working in a way that demonstrated these values. Staff were seen to interact with people using a range of communication techniques such as gestures, symbols and engaging with people's unique forms of communication. This was informed by communication plans - as part of the person's person centred plan - which detailed all aspects of their different needs. Staff were observed to be aware of people's communication needs and interacted with people in a sensitive and patient manner. Therefore the vision, values and purpose of the service are clear and is actively implemented.

People receive high quality care and support from a service which sets high standards for itself, is committed to quality assurance and constant improvement. The service has a quality of care review process that draws on regular quality assurance procedures and takes account of the views of people. Monthly audits of all aspects of the service were being carried out by the manager. This was underpinned by a quality assurance policy and procedure that was detailed and included a simple diagram to explain the areas covered. These were being overseen by the responsible individual. People were actively involved in reviewing the quality of the service and were being asked for their views on a regular basis. We saw from records that people were asked to describe their experience of living at Clynsaer House. Records showed that visits were carried out by responsible individual at more than the minimum required frequency and were seen to be detailed and of good quality. The manager told us that the support they received from the directors of the organisation was very good and "*I feel I can contact them at any time if I need to discuss something with them*". The manager went on to say that the directors are "*very supportive and encourage new ideas*". This was evidenced in the creative responses by the service to difficult situations they had to deal with. Therefore people are able to contribute to the improvement of the service.

There is a willingness to accept accountability when things go wrong, the response of the service is to talk about it and inform people. This approach to openness and transparency gives people and their family a real sense of confidence in the organisation, which reinforces a culture of learning by experience. We saw records that showed that the staff team had discussed recent incidents at the home and had learnt lessons from these events. For example, the manager told us about a situation where they had to manage the behaviour of an individual and had identified from discussions and updating their person centred plan some possible potential triggers and had developed a quite unique solution which after a period of time minimised the incidence of this behaviour. Therefore both staff and people who live at the home learn and develop from experience which ensures people and their families have a real sense of confidence in the organisation, which reinforces a culture of learning by experience.

People receive care and support from staff who are vetted and receive training and supervision. We saw that recruitment checks were being carried out to assess whether people were suitable to work at the home. This was followed by a probationary period and structured induction training which was in line with the Care Council for Wales Social Care Induction Framework. We saw a training matrix and individual staff records that evidenced this, showing that each staff member had a training plan. Staff were having one to one supervision meetings with the manager on a regular basis. Staff we spoke with confirmed the evidence we saw recorded and demonstrated a good understanding of the training and its application to practice. They also said that they were well supported by the manager and the rest of the team. There was a sense of pride in the role they undertake. This shows that people benefit from a service where staff are well led, supported and trained.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None

5.2 Areas of non compliance identified at this inspection

None

5.3 Recommendations for improvement

We recommend the following:

- The manager should contact the placing authorities to arrange a review of care and support provided to people living at the home and ensure that copies of the local authority assessments and care plans feed into the home's care plan.

6. How we undertook this inspection

This was a full inspection undertaken as part of our inspection programme. We made an unannounced visit to the home 13 January 2017 between 9.00 am and 3.00 pm

The following methods were used:

We spoke with the following:

- Four (4) people living at the home;
- Two (2) relatives;
- Home Manager;
- Deputy Manager
- Seven (7) staff;
- Activities Coordinator;
- Two (2) Healthcare professionals.

We looked at:

- Two (2) care records of people living in the home;
- Two (2) staff files;
- The Statement of Purpose;
- Service User Information Guide;
- The maintenance book;
- The annual quality report;
- The reports of Regulation 27 visits.

We walked around the home;

- Observation of people was not undertaken using the Short Observational Framework for Inspection (SOFI) tool as people were able to tell us about their care and support. The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us from a person's perspective; how they spend their time, activities, and interactions with others and the type of support they receive.

Further information about what we do can be found on our website www.cssiw.org.uk

About the service

Type of care provided	Adult Care Home - Younger
Registered Person	Oakview Care Ltd
Registered Manager(s)	Applying to Register
Registered maximum number of places	10
Date of previous CSSIW inspection	17 September 2015
Dates of this Inspection visit(s)	13/01/2017
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
Additional Information:	