



Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Pen-y-wain Bungalow

Nantyglo

Type of Inspection – Focussed
Date of inspection – 11th November 2014
Date of publication – 5th January 2015

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Summary

About the service

Pen-y-wain bungalow is registered with the Care and Social Services Inspectorate Wales (CССИW) to provide accommodation for up to four adults with a learning disability in need of personal care.

The registered provider is Cwm Care Ltd and there is a nominated responsible individual (RI) to oversee the operation of the home on behalf of the company. Mrs Keri Musa is the registered manager of the home and has relevant training and registration with the Care Council for Wales required for managing the home.

The home is situated in Nantyglo, a small village in the county borough of Blaenau Gwent, South East Wales.

What type of inspection was carried out?

We (CССИW) carried out an unannounced focussed inspection on the 11th November 2014 between the hours of 11.40 am and 3.20 pm. The inspection concentrated on the quality of life of the people who live in the home and information for this report was gathered from the following sources:-

- discussion with the registered manager and staff
- observation of staff support and interaction with people using the service
- discussion with one person using the service
- detailed examination of two service users files
- telephone discussion with professionals providing therapeutic services to people at the home
- telephone discussion with a relative of a service user
- consideration of staff training.

What does the service do well?

No significant areas of good practice were identified that were over and above practice determined by the National Minimum Standards for Care Homes for Younger Adults in Wales 2002.

What has improved since the last inspection?

Since the last inspection the registered person has acquired an adapted vehicle permitting ease of transport needs for people using the service.

What needs to be done to improve the service?

No non-compliance notifications were issued.

We notified the registered person of a technical non compliance with Regulation 15 (2) (c). This is because the registered person had failed to update, and reflect the needs for dental care and treatment in a service user plan.

We notified the registered person of a technical non compliance with Regulation 13 (5). This is because the registered person had failed to reflect the behavioural needs of a person using the service in a moving and handling risk management plan. It is expected the registered person will take timely and effective action to address the

concerns raised in this report and this will be tested at a subsequent inspection.

We recommend staff complete specialist training to ensure they have the required knowledge and skills to meet the changing needs of people using the service.

Quality of life

Overall Pen-y-wain provides a comfortable and homely environment and maintains a regular staff group to support the needs of people using the service.

People can be assured that a written plan 'a service user plan' is provided by the registered person and this details how the person's needs in relation to their health and welfare are to be met. We examined two service user plans and saw that these had reflected the needs identified by the person's local commissioning authority. We saw that the service delivery plans provided detailed guidance for staff of peoples needs i.e. daily living skills, community activity, mental health well-being, mobility and personal care needs. The service user plan was person centred providing a pen picture of the person's past lifestyle, daily routines, family relations, likes and dislikes i.e. baking cakes, puzzles. We saw aims had been identified and the required assistance to achieve the aim had been detailed for each separate aspect of the service user plan. This means staff are knowledgeable of the personal preferences of people using the service and of how they wish for their support to be provided.

People can be confident of maintaining a good level of physical health. This is because we found the service user plans had incorporated needs identified by specialist support services i.e. dietary, physiotherapy, occupational therapy. We also saw that a clear separate record had been maintained to detail peoples visits to primary health care services i.e. G.P, dentist, and required treatment. We found the service user plans provided guidance to ensure peoples health was maintained, and appropriate services had been accessed for assessment and treatment, when required.

People cannot always be confident that staff will be knowledgeable of their changing needs. We saw that the service user plans had been reviewed, however we identified some sections of the service user plan had not been reviewed or updated to reflect changing needs i.e. an oral care plan had not detailed needs relating to recent dental treatment. We discussed this deficit with the registered manager who admitted to having failed to update the service user plan. Failure to update the service user plan did not impact on the needs of the person using the service because dental treatment had been accessed. For this reason we judge this to be a technical non compliance.

People cannot always be assured of safe practices which ensures their own and the safety of people using the service. This is because we found that a behavioural risk management need had not been reflected in a moving and handling risk plan. However, we saw that other risk management plans had been reviewed and were up to date. We judged this to be a low level risk and as such an isolated non compliance failing. We discussed this concern with the registered manager who agreed to ensure the risk management plan was updated.

People can be assured care is provided by caring and understanding staff. We spoke with a person using the service who was able to confirm with us they liked the staff who they found to be helpful. We saw the person appeared to be well cared for and had been consulted and assisted with their choice of lunch. We observed the person to be in relaxed mood and content to rest in their bedroom. We also spoke with professionals providing a specialist support service who commented positively about the home and the service provided.

Quality of staffing

People can be assured staff are trained and skilled to meet their basic care needs. The registered manager informed us of staff training opportunities which were provided in-house and by the local authority. We saw a staff training matrix to confirm this and that mandatory staff training was up to date. The staff training matrix also showed a record of staff completing training of a national vocational qualification in care.

We saw from the staff training matrix that only a few staff had completed specialist training in behaviour management and dementia care. We recommend staff complete specialist training to ensure they have the required knowledge and skills to meet the changing needs of people using the service.

We observed staff to be open and relaxed in their relationship with the registered manager and the staff we spoke to confirmed with us that they felt the registered manager was approachable and supportive.

People can be confident of sufficient staffing levels and a continuity of staff. This is because the home has a low turnover of staff and two staff members are in attendance throughout the day, with a third staff member present to assist people in the mornings. This means people have opportunity to relate to a familiar staff group providing care.

Quality of leadership and management

This inspection focussed on the quality of life of people who live at the home. We did not consider it necessary to look at the quality of leadership and management in detail on this occasion; this theme will be considered at future inspections.

Quality of environment

This inspection focussed on the quality of life of people who live at the home. We did not consider it necessary to look at the quality of environment in detail on this occasion; this theme will be considered at future inspections.

We found Pen-y-wain to provide a clean and homely environment and that the facilities provided were appropriate to the needs of people using the service. We saw bedrooms were comfortably furnished and personalised with items to reflect the individual's choices and likes.

How we inspect and report on services We conduct two types of inspection; baseline and focussed. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focussed inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focussed inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.