

CAERPHILLY COUNTY BOROUGH COUNCIL, DIRECTORATE OF SOCIAL SERVICES

COMMISSIONING TEAM

Contract Monitoring Report

Name/Address of provider: Ty Parc Residential Home, Bargoed

Date/Time of visit: 4th December 2024 (Announced)

Visiting Officer(s): Caroline Roberts, Contract Monitoring officer
Neil Edwards, Responsible Individual
Paula Campbell, Registered Manager

Background

Ty Parc is a residential home that offers support for 11 individuals, 18+ years who have learning disabilities, including those who may be on the autistic spectrum.

Ty Parc is situated in the town of Bargoed, close to numerous amenities and a number of travel links. The home is registered with the Care Inspectorate Wales (CIW) and was inspected in April 2024 and the report can be located on their website.

The property has CCTV situated outside and inside the property, with consent from the residents/representatives.

The Active Offer – More than Just Words' (revised Welsh Language Act) requires providers of social care to provide communication in Welsh without the person asking for this. At the time of the visit, no residents conversed in the medium of Welsh. However, a discussion with the with the Social Worker and the individual is held prior to moving in. The home currently two Welsh champions.

During the visit to the property, the monitoring officer met with the staff team and all of the residents.

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

Previous Findings 2023:

Corrective

Evidence should be included to demonstrate that when reviews are undertaken, the reviewing officer has held discussions with the individual and/or representatives, taken feedback from the daily records and, also conversations held with the allocated social worker. (RISCA Reg 16) Timsecale: Immediately and ongoing MET

Developmental actions

For policy and procedures that contain the Local Authority's Complaints & Information Team contact details to be amended to reflect the change of address. MET

To consider including the Local Authority's commissioning email address to appropriate policy and procedures. MET

Findings

Documentation

At the time of the visit, there were nine residents residing at the property. 6 individuals are from the Caerphilly Borough, whilst the 3 remaining are supported by other Local Authorities.

Two resident files were viewed as part of the monitoring process, and both were verified as being Caerphilly placements.

All documentation was observed as being stored securely within the office and in a lockable cabinet. Other documentation is electronically stored on Clear Care, with the staff team having passwords to gain access.

Both files held recent photographs of the individuals, along with a brief history of the individuals' backgrounds prior to moving into Ty Parc. This gives the reader a sense of knowing the individual and would also support conversation when providing care and support.

Both files held a pre-admission assessment, evidencing that the provider can meet the needs of the individuals moving into the property.

Both files contained a Caerphilly Borough Social Services Care Plan, and all appropriate information had been transferred over to Ty Parc's Personal Plans. Both plans were written in the first person, with a signed hard copy retained separately in a lockable cupboard; therefore, evidencing that individuals or representative had been involved in the development of the Personal Plans.

The Personal Plans were observed to be person centred, written in the first person, outlining likes/dislikes, and broken down into what and when support is required. An individual's agreed goals and outcomes are also clearly identified and recorded. It was noted for one individual that they enjoy watching cricket and going to the races, going out in the community once their confidence is built upon, and they would like to play darts again. The second individual would like to go back into the community and visit a farm. Both individuals are currently receiving support on building their confidence to achieve the desired outcomes.

Appropriate Risk Assessments were observed to mitigate any accidents/incidents i.e., personal vulnerability, physical health, behaviour, relationships, choking, moving and handling, stroke to name but a few.

Both files had evidence of being reviewed, with the first being reviewed in November and December 2024, and the second file (a new resident) had had its first review in November. Reviews also evidenced individual/representative involvement.

Daily records continue to be detailed, with care staff recording the individuals wishes and feelings, their mood, medication, continence care, behaviours, activities and achievements and if the individual requires quiet time.

Records indicated that staff at Ty Parc make appropriate contact with outside agencies to support the residents i.e., GP, Physio, Solicitor, Opticians, Dentist, Social Worker etc.

Do Not Attempt Cardio-Pulmonary Resuscitation (DNACPR) is discussed with individuals, should they wish to do so.

Both files held Personal Emergency Evacuation Plans (PEEPS), with two grab files also available in an event of an emergency.

Deprivation of Liberty Safeguards (DOLs) applications have been submitted in a timely manner for those required.

An agreement is in place for representatives to be contacted, at any time, during an emergency.

Missing Persons profiles were in place, with a current photograph. Also present on file was a consent to CCTV/filming/photography.

Advanced Care Planning was also observed.

Activities

Individuals are encouraged to undertake activities which they enjoy. Whilst reading the daily records, it was positive to read the activities the individuals undertake daily. The majority of individuals are able to communicate their wishes and feelings and therefore, the staff endeavour to undertake the activities the residents choose.

An Activity Planner was observed to be in place; however, this is open to change.

During the visit, two individuals were doing some on-line shopping and being assisted by a staff member, another was enjoying some art and craft and proudly showed the visiting officer their artwork. Others were in their rooms watching T.V. and resting, whilst other residents were being visited by family members.

Ms Campbell showed the visiting officer the individuals craft folders, which held what craft the residents had done and there were helpful craft templates for all seasons.

Photographs are displayed whereby residents can be seen enjoying various activities.

The provider employs two activity co-ordinators for those individuals who are non-mobile and one individual to assist those who are mobile. All three individuals were described as very proactive and have introduced a lot of new activities.

During the visit, Ms Campbell advised that most residents tend to access the community on a daily basis.

Mr Edwards advised that this year, it was decided to commence the Christmas celebrations by having a meal in the home. Mr Edwards advised this was a great success with all residents and staff having a lovely time.

The home has purchased four new vehicles to accommodate more residents, two are accessible for individuals who use wheelchairs. Both residents and staff had an input into what vehicle would best meet the needs of the residents.

Health and Safety

No accidents had occurred during the last month.

Fire drills are undertaken, and appropriate records maintained.

A Fire Risk Assessment was undertaken 21st November 2024. No recommendations were made; however, the provider has since the last visit in 2023, appointed a Health & Safety Officer, who is proactive in undertaking any remedial work required.

Fire drills are held biannually, which includes day and night staff.

Mobility Aids and Equipment

Ty Parc is a home to a few individuals who use wheelchairs, slings and hoists. There is a hoist on each floor, whilst individuals have their own slings to minimise cross contamination.

One individual uses a steady. The NHS will service some equipment, along with another outside agency. Internal checks are also undertaken by the staff team.

All wheelchairs have footplates and safety belts and required moving and handling plans were observed to be in place.

Medication

Medication is stored correctly in a lockable cabinet and any controlled drugs are double locked.

Medication audits are undertaken weekly by the staff team, but also undertaken 2-3 times a day when administering medication. Team Leaders undertake a monthly audit, and the Registered Manager undertakes a 3 monthly audit in readiness for the RI's reporting.

At the time of visit, no individual was in receipt of covert medication.

Managing residents' money

The home operates a double signature process with regards to money going in and out of the home. The records and receipts were verified by the visiting officer.

An audit is undertaken monthly by the head office.

The Home Environment

The home is spacious and welcoming. It comprises of a good-sized kitchen, situated just off the dining/lounge area.

The lounge area is an open, inviting space that consists of two sofas, and a large, wall mounted, T.V.

Each resident has their own bedroom/ensuite, and all are decorated to the individual's personal taste. The rooms consist of personal belongings such as family photographs, cuddly toys, DVDs; therefore, providing a personal area for the individuals to relax in. All rooms are of a very good size, providing lots of room for relaxation.

Upstairs is another relaxation room, which families tend to meet their relatives. This room offers a balcony, which provides an enjoyable view of the valley surrounding the home.

The visiting officer was informed that one resident smoke, and they are permitted to do so outside only.

Both Mr Edwards and Ms Campbell advised of changes that will occur in the New Year, with the Managers Office being turned into a sensory room and Ms Campbell will be situated in an office elsewhere in the building.

Nutrition

Residents participate in devising a Summer and Winter menu. Whilst this is put in place, residents are asked everyday what they would like to eat. The residents are given options, and food is provided based on their likes/dislikes, with consideration being given to allergies and health needs.

To ensure that the residents are eating a healthy, well-balanced diet, the home limits the amount of take-aways and provides plenty of fruit and vegetables, which was observed during the visit.

Individuals are given the choice of when they would like to eat. Individuals, should they be at home and not out in the community, continue to enjoy sitting together and chatting about their day, whilst having lunch. It was positive to note that staff will also sit with the residents and eat their meals together, holding general conversations.

All food is freshly made by the chef, at a high level. The home was last inspected by Environmental Services in November 2023 and were awarded a Food Hygiene rating of 5.

The general food shop is overseen by the chef and the Home Manager. However, should additional items i.e., additional treats, personal items be required, they are purchased when the individuals are out in the community.

Should it be observed that an individual's needs have changed regarding their diet, appropriate medical advice and support is sought.

Quality Assurance

All policies and procedures are up-to-date and are reviewed annually, or sooner should there be any changes.

Mr Edwards advised that the business continues to utilise the services of external consultants, and they have supported Mr Edwards whilst undertaking Regulation 73 visits, which are undertaken quarterly. The data from the report's feeds into the 6th monthly Regulation 80 reports, which are also completed by Mr Edwards as the RI. Both reports were viewed by the monitoring officer, and it was observed that the reports are detailed.

The reports cover the environment, leadership and management, staffing, Care Plans and recording, Risk Assessments, resident feedback and staff feedback, along with other areas of the business. Actions are recorded, outlining the staff member who is responsible for implementing the identified action.

Staffing

The monitoring officer observed the training matrix, and noted that staff have undertaken mandatory training i.e., Safeguarding, Medication, Health & Safety, Food Hygiene, Infection Control, Moving and Handling, First Aid. It was positive to note that the provider continues to promote additional training in order that staff may appropriately support the residents i.e. stoma care, stroke awareness, sensory awareness, pressure care, breakaway and restrictive intervention, brain injury training, Down Syndrome, ADHD & Autism awareness etc.

The Supervision /Appraisal matrix was viewed, and it was evident that supervision is held every two – three months as required. The system highlights triggers should the supervision be overdue. Appraisals were also observed to have taken place.

The supervision template allows both parties (supervisor and supervisee) to discuss such matters as objectives, strengths, areas for development, training, any concerns etc.

Whilst viewing two staff files, it was noted that each file contained a detailed application form, an interview record, two references, a job description, a signed contract of employment, birth certificate, a photograph of the staff member and a current DBS (Disclosure and Barring Service).

One staff member is in the process of working through their probation period. Once completed, they will enrol to undertake the required QCF qualification. The second member of staff was registered and is currently undertaking the level 3 qualification.

Staff Questions

One member of staff was spoken to during the visit, and they stated that they were aware of where the personal plans and risk assessments were held, and the Senior would advise staff of any changes.

The contract monitoring officer was informed that the home manager spends time walking around the home and engages with staff and residents.

The staff member advised that they were still new to the home and that they have accompanied residents out in the community, which they enjoyed.

The member of staff was knowledgeable and was able to explain the most important things about the residents and what matters to them.

They said they felt able to be flexible in their role and if there was a spare five minutes, the staff member advised they would colour with the residents or sit and have a chat with them.

Staff are encouraged to offer suggestions about ways to improve the quality of life for their residents and their views would be listened to. If there was something wrong or they observed poor practice they explained they would report to the home manager.

It was stated that they were able to identify any training needs, but there wasn't anything they felt they needed at the time. No concerns were raised with the way the home was operating during the visit.

Residents Questions

During the visits, the monitoring officer spent some time speaking with the residents and observing the interaction with staff members.

General conversations were held with individuals about their jobs, hobbies and living at the home. Residents had recently enjoyed their Christmas lunch, along with activities. This was the commencement of the homes Christmas activities.

All residents were observed to be in good spirits and were positively engaging with the staff members. The atmosphere at the home was relaxed and offered a homely feel.

All individuals were observed to be appropriately dressed for the time of year and the weather and all looked well and happy.

General

It was positive to observe positive communication between the staff team and the residents, evidencing a relaxed atmosphere.

It was evident that the staff team have a good understanding of the needs and support required by the residents and this was observed to be provided with respect.

The main areas of the home were found to be clean and welcoming. Individual rooms were viewed with the resident's permission and were found to be personalised to meet the individuals own personal taste.

At the time of the visit, no hazards were viewed and there were no malodours.

Corrective and Developmental Actions

Corrective

None identified during this visit.

Developmental actions

For any positive feedback to be shared with the LA's Commissioning Team.

Conclusion

The atmosphere at the home was observed as being warm and welcoming, with plenty of smiles and laughter observed throughout the day. Positive feedback continues to be received from the residents, family representatives and the staff employed at the home.

Routine monitoring will continue at Ty Parc, 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
Designation: Contract Monitoring officer
Date: 18th December 2024

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.