

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: Friday 24th November 2023 (Announced)

Visiting Officer(s): Caroline Roberts, Contract Monitoring officer
Present: Jason Forster, Responsible Individual/Registered Manager

Background

Ty Parc is a residential home that offers support for 10 individuals, 17+ years who have learning disabilities, including those who may be on the autistic spectrum.

At the time of the visit, Mr Jason Forster was the Responsible Individual (RI) and Registered Manager. As of 27th November, internal management changes have occurred, with the registered Manager post being held by Ms Paula Campbell and Mr Neil Edwards is currently going through the registration process with CIW to become the RI.

However, at the time of the visit, Mr Forster held sole responsibility for the service.

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 February 2023.

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

The Directorate of Social Services have received no complaints or safeguarding referrals in relation to Ty Parc in the last 12 months.

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, Mr Forster advised that communication is discussed with the Social Worker and the individual prior to moving in. The home currently has one Senior who can communicate in Welsh, should a resident choose to do so.

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 2022:

Corrective

For any gaps in employment to be fully explained and recorded. (RISCA Reg 35) MET

For up-to-date DBS records to be maintained. (RISCA Reg 35) – This has since been rectified by the RI and a certificate obtained. MET

To have 2 separate employment references (RISCA Reg 35) – circumstances around the 2 references were discussed in full with the RI. MET

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) NOT MET

Developmental actions

Files to evidence consent to contact family in the event of an emergency. MET

For staff to hold conversations in respect of DNACPR. Such conversations to be documented even if resident/representatives decline to partake in the conversation. MET

For staff to read through documentation and to avoid copying and pasting; therefore, avoiding the risk of transferring confidential information into another resident's documentation. MET

For all files to contain a Missing Person's document. – Since visiting, the RI has now implemented this and will be viewed during future monitoring visits. MET

Findings

Documentation

At the time of the visit, there were seven residents, with a new individual hoping to move in the following week of the monitoring visit.

Two files relating to individuals supported by Caerphilly Local Authority, were viewed and verified as being Caerphilly placements.

All documentation were observed as being stored securely within the office and in a lockable cabinet.

It was positive to note that an A4 brief of the individuals were on file; therefore, providing the reader with a brief history of the individual. It provides information pertaining to their likes/dislikes, family, employment, mental health, routine of the day etc. Such information would assist any new staff employee.

Both files held a pre-admission assessment, with one individual who previously resided under an emergency placement contract is now a permanent resident at Ty Parc.

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, and both contained signatures of either the individual or a family representative.

The Personal Plans were detailed and outlined areas such as communication, personal care, oral care, medical conditions, rest/sleep, activities etc. The plans are set out in sections: My View, My Identified Needs, How will you Meet my Needs and Agreed goals and Outcomes i.e., to learn daily living skills i.e. cooking, laundry, to keep active, to administer their own medication, to be independent in accessing the community.

Appropriate Risk Assessments were observed i.e., financial abuse, mental health, behaviour, personal vulnerability etc. Such assessments are put in place to aid staff and the resident who may not have insight into danger; therefore, appropriate support is required. Personal Plans were observed to be reviewed every 3 months or earlier if any changes identified.

Daily records were found to be detailed, advising the reader of the individuals wishes and feelings, health and well-being, behaviour, independence, living skills, activities and achievements.

Records indicated that staff at Ty Parc make appropriate contact with outside agencies to support the residents i.e., Consultant Psychiatrist, Contact with the Gastroscopy department, Cardiology, music therapy, audiology etc.

Reviews were observed to be undertaken on a 3 monthly basis. As with the development of Personal Plans, evidence should be included to demonstrate that the reviewing officer has held discussions with the individual / representatives, taken feedback from the daily records. This requirement was discussed with Mr Forster for future implementation and appropriate evidencing.

Whether or not an individual has a Do Not Attempt Cardio-Pulmonary Resuscitation (DNACPR) is now recorded.

Both files held Personal Emergency Evacuation Plans (PEEPS).

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

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 wish to undertake.

Activity planners were noted on the back of resident's doors.

One individual continues to attend school, with the view of attending college in 2024. Another enjoys singing, line dancing and a drama group. Visits to the local Church Hall to play bingo and arts and crafts is also popular and staff advise that the residents are now getting to know more people in the community.

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

Mr Forster advised a Christmas meal has been booked for all to enjoy in December.

The home has its own vehicles for the residents to access day trips out or to visit local amenities.

Health and Safety

The accident book was not viewed during this visit as the book had been taken off site. However, Mr Forster advised the visiting officer that there had not been any accidents for quite some time. This will be looked at again during the next monitoring visit.

Fire drills are undertaken, and appropriate records maintained.

A Fire Risk Assessment was undertaken in January 2023 by Phoenix Safety. No recommendations were made.

Mobility Aids and Equipment

One individual residing at the home continues to utilise a wheelchair, a hoist, and slings. These were recently serviced, and all staff members have a responsibility to ensure that all equipment is in working order and if not, to report any problems urgently for servicing.

Medication

Medication was observed to be stored correctly in a lockable cabinet and any controlled drugs are double locked.

Medication audits are undertaken on a 3 monthly basis. Mr Forster advised that single signatures are used for everyday medication; however, when administering controlled drugs, two staff signature are required.

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

Managing residents' money

Since the last monitoring visit, the home now operates with a double signature with regards to money going in and out of the home. The records and receipts were verified by the visiting officer.

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. Toward the end of the visit, late afternoon, it was positive to note the residents sat with a staff member, enjoying a Christmas film.

Each resident has their own bedroom/ensuite and 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.

Just alongside of the building, is a garden area, where the residents may enjoy outdoor activities i.e., BBQs.

The visiting officer was informed that no resident smokes; however, staff are permitted to smoke outside only.

Nutrition

Residents have a weekly menu and 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.

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.

Individuals are given the choice of when they would like to eat. Individuals, should they be at home, tend to enjoy sitting together and chatting about their day. It was positive to note that staff will also sit with the residents and eat and hold general conversations.

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 medication advice and support is sought.

Quality Assurance

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

Mr Forster advised that the business continues to utilise the services of external consultants that visit the service as per Regulation 73, to give an independent quality monitoring report. However, the Registered RI/Manager works from the service Monday to Friday and is therefore, readily available to provide any assistance that may be required.

The monitoring officer viewed the latest Quality Report, dated September 2023, which was undertaken by Consulting Care Ltd. The report covers the environment,

leadership and management, staffing, Care Plans and recording, Risk Assessments, resident feedback and staff feedback. Recommendations are recorded and discussed with Mr Forster.

Staffing

At the time of the visit, the home operated with 2 x 12-hour shifts, and 2 x 8-hour shifts daily, providing 40 hours of support. However, this has recently been increased to 4 x 12-hour shift each day; therefore, providing 48 hours of daytime support.

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 additional training has been undertaken to meet the needs of the individuals being supported at Ty Parc i.e., communication difficulties, Dementia Awareness, autism awareness, PBS, sepsis, bedrail safety to name but a few.

The Supervision /Appraisal matrix was viewed, and it was evident that supervision is held every two – three months. Appraisals were also observed to have taken place and are next due in 2024.

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 undertaking her level 2 qualification, whilst the second staff member was already qualified.

Staff Questions

During the visit, the monitoring officer had the opportunity to speak with a Senior Carer to ask some questions about how the home is run and if they had any concerns. It was evident the staff member knew all the residents well and was observed to interact positively with individuals.

The monitoring officer randomly selected a resident and requested that the staff member share some information about that resident. It was positive to note that the Senior had much insight into the individual and was able to share their likes/dislikes and what support is offered to that person, the family make-up and how the individual's behaviour can change and the possible trigger.

Some individuals at the home have communication difficulties and the staff member advised that for some individuals it takes time for them to process and understand information or what is being asked of them. Therefore, patience is required. Communication training has also been undertaken.

The staff member was able to advise where documentation is located and where online, information is stored. Senior carers oversee the handover at the end/beginning of each shift.

When asked if staff are consulted and informed about the running of the home, the staff member advised that Mr Forster "will communicate greatly".

The Senior advised that the residents continue to go out every day and are known in the community.

All staff members can identify their own training needs.

The staff member advised that they would challenge a colleague should they feel that their practice was poor and then report to the Home Manager.

On conclusion of the discussion, the staff member advised that they were concerned about the staffing levels, especially at night as this is when one individual becomes restless. The visiting officer also spoke with two other staff members who reported the same concern.

All three staff members that met with the visiting monitoring officer, advised that they would appreciate additional staffing. This was discussed with Mr Forster and since with Mr Edwards. The visiting officer has since been advised that additional staffing will be in place to support the residents.

Residents Questions

During the visits, the monitoring officer spent some time speaking with the residents.

General conversations were held with individuals about their jobs, hobbies and living at the home. The two male individuals advised that they are happy living at Ty Parc. One individual has a part time job at a local furniture store and enjoys attending his choir. He advised that he will be performing at the home over the Christmas period. He also enjoys accessing the community, which he does on a regular basis.

Another individual enjoys line dancing and attends a local class. During the visit, he demonstrated some of his dance moves for the visiting monitoring officer. He enjoys watching his DVDs and, also enjoys accessing the community.

Both individuals evidence a good relationship with all residents, staff and the Home Manager.

One female resident advised that over the weekend they enjoy 'PJ' days. Staff advised that they try to encourage the individual to access the community; however, she prefers to relax over the weekend. However, during the week, the individual attends school and undertakes community-based activities such as swimming, visiting her family etc.

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

General

Laughter and communication was observed between staff and the residents, evidencing a relaxed atmosphere.

Staff were observed to know how residents would react to different situations and this was evidenced when one staff member offered to undertake support for one individual, therefore, providing a 'different face' for the resident to respond positively to.

The main areas of the home were found to be clean and welcoming and whilst being invited into one of the bedrooms, it was evident that the residents decorate and fill their rooms to meet their own personal taste.

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

Corrective and Developmental Actions

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

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.

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

Some of the above development actions were undertaken in the presence of the monitoring officer at the end of the visit and after discussion with Mr forster.

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 was received from the residents and the staff employed at the home.

Good interaction was observed with the residents, with staff demonstrating knowledge of the individuals residing 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: 4th December 2023

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.

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