



## Care and Social Services Inspectorate Wales

Care Standards Act 2000

# Inspection Report

The Acorns

Nantyglo

Type of Inspection – Post Registration - Baseline  
Date of inspection – Thursday, 10 December 2015  
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## Summary

### About the service

The Acorns is registered with the Care and Social Inspectorate Wales (CSSIW) to provide accommodation and personal care for three adults, over 18 years with a learning disability. The home is owned by Cwm Care Limited who took over its ownership in May 2014. They have appointed a Responsible Individual (RI) to represent the company. The home has been without a Registered Manager since May 2015.

### What type of inspection was carried out?

We (CSSIW) visited the home on an unannounced basis and carried out a baseline inspection which considered all four domains of the report.

Information in this report was gathered from:

- speaking with staff who included the home's acting manager and support workers
- looking at 2 resident's care documents
- looking at staff personnel records which included training certificates
- the home's staff training matrix
- general interactions between staff and the one resident at home during our visit
- looking at a copy of the last provider visit to the home conducted in April 2015
- quality assurance information and certificates of periodic testing and cleaning schedules
- copy of the homes Statement of Purpose (August 2013)
- general observations of the environment during our visit to the home.

### What does the service do well?

The new proprietors transferred the employment of the home's existing staff who we found to be experienced and demonstrated a good knowledge and understanding of residents.

### What has improved since the last inspection?

This was the first inspection of the setting since its change of ownership in May 2014.

### What needs to be done to improve the service?

No non compliance notices have been issued on this occasion. However, the registered persons are notified that the service is non compliant with the following regulations:-

- Regulation 8 (1) of the Care Homes (Wales) Regulations 2002. The home has been without a registered manager since May 2015. We were told a manager has been appointed who has not applied to CSSIW for registration. Please see the Quality of leadership and Management.
- Regulation 17 (2) of the Care Homes (Wales) Regulations 2002. Staff personnel information was being kept at another location. A record of all persons working at the care home is required to be kept at the home. We were assured this was a temporary arrangement until secure storage was purchased.

- Regulation 27 (3) of the Care Homes (Wales) Regulations 2002. Three monthly visits to the home had not taken place by the RI, or a representative on their behalf, to report on the quality of care provision.

It is expected that the registered persons will take responsibility for addressing the above areas by undertaking whatever actions are necessary to achieve compliance; this will be followed up at the next inspection.

#### Recommendations:

- Older residents over 65years should have their care needs reviewed on a monthly basis.
- The home's Statement of Purpose should be reviewed in line with:
  - any changes of staff
  - complaints procedure should be updated to reflect the role of CSSIW.This document should be kept under review to ensure that information is accurate.
- Residents benefit from well supported and supervised staff. Staff should have an opportunity for regular and recorded supervision at least once every two months with a senior staff member.
- The use of a listening in device (baby monitor) should be reflected in the individual's risk assessment and any future review of the persons care needs/ Deprivation of Liberty Safeguards to ensure their rights are protected at all times.

## Quality Of Life

People experience a good standard of care. This is because residents were supported to attend a range of work and leisure activities according to their likes and preferences. We saw people were treated with dignity and respect throughout our visit.

People are consulted on and participate in all aspects of life in the home. Residents were involved in daily living skills and routines supported by risk assessments. We saw evidence that service user meetings are regularly held. This evidenced that one resident chooses to have an annual holiday whilst another prefers daytrips. We saw an easy read service user friendly pictorial guide to inform people what to do if not happy with the service. People are supported to look after their own finances. It was recorded in meeting minutes that *“people are happy living at the home.”*

People are able to access opportunities to learn and follow interests. During our visit only one person was at the home as the other residents were attending day activities. We saw individual activity timetables which recorded people were positively occupied and stimulated. Residents attended community based groups such as Phab and Gateway clubs. We were told that the organisation facilitated a weekly get together for residents with a similar interest following the closure of an art and craft class. This enabled people to maintain relationships with others.

People are supported to be healthy. We examined one residents care documents and saw they received an annual physical from their GP. They also attended regular check ups with community healthcare professionals in the form of a dentist, optician and podiatrist. My “hospital passport” had been produced for each resident to assist the person and relevant health professionals if and when any hospital treatment is required. This provides individual information about the person’s communication skills, likes and dislikes and any other key information which can reduce anxiety and distress for the individual during a difficult time.

People’s rights are protected. The service had considered the additional needs of a resident due to ageing. We saw that appropriate action had been taken following an increase in the person’s need. We examined a Deprivation of Liberty Safeguards (Dols) application which was made to the local authority to continue to support the resident to live at the home. We suggested any future review of the persons care needs should include the use of monitoring equipment (listening in device) to monitor their movements at night. The provider had also been proactive in considering the person’s future needs by planning to accommodate them in a downstairs room.

People have developed and maintained friendships. The residents have lived at the home for a number of years. They are supported by staff who are familiar with them having worked at the home for sometime. We spoke with staff who demonstrated an awareness and understanding of the resident’s individual needs. Residents are supported to maintain relationships with their family and friends. We saw that people were comfortable with their surroundings, the routines of the home and with others.

## Quality Of Staffing

Staff are experienced, long standing, and familiar to residents. We found the residents were supported by appropriately trained staff

We examined staff personnel files and found staff had worked at the home for a considerable time. We were told that the staff had been taken on by the new owners following the change of ownership of the home. The organisation conducts a routine three yearly disclosure and barring service (DBS) check on staff to ensure their suitability. The majority of staff had achieved a recognised care qualification. Additional mandatory training in first-aid, food hygiene and manual handling was on-going.

We were told by staff that since the resignation of the registered manager arrangements for formal supervision to discuss any issues relating to residents, the home, performance issues and training and development with a senior had lapsed. Staff told us regular staff meetings were taking place. The National Minimum Standards for Care Homes for Younger Adults recognises the benefits for residents when staff are suitably supervised. We have identified this as an area for improvement.

## Quality Of Leadership and Management

The registered manager resigned from her position in May 2015. A replacement manager had been appointed who separated her time between running the Acorns and another small home in the organisation. Staff told us they were settled and had confidence in the new manager. We spoke with the manager who made herself available during our visit and told us it was her intention to submit an application to CSSIW to manage the setting. We notified the provider that in accordance with Regulation 8 (1) of the Care homes (Wales) Regulations 2002 this should be completed as a priority.

People cannot be fully assured that the service has systems and processes in place to audit the quality of care provided. Systems were in place to promote and protect residents' health, safety and welfare. We reviewed a selection of safety certificates relating to the maintenance and safety of the building. We saw evidence of regular testing of equipment, which included PAT testing and water temperatures. We saw evidence that assessments had been conducted for CoSSH, Riddor and Legionella. The last local Authority Environmental health visit awarded the home a 5 award for food hygiene and food handling procedures.

We discussed the homes annual satisfaction survey for residents and stakeholders as a means of actively involving people in defining and measuring the quality of care. We were told this is to be conducted later in the year. We requested a copy of the completed report is sent to CSSIW.

Copies of reports of the responsible individual's visits to the home carried out in January & April 2015 were made available. This is where the registered provider, or suitable person, visits the home at least every three months, and produces a report of their findings. The purpose of these reports is to assess the quality of care provision, guide the operation of the home and identify improvements. We were told a copy of the September 2015 report was unavailable and would be sent to CSSIW following the visit which we have yet to receive. We notified the provider that visits were not taking place on a three monthly basis as required in accordance with Regulation 27 of the Care Homes (Wales) Regulations 2002.

## Quality Of The Environment

People live in a homely, comfortable, safe and secure environment. The property is in keeping with the local community and offers access to local amenities and transport. We found the home was clean and tidy and free from odours. The furniture and furnishings were domestic and reflected community living.

The home promoted each residents personal worth and identity. Photographs were displayed which demonstrated peoples participation in activities and celebrations. Residents are encouraged to collect personal possessions and keep sakes. We saw people's bedrooms displayed their likes and preferences.

## How we inspect and report on services

We conduct two types of inspection; baseline and focused. 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.

- **Focused 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. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused 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.