

### **Care and Social Services Inspectorate Wales**

Care Standards Act 2000

# **Inspection Report**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg / This report is also available in Welsh

**Antur Waunfawr** 

Caernarfon

Type of Inspection – Baseline
Date(s) of inspection – 19 September 2016
Date of publication – 11 November 2016

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### **Summary**

#### About the service

Antur Waunfawr is registered with Care and Social Services Inspectorate Wales (CSSIW), to provide domiciliary care services to older people, aged over 65, younger adults, aged between 18 and 64, with learning disabilities, and younger adults, aged 18 to 64 with physical disabilities. The agency currently provides domiciliary care for one person with learning disabilities.

The service offered is as described in the Statement of Purpose and Service Users' Guide documents which are made available to people using the service.

The provider, Antur Waunfawr, is based in Bryn Pistyll, Waunfawr; their nominated responsible individual is Mr Stephen Goodwin. The Registered Manager for the domiciliary care service is Mr Guto Wyn Hughes.

#### What type of inspection was carried out?

This was a scheduled, unannounced, baseline inspection looking at the Quality of Life, Staffing, and Leadership and Management themes.

The inspection took place on 19 September 2016 between the hours of 09:15 and 11:00.

Information for this report was gathered from the following sources:

- Discussions with the registered manager, responsible individual, human resources officer, staff member and person using the service.
- We looked at two staff files and the service user care plan.
- We saw the Statement of Purpose; Service User's Guide; quality assurance survey, training matrix, and staff supervision notes.
- We visited the supported living property at which the service is provided.

#### What does the service do well?

The service continues to provide good quality, personalised care.

#### What has improved since the last inspection?

Staff have implemented a picture based quality assurance audit which the service user finds easy to use. This includes a range of smiling and sad faces which enables the service user to make their own opinions regarding the service to be known.

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

There were no issues of non-compliance to report.

## **Quality Of Life**

Overall, we found that the person is enabled to live an active life, retaining as much independence as possible, and is able to make choices in daily life.

Staff enable the person to do their own washing and hang it to dry on the line. The person is active, going fruit picking and making crumbles, and visiting local shops. They enjoy going into town, having pub lunches and going to see Welsh language shows in the local theatre (such as John and Alun).

We observed that the staff treat the person with dignity and respect, and are able to respect ethnicity and first language choices by conversing in Welsh. The person is part of the community, and has friends and family visiting; this gives them a sense of belonging, warmth and attachment.

The care file is very person centred, and contains photographs of the person, their likes, dislikes and daily lifestyle choices. We saw that the staff are very familiar with the person's needs and are able to meet them to a high standard.

We saw from the care file that health and welfare needs are well monitored and provided for. We saw evidence of Doctor and other health care professional appointments attended with detailed outcomes and instructions for staff. We saw that weights are carefully recorded, and help is given with healthy food choices.

We found that the person can influence their care, and make their voice heard, by taking part in the quality assurance review. A pictorial audit form has been sourced from an advocacy agency to enable this, showing that the service is proactive in catering for individual needs.

# **Quality Of Staffing**

Overall, the staff have been employed in the service for some years and they and the person cared for know each other well and have a comfortable relationship.

The staff files provide evidence of good recruitment and employment procedures within the agency. Checks are in place to ensure that they have appropriate staff to care for vulnerable adults.

The training records show that staff receive sufficient training to conduct their daily tasks with a sound knowledge base, and an emphasis on the person's health and safety.

Staff receive frequent supervision to ensure that they are well supported in their roles, and are enabled to give a high standard of care.

A staff member told us that they are very happy to be working for the service, that they receive good support from managers who are approachable and proactive.

## **Quality Of Leadership and Management**

Overall, the service is well run, and both staff and people using the service are able to influence the care given.

Staff meeting minutes show that any issues, changes in care needs, and any new ideas are openly discussed. Outcomes from previous meetings are also reported upon showing that staff can directly influence the service given, and that their opinions are listened to. As noted earlier, the person using the service is also asked for their views regarding their care, and results and any actions to be taken are added to the care file.

Medicines management was found to be good with information regarding each drug, its use, and side effects clearly documented in the care file.

The agency sets out the aims and objectives of the service clearly in both the Statement of Purpose and Service Users Guide. Both the person cared for and the staff have a clear understanding of what can be expected of the service and the scope of the care offered.

# **Quality Of The Environment**

The Quality of the Environment theme is not inspected in the domiciliary care setting as the service is provided in the person's own home.

### 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, <a href="Improving Care and Social Services in Wales">Improving Care and Social Services in Wales</a> or ask us to send you a copy by telephoning your local CSSIW regional office.