

Inspection Report on

Avondale

Cardiff

Date Inspection Completed

27/04/2023



About Avondale

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Integra Community Living Options Limited
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	10 June 2019
Does this service provide the Welsh Language active offer?	The service is working towards an 'Active offer' of the Welsh language and demonstrated an effort to promoting the use of the Welsh language and culture.

Summary

A new manager has been appointed to oversee the day-to-day running of the service. The manager has a good understanding and oversight of the everyday experiences of people living at the service and demonstrates a commitment to achieving the best quality of care for people. People can do the things that matter to them when they want to do them, and they have control of their day to day lives. People are happy living in the service and have positive and familiar relationships and interactions with a group of consistent support staff. People have access to opportunities and support to live a good quality of life.

There are good governance and oversight arrangements at the service with robust policies and procedures in place for keeping people safe and well. People are being supported by staff that are supervised and vetted through robust recruitment checks. Staff are equipped for them to make positive contributions to the well-being of people using the service.

People live in an environment which supports people to achieve their personal outcomes. The provider has a plan to ensure the home is well maintained to meet people's needs.

Well-being

People have control over day-to-day life. People can do the things that matter to them when they want to do them. We saw that people are encouraged to undertake activities, which are meaningful to the people who use the service with support provided when needed. People receive support with holiday planning and accessing the community when required to improve confidence and life skills.

People told us they have a good relationship with staff and commented, "staff understand how to help me" and "the staff are easy to talk to, approachable and really good". Records show people are offered choices to make everyday decisions. Staff regularly speak with people, their representatives and professional team about what matters to individuals living at the service and how to best support them. Support staff feel supported and valued by the manager.

People are encouraged to stay active and to do as much as they can for themselves, and this is reflected in people's records. Records reflect communication with a variety of professionals. People are supported with their physical and mental health. Observations indicate staff are knowledgeable and apply this when providing care and support. Consideration is given to promoting the mental health of people. Priority is given to the arrangement of activities to help with this.

The service supports people's well-being and safety. There is a secure recruitment process and good oversight of the service by management. Staff are regularly and closely monitored and supervised. The service promotes safe practices, such as safe management of medication and infection control. The manager closely monitors and has good oversight of care workers' training and supervision needs. The provider demonstrates a commitment to improving and developing the service for the benefit of those who use it.

People are protected from harm. Safeguarding and whistleblowing policies are in place. There is good evidence that staff promptly report any issues or concerns to the right professionals. The service maintains a record of safeguarding matters; monitors outcomes and care workers receive safeguarding training. A complaints policy is in place, people using and working at the service know how to raise a complaint and feel confident that the provider will deal with issues promptly. There were no recent safeguarding referrals or concerns at the time of inspection. Appropriate infection control measures are in place. Complaints and notifications to CIW are managed effectively. The atmosphere at the service is quiet and settled. People live in a homely environment that is clean, safe, personalised and promotes independent living.

Care and Support

People are provided with good quality of care and support to achieve their personal outcomes. We observed positive and familiar interactions between people and their support staff, including the manager, who demonstrates a commitment to providing a quality service that focuses on person centred care delivery. Care and support is delivered with respect and sensitivity, and individuals can feel confident that they will be listened to. People have choice and control for every aspect of day-to-day decision making.

The personal plans we saw were appropriate and some but not all, are reviewed regularly and updated. We have asked the provider to ensure all individuals living in the service receive regular reviews, with updated information and outcomes included in their personal plans. The service uses a person-centred approach to care planning, which informs support staff how the person likes to be supported with detailed guidance and personal profiles to capture the person and what is meaningful to them. Robust risk management plans are in place, including provider assessments to address how people's care and support needs will be met. We read detailed daily notes. We also read detailed and person-centred key working records and goal plans, although we have asked the service to ensure all individual's key working sessions are recorded and kept up to date. Personal plans that focus on people's mental health and community engagement, identify individuals who lack capacity and may need restrictions put in place to keep them safe. Formal applications through the Deprivation of Liberty Safeguards are made appropriately for people.

People are provided with tailored support including assistance with medication, depending upon their requirements. There are safe systems for medication management and monitoring of PRN. There is an appropriate medication policy and procedure in place. Medication administration records are audited, and management have overall oversight of patterns and trends. Support staff have access to required PPE (Personal Protective Equipment) and guidance on how to use it correctly.

People receive appropriate, kind, and caring support from enthusiastic staff. Support staff, including the manager, are knowledgeable about the people they support. People are supported by a small, consistent team of familiar staff. People we spoke with commented positively about the quality of care provided by support staff who they know well and who they have developed good relationships with. Newly appointed support staff complete a thorough induction programme which includes training, shadow shifts and checks to ensure they can perform specific care tasks. Staff training records indicate support staff have access to a variety of training opportunities, and most support staff have completed a good level of training.

Environment

People live in an environment which supports people to achieve their personal outcomes. The home interior and exterior are nicely presented with a driveway and large garden area. The large property sits within a quiet community with good local amenities and transport links. The home is clean, homely, and spacious with areas for people to relax. People are supported to personalise their home environment at much as possible. In the communal areas we saw two sitting areas, one dining area, a medication room, a laundry room, and a kitchen due to be renovated in the communal areas. There is an office space for support staff on both the ground floor and first floor. Records are stored securely within the separate office rooms, only accessible by relevant personnel.

Mealtimes are a positive experience for individuals, who can enjoy cooking and dining together. People receive excellent support with life skills and staff help to achieve a calm and supportive environment in the kitchen, to help individuals with meal preparations and cooking within a safe space which enables them to be as independent as possible. On the day of inspection, people and support staff enjoyed visiting the local fish and chip shop and brought food home to dine together.

The provider has a plan to ensure the home is well maintained to meet people's needs. Arrangements are in place to minimise risk to people's health and safety. Audits show checks are carried out to identify and address problems. The home is compliant with Fire Regulations and periodic testing of equipment is completed. Personal Emergency Evacuation Plans are individualised and kept up to date. We saw that window restrictors are in place. We saw the laundry facilities, which are suitable to meet the needs of people living in the home.

The recruitment process ensures necessary pre-employment checks are completed. There is an induction process in place, which the manager has good oversight of. There is a system in place to ensure complaints are managed appropriately and the service notifies CIW of relevant occurrences. We have asked the provider to capture recording of concerns. There is good managerial oversight of accident and incidents at the service and the provider will implement additional observational tools to capture changes in behaviour and presentation, to quickly identify and analyse changes in people's well-being.

We have asked the provider to support staff to understand how to access Integra's clinician and national trainers to gain additional training, advice, and support from professionals. This is in response to feedback from some staff requesting more service specific training and professional guidance, to improve engagement with people with complex needs. This will provide assurances the following statement in the provider's statement of purpose is fully delivered: 'Integra has a Clinician who is able to deliver specialist training and individual-specific training to staff within the service. We also benefit from National trainers who have their own specialist areas of expertise'.

A range of robust policies and procedures help support the delivery of the service. The service is supported by a clear management structure. A new manager has been appointed to oversee the day-to-day running of the service and is respected and valued by both people living in the service and support staff. Staff feel valued and supported by the manager, one staff member said the manager is 'an exceptional manager'. We observed positive and familiar interactions from the manager when engaging with individuals and staff at the service. We found the manager to be motivated by a drive to achieve the best quality of care for people living in the service. The manager also has a good understanding and oversight of the everyday experiences, likes and preferences and routines of all individuals. The process for admitting new people into the service is well planned. Individuals engage in many trial visits and overnight stays to ensure compatibility and good matching with people already living in the service.

People benefit from a service which has an ongoing commitment to reflection and improvement. The Responsible Individual (RI) completes the relevant quality assurance reports. The RI recently completed a robust quarterly quality of care report which showed analysis of audits, engagement with stakeholders and clear analysis of strengths and areas for improvement. Managerial analysis of patterns and trends are completed quarterly and demonstrate a good insight and understanding of the service. People can be assured there are robust quality assurance checks at the service.

Summary of Non-Compliance			
Status	What each means		
New	This non-compliance was identified at this inspection.		
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.		
Not Achieved	Compliance was tested at this inspection and was not achieved.		
Achieved	Compliance was tested at this inspection and was achieved.		

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement			
Regulation	Summary	Status	

N/A	No non-compliance of this type was identified at this	N/A
	inspection	

Date Published 09/06/2023