



Inspection Report on

Saer Coed

Caerphilly County

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

23 May 2022

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About Saer Coed

Type of care provided	Care Home Service Adults and Children Without Nursing
Registered Provider	Values in Care Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since registration under The Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Saer Coed is part of a wider organisation, Values In Care, that demonstrates understanding of young people and their complex needs, successfully meeting these to ensure people are content, happy and reaching their potential. Sufficient, well-trained, compassionate support workers offer care and encouragement. Activities offered are full of fun and laughter. Consistency of staff has been problematic during the pandemic, but this is now resolved.

The service provider has nominated a Responsible Individual (RI) to have oversight of the quality of care provision. They undertake their duties with due diligence. Policies, documentation and monitoring systems are in place to support the management of the service.

The environment is suitable for the needs of people who live at the home with plenty of personal and communal space that is well maintained and generally safe. The service provider is looking to make this even more robust through provision of radiator covers in all areas of the home and updating some risk assessments around the storage of toiletries.

Well-being

Young people living at Saer Coed are encouraged to communicate their needs and wishes and are supported to make day-to-day living choices. Specialist communication methods are used to support this. When people find decision making difficult, they have appropriate representation. Care workers are in tune with people, understanding their needs through observations. Provision of care takes into account any recorded wishes around areas such as culture or religion. Individuals are treated with respect and listened to. The service successfully supports people to feel comfortable in their environment, allowing them to improve confidence and achieve identified outcomes. Local Authority commissioners confirmed good communication with the service and told us: "*they have an understanding of complex needs and young people, and work positively and constructively with individuals*".

The service provides opportunities for people to be active and involved in activities that support their mental and physical health. Activities are individualised to meet the need of the young person, ranging from hobbies that allow people their own space, to social activities where several people are supported to go on trips, or to an activity centre. Professionals are consulted and involved in people's care. Care workers keep good records to evidence care provision and help to monitor health needs. Individuals are consulted about their meals and plans made to aid shopping. These show consideration of a nutritious, balanced diet. Medication administration is robust. The service supports young people who express their anxieties and frustrations through their behaviour. Support workers know people well, and continually monitor them to pick up on subtle changes, so they can be proactive in prevention of situations escalating.

Policies and training around safeguarding ensure that support workers have suitable knowledge to support vulnerable people. Parents of people supported told us that their loved one is "*safe, content and well-cared for.*" The service considers how a person who is going to be introduced to the service will fit in with others. Staffing levels are good and ensure individuals are supported to remain safe, even when they may be demonstrating signs of frustration. Parents are often the advocates for individuals living at the service; they tell us that they are fully involved in the care planning and reviewing process, and confirm that there is good communication about a person and their needs.

Saer Coed is part of the provider 'Values In Care', with good information provided to individuals or their representatives, both before and during residency. One parent told us that they liked that the wider team are thorough, open and honest in their approach when responding to an enquiry, and that they didn't feel rushed when considering and reviewing the care as part of the process for admission.

Care and Support

The service takes care to assess people before they become residents at the home, ensuring they match people as far as possible to prevent conflicts arising. Personal plans contain detailed information including a person-centred care plan, risk assessments and any authorisation granted as part of the application for a 'deprivation of liberty' order. Individuals who use challenging behaviours to express themselves have a detailed plan around this which care workers follow. Representatives of individuals are involved in the regular review of people's care and support needs, in addition to commissioners and health professionals. People have routines that promote development of daily living and social skills, presented in a format that is suitable for the individual. We saw one person had a planner on the bedroom wall with pictures to show the activities for each day, and another person had a picture step-by-step chart to help them complete a specific activity. One family member told us: "*they let me know everything*" and felt part of the individual's review of support on a daily basis, and another told us they have regular reviews about the care with the care workers and a specialist nurse.

Young people living at the service are supported to make decisions at a level they can manage. People are given time and space to process their understanding of what they are being asked and are fully supported to achieve identified outcomes. Daily records show individuals are engaged in activities of their choice and enjoy their experiences. One relative told us: "*they take them out and help them to try new things.*" Detailed logs and reviews show how individuals are supported to develop, for example, from not being able to move or engage, to a point where they are able to access activities in the community. Some people are supported to have overnight stays with family. We observed care workers playing basketball with one person and music therapy with another, all with laughter so that individuals demonstrated they felt relaxed and happy.

Medication administration provision and recording is robust, with individuals having regular reviews of medication to support their needs, including medication that may only be required from time to time. Records are kept around people's health needs to support reviews with health professionals. Specialist diet requirements are catered for. People are routinely supported to access services such as the dentist and optician. Many people in the service find communication difficult and are unable to express themselves or their needs. Care workers are observant, able to understand signs that someone might be in pain, and due to knowing the individuals so well, can identify what support is required. Specialist communication methods are used. There is no requirement to provide the service through the medium of Welsh at present. Cultural needs are identified as part of assessment and the service works to ensure these are met.

Environment

The home is in a rural location. A good sized garden space with seating, summer house and equipment, offers a safe area for activities such as basketball. The home provides mostly ground floor accommodation, though one bedroom is in the dormer part of the bungalow and there is a separate 'annex' accommodation for one person. Communal areas are bright and offer plenty of space for people to spend social or quiet time, in addition to a sensory room. There is a program of decoration and maintenance to ensure the building and furniture are in good order. The manager tells us that the provider is generous with a budget for repairs and renewals, and they are currently awaiting the delivery of new sofas.

People have their own spacious rooms which are en suite. People have personal items in their bedrooms where this is safe and does not pose a risk to the individual. Furniture is robust, and where required, attached to walls to prevent risk of falling on people. Specialist furniture, including beds and safety mats to support someone to minimise injury if they fell out of bed are in place. Video cameras are provided in people's bedrooms if they need close monitoring throughout the night, for example if they are at risk of fits or seizures. Consent for such monitoring is carefully documented.

The service provider is taking measures to protect people from potential harm from environmental dangers, with consideration given to water temperatures, fire prevention and protection from falls from height. Some radiators have covers to reduce the risk of injury from scalds, but following discussions, the provider is going to ensure all radiators have low temperature surfaces or appropriate guards to reduce the risks to people. Chemicals such as cleaning materials are locked away in appropriate cupboards, but the provider is considering changing the storage of people's toiletries that could pose a danger to other people living in the home who can place things in their mouth to satisfy their sensory needs. There is appropriate locked storage for medication.

The service has a level 5, which is the highest level awarded, from the Food Standards Agency, and all staff have the relevant training to cook and serve food. During our visit we found food items correctly stored, labelled and dated. Laundry processes are followed, with specific cleaning regimes in place for beds and bedding to prevent infection and reduce risk of a bad odour in the home.

Leadership and Management

The service provider has a nominated responsible individual who oversees the quality of the service. They undertake their duties, including engaging with representatives of the individuals who use the service. They produce reports to show that the quality of the service is considered, and how the service plans to develop based on their findings. Information and documentation is in place to explain what the service can offer to potential new residents. A new manager oversees the day to day running of the service. They are suitably qualified, trained and registered with Social Care Wales, the care workforce regulator. Care workers appreciate the manager who they describe as “*good as gold.*” Some paperwork tasks have not been completed in a timely manner due to the service being without a deputy manager, and demands on management to support care provision during times when the current pandemic affected staffing levels. There is no impact on people using the service due to these omissions and the manager evidences that they are now completing scheduled tasks.

Care workers receive good induction to the service and are suitably trained to carry out their role. They feel supported by the wider organisation, safe in their roles and know how to keep people they care for safe. Supervision meetings and spot checks on staff are recorded, allowing management to address any issues where procedures are not followed. The provider has robust policies and procedures, and these are available in the home. However, evidence is lacking to show that staff have accessed these, and the manager was unsure when changes had been made to the documents. There is no impact on people using the service as care workers receive adequate knowledge through training. Personnel files contain relevant documentation and show that care workers are recruited safely, and have the appropriate checks to ensure they are fit to work with vulnerable adults. Checks are also carried out to ensure care workers are fit to drive vehicles to support people to go into the community. A social worker told us: “*staff are extremely knowledgeable and proactive in achieving positive outcomes for those they work with. They are very good at communicating any issues with care managers and families.*”

Currently there is a stable, dedicated team of care workers who provide care for people. The service experienced recruitment and retention issues for the past two years throughout the Covid-19 pandemic but this has improved. Continuity of care has been affected but there is no impact evident on people who use the service. Suitable numbers of staff are on duty during the day and night to support people, ensuring they have adequate supervision and opportunities. Care workers are observed to be kind, with a passion to provide excellent support to enable people to be as “*independent and happy as possible*”.

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 inspection	N/A

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