



Inspection Report on

Amberleigh Care - Golfa Hall

WELSHPOOL

Date Inspection Completed

20/11/2019

Welsh Government © Crown copyright 2019.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk You must reproduce our material accurately and not use it in a misleading context.

Description of the service

Amberleigh Care – Golfa Hall is a children's home located in the county of Powys. The provider of the service is Amberleigh Care Ltd, and is registered with Care Inspectorate Wales (CIW) to provide specialised therapeutic assessment and care for up to 12 young people who have displayed inappropriate or harmful sexualised behaviours. The appointed manager is registered with Social Care Wales, and Kevin Gallagher is the responsible individual (RI).

Summary of our findings

1. Overall assessment

Young people have access to therapy, education and a variety of health and social care services. They feel safe, are treated with respect, are encouraged to be independent, are actively involved in their care planning and their views and opinions are listened to. Personal plans, risk assessments and other documents pertinent to young people's emotional health and physical well-being contain detailed information about their care and support provision. Young people are encouraged to be involved in community group meetings and individual reviews and their personal preferences in relation to their interests, hobbies and recreational activities are recorded. They have access to various health and social care services and are encouraged to lead a healthy lifestyle. The environment is spacious, well-maintained and young people are involved in personalising their rooms. Health and safety checks are completed in a timely manner and recent refurbishment and re-decoration work has been completed with plans in place to make further improvements. New staff have been recruited and safe recruitment checks are being completed. Staff receive regular training opportunities, supervision and feel supported. The home has robust quality monitoring processes in place and they keep staff and young people informed of changes. There is evidence of regular and positive communication between the RI, senior management, staff team and young people which encourages a supportive, therapeutic and community-feel environment.

2. Improvements

- The service has developed a social media page which enables them to stay in contact with young people who previously resided at the home. This enables them and young people to see each other's progress with the intention of providing them with additional re-assurance that they remain part of the Amberleigh community.
- There is an ongoing re-decoration and refurbishment plan in place. The kitchen has received a significant refurbishment which has created more space for young people to socialise and prepare meals together.
- Formal documents such as personal plans, risk assessments, monthly reports and review documents have been streamlined and are linked to the therapeutic 'Good Lives' model of care.
- The service has employed a therapist on a full-time basis to ensure young people are provided with consistent support.
- The service is in the process of recruiting new staff.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service:

The following recommendations have been made to further improve the service:

- Welsh language provision.
- Staff supervision notes.

1. Well-being

Our findings

Young people have access to information about the service and are supported to have control over their day-to-day life choices. The home's young person's guide and the statement of purpose contained information about the type of service it provided to young people. Each young person we spoke with told us they were happy living in the home and stated they were involved in their care planning. The young people praised the individual and group therapeutic intervention stating, "*it has helped me*", "*it's great*" and "*it's changing me*". They also praised the support and guidance they received from the home's multi-disciplinary staff team and described them as "*brilliant*", "*supportive*", "*always there for you*" and stated "*we're like family here*". Young people were involved in twice weekly community meetings, statutory reviews and monthly keyworker sessions and stated their views and opinions were respected and listened to by staff. Young people contribute to the decisions that affect their life, are listened to, have a sense of belonging, and their individual circumstances are considered.

Arrangements are in place to ensure young people have access to various health and social care services, both within the service and the community. Individual care file records contained information regarding young people's physical, mental health and emotional well-being needs. Therapeutic, behavioural support and educational plans provided young people with structure and positive, achievable goals focused to increase their self-esteem, confidence, independence and address previous challenging and negative life experiences. Personal plans and risk assessment were reviewed in a timely manner and young people were involved in the process. Young people had access to community based health and social care services and were supported to attend appointments with staff. They were also encouraged to live a healthy lifestyle and ate a balanced, healthy diet. Young people are encouraged to be healthy and receive the right care and support which promotes their well-being, physical and mental health needs.

The service has relevant policies and procedures in place to ensure young people are safeguarded from harm. The home had various child protection procedures in place and we viewed the whistleblowing, complaints and safeguarding policies. Disclosure Barring Service (DBS) and suitability checks were completed on newly employed staff who then

completed a detailed induction process. Staff members completed safeguarding training and had easy access to the home's various policies and procedures. Staff stated they understood the whistleblowing process and who to contact to raise concerns. The provider notified CIW of well-being and safeguarding issues in a timely manner and young people told us they felt "safe". Young people also told us they knew how to raise a concern and had access to an independent advocacy service whenever they wanted. Young people are encouraged to share their opinions, understand how to make a complaint and raise concerns, and are protected from abuse and neglect.

Educational provision is promoted and young people have access to community based activities. Young people had access to education and attended the home's on-site school which is inspected by Estyn (Her Majesty's Inspectorate for Education and Training in Wales). Young people's learning needs were considered in regard to their abilities, and personalised educational timetables and pupil centred plans (PCP) had been developed. Care staff were kept updated of young people's educational progress and behavioural management on a daily basis to ensure a consistent approach was followed. Young people had access to various on-site and community based daily living skills and recreational activities of their choice. The activities were risk assessed and monitored by staff and young people could choose whether or not to attend. Young people have opportunities to learn, develop their independence and can participate in activities that matter to them.

Young people live in suitable accommodation that is safe and supports their independence. The home was well maintained and young peoples' rooms were tidy, suitably furnished, contained personal belongings and were personalised to their liking. Facilities such as the lounges, kitchen, and spacious dining/recreation rooms provided young people with a comfortable environment which encouraged socialisation, participation and independence. Positive changes were being made to the environment during our visit and a maintenance team was available to ensure identified repairs and re-decoration were completed in a timely manner. Relevant health and safety checks were also being completed within timescales. Young people live in a home that best supports them to achieve their well-being.

2. Care and Support

Our findings

Personal plans and health and social care assessments record young people's care and support needs and their personal preferences. We viewed three young people's care files and daily records. Information within the care files included commissioning service's assessments regarding their emotional and mental health well-being, educational and social care needs. The information had been obtained via the service's referral and admission process and was used to inform young people's personal plans, risk assessment, educational and therapeutic plans. The plans provided staff with detailed guidance regarding how to manage and support young people's daily care and support needs. Young people we spoke with told us they were aware of their personal plans and stated they were involved in their care planning. They had also assisted in developing a child friendly version of their personal plan which were colourful, simplified, and contained information relating to their future goals, independence and positive outcomes. Personal plans and risk assessments were reviewed in a timely manner and a provider assessment was being completed within a week of a young person's arrival. Changes in young people's behaviours were monitored and detailed incident logs recorded triggers, de-escalation techniques used, behaviours and staff responses. Sanctions were also documented and were discussed and agreed with the young people. Each young person we spoke with stated the sanctions were fair and confirmed they were encouraged to discuss them with staff. Young people told us a positive reward system was used to encourage positive behaviour. They stated they considered the rewards system as "*fair*" and that staff were "*pretty good*" at acknowledging when "*things are good*". The service provider has accurate and up-to-date plans regarding how care and support is provided to ensure young people's needs are met.

Young people's levels of participation and engagement is recorded and their personal views are obtained. Young people told us their views and opinions were respected, listened to and were involved in making decisions about their care. They also stated their views and opinions were obtained in regard to the suitability of new admissions to the home as well as potential new staff. Young people had a designated keyworker and participated within a formal monthly keyworker session and twice weekly community meetings which were

central to the home's therapeutic community practice. We observed and participated in a community meeting attended by ten young people, the manager, therapy and education staff, and members from an independent peer review team who were visiting the home. The meeting was conducted within a relaxed environment and the young people were encouraged and empowered to take turns in sharing their views and opinions about different aspects of their care, support and the service provision. Young people were listened to, respected and they were able to share their feelings and thoughts with the group. Staff presented as being relaxed, friendly and honest when speaking with young people and encouraged them to think about positive solutions to issues raised. Young people's views, and actions to be taken were recorded within the meeting minutes and they confirmed identified actions were acted upon. During the meeting we observed young people sharing jokes, being forthright with each other, and adopted a mature approach when discussing agenda topics. The service provider has systems in place to ensure young people are consulted with, are listened to and their personal wishes, aspirations and outcomes are identified.

Processes are in place to ensure young people have access to services to promote their physical health and emotional well-being. Information within young people's files showed they were registered with local health services. Records showed they had contact with services such as a general practice, dentist, optician and accessed a yearly medical check. Young people's emotional well-being was supported on a daily basis and therapeutic intervention was provided within a community group living environment based upon the 'Good Lives' model of care. Young people told us they were involved in their therapeutic care planning, and described therapy as "*great*", "*helpful*" and "*really, really good*". They also participated in various on-site and community based physical and recreational activities of their preferences, and a healthy living lifestyle was encouraged and supported. Young people took turns to prepare and cook meals for each other and menus contained healthy eating meal options. Young people are supported to access healthcare and receive in-house therapy to maintain their ongoing health, development and well-being.

The service has relevant safeguarding procedures in place. We viewed the service's safeguarding policy and procedure and saw improvements were required to include reference to Welsh legislation. The management team acted in a pro-active manner and we received correspondence before the completion of this report confirming the policy had

been updated. Young people told us they felt safe living in the home and staff stated they received regular safeguarding training and understood the safeguarding reporting process. Written and electronic records showed the service submitted safeguarding referrals to local authorities and notified CIW of safeguarding incidents in a timely manner. The service provider has mechanisms in place to safeguard vulnerable young people to whom they provide care and support.

Young people's individual identities and cultures are respected. At the time of inspection, none of the young people spoke Welsh as their first language, and we were informed one member of staff spoke Welsh fluently. The management team acknowledged they would not currently be able to provide a consistent Welsh language speaking service if this was requested. We saw this as an area for improvement and discussed the benefits of the service translating documents, introducing bilingual signs and accessing Welsh language training sessions. We also recommended the service refer to current strategic guidance relating to providing an 'active offer' of the Welsh language. Young people have opportunities to express themselves in the language of their choice but improvements are required to provide an 'active offer' Welsh language service.

3. Environment

Our findings

Young people live in a home which meets their needs, supports them to maximise their independence and achieve a sense of well-being. The home is a large country house situated in eight acres of land in a semi-rural location. It is close to a town which has local recreational facilities and public transport links to larger towns with shopping facilities. We viewed areas of the home, the school, separate office spaces and the outdoor area. Within the main house we viewed a total of four young people's bedrooms, two lounges, a dining/activities area, the main kitchen, laundry and the main office. Overall, each area was well-maintained and we saw maintenance work being carried out within various areas of the home which included electrical fittings and carpet laying. We also saw various rooms had been re-painted as part of the home's current re-decoration programme. The young people's bedrooms consisted of en-suite facilities and were suitably furnished. The rooms varied in size and décor and we saw young people had personalised them to their liking with posters, photographs and items of personal value to them. Each young person told us they were happy with the size and décor of their rooms. They also stated they were happy with their room security arrangements whereby the bedroom doors were alarmed and were activated when required. They told us it made them feel "safe" and understood it allowed staff to be aware of their movements and to respond when required. The communal areas of the home were clean, spacious, comfortably furnished and provided a homely feel. They contained ample seating which enabled young people to socialise, hold community meetings and to have quiet time. The dining and adjoining activities area consisted of ample space, seating and activity resources such as a pool/table tennis table, Lego and computers. The areas enabled young people and staff to have meals together and provided a sociable, educational and community environment. The laundry area was clean and the recent kitchen refurbishment provided a large area where young people prepared and cooked meals with staff for the entire household while also developing their independent living and social skills. The education and office buildings were clean, well-maintained and provided ample space for young people and staff to carry out their daily schedules. The outdoor grounds were large, well-maintained and contained ample car parking space. The grounds provided areas for young people to use for educational, recreational and therapeutic purposes. It included an all weather pitch predominately used to play football, several patio/barbeque areas with seating and a chicken shed where young people learned

and developed animal care skills. Young people's care and support is provided within a therapeutic and community environment with facilities and equipment that promotes achievement of their personal outcomes.

Health and safety checks of the premises are regularly completed. Upon our arrival we saw the home was not entirely secure from unauthorised access as we were able to gain access into the home unchallenged. We discussed this with the manager who provided an explanation as to why this had occurred which we confirmed during our visit. The matter was discussed with the RI who made positive changes before the completion of this report to ensure further unauthorised access did not re-occur. Our identification was verified by staff and we saw procedures were in place to ensure confidential information relating to young people and staff was securely stored. We viewed various health and safety maintenance records relating to potential and identified environmental risks which showed they were being reported, reviewed and addressed. Specific records relating to fire safety, the testing of electrical equipment and appliances, food hygiene practices and vehicle checks were also being conducted within their identified timescales. Young people live within a safe environment as the service provider identifies and mitigates risks to health and safety.

4. Leadership and Management

Our findings

The services' statement of purpose has been updated and quality assurance monitoring visits are being undertaken. A copy of the recently updated statement of purpose had been provided to CIW and we saw it provided an accurate reflection of the service provision. The visitor's record book showed the RI visited the service on a regular basis and they were present during the inspection. Staff and young people confirmed they spoke with the RI and described the RI as *"very nice"*, *"friendly"* and stated they felt *"listened to"*. We saw the RI produced a monthly staff newsletter which kept staff informed of operational developments and improvements, and also provided positive practice feedback. A detailed 'Service Development and Business Plan' report was also prepared which covered young people's care, education and therapeutic provision as well as other operational topics. Quality of care reports were being completed in a timely manner and monthly unannounced visits were being completed by an independent visitor. Staff also confirmed a member of the senior management team visited the home twice a week and we saw various service monitoring audits were being completed. The management team spoke positively about the contact and communication they had with the senior management team. We witnessed this during our visit as we saw young people, staff and management team treating each other with respect and in a friendly manner. Young people can be assured the service has robust quality assurance arrangements in place to ensure an effective oversight of the service.

The service has processes and procedures in place to accept and respond to complaints received. Each staff member and young person we spoke with told us they would be happy to express their concerns and understood how to do this. Staff told us they were aware of the service's whistleblowing and complaints policies and could access them whenever they wanted. They also told us they had no concerns about the service, stating it was *"well run"* and described the management team as *"approachable"* and *"fair"*. Young people told us they had various ways in which to express their concerns, felt listened to, and stated their views and opinions, were respected and taken seriously. We saw various examples of this throughout the inspection as staff and young people had opportunities to discuss issues of concern in a formal and informal manner with each other and with the management team. Young people also told us they had access to an independent advocate and could also

contact representatives from their local authority. Young people and staff understand how to make a complaint, are encouraged to voice their opinions and have access to the service's complaints and whistleblowing policies.

The service is in the process of recruitment, new staff are securely vetted and complete a formal induction. We looked at the services' recruitment process, induction and staffing levels. The RI and senior management team told us they had recently recruited a number of new staff who were due to start in the near future. We witnessed a new recruit visiting the service and young people and staff members told us they had been kept aware of the situation. Young people also told us they were involved in the interview process and staff and young people stated their opinion regarding new staff's suitability was considered during the recruitment process. The management team acknowledged the staff team had recently completed additional shifts to ensure shifts were covered. The staff rotas we viewed showed the service was able to provide staffing in line with young people's identified care needs. The staff files we viewed showed pre-employment checks were completed and enhanced secure vetting records were up to date. Newly employed staff also completed a formal induction as required by Social Care Wales and were supported to complete a nationally recognised care qualification. The service completes pre-employment checks, has suitably fit and appropriate numbers of staff and provides staff with opportunities to obtain care qualifications.

Staff receive regular supervision and training opportunities. We looked at the staff supervision and training records. Staff told us they received "*excellent*" and "*brilliant*" support from the management team and their supervision records showed they received formal supervision on a monthly basis and an appraisal on an annual basis. We saw an improvement was required in relation to ensuring staff received written confirmation within their supervision notes of any identified actions taken in relation to issues raised and how they would be addressed. The staff training records showed staff completed regular training sessions pertinent to their role. Staff praised the quality and the frequency of the training and told us it enabled them to understand young people's care and support needs. They also stated specific training sessions were arranged and focussed on a particular need whenever it was required. The service provides staff with regular support and staff receive regular training to assist them in enabling young people to achieve their personal outcomes.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

Not applicable in this instance as there were no areas of non-compliance following the previous inspection.

5.2 Recommendations for improvement

The following are recommended areas of improvement to promote further positive outcomes for young people living in the home:

- The service provider should consider the Welsh Government's *'More Than Just Words follow on strategic guidance for Welsh language in social care'*. This will assist in looking at ways in which to improve the home in working towards actively offering and providing a service in Welsh.
- Information contained within the staff supervision notes should consistently record the responses made to the issues raised within supervision. This will ensure staff receive a formal record of the actions taken in response to issues raised.

6. How we undertook this inspection

We, CIW, carried out a total of two visits to the service with two inspectors as part of the annual, full inspection process. The first visit unannounced visit took place on 19 November 2019 between the hours of 09:10 am and 17:15 pm. The second, announced visit took place on 20 November 2019 between the hours of 09:00 am and 17:20 pm.

The following regulations were considered as part of this inspection:

The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.

The following methods were used:

- We spoke with seven young people living in the home, the responsible individual, the manager, deputy manager, the director of care and therapy, the referrals manager, facilities manager, two staff from the therapy team, four members of staff from the care team and two staff from the education team.
- We sent out 14 questionnaires to young people living in the home, staff, family/representatives and visiting professionals. None were returned before the completion of this report.
- We viewed each area of the home and looked at four bedrooms, lounges, kitchen and dining/recreation areas, bathrooms and toilet areas. We also viewed the outdoor area.
- We looked at a wide range of records. We focused upon three young peoples' care files, 11 medication records, three staff files, the statement of purpose, quality assurance documents, the staff training, supervision and appraisal records, the complaints, whistleblowing, safeguarding policies and a selection of health and safety records regarding fire safety and electrical items.
- The recommendations were discussed with the manager and responsible individual during the inspection.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	Amberleigh Care Limited
Responsible Individual	Kevin Gallagher
Registered maximum number of places	12
Date of previous Care Inspectorate Wales inspection	20 November 2018
Dates of this Inspection visit(s)	19 November 2019 and 20 November 2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of children who use, or intend to use their service. We recommend that the service provider considers Welsh Government's <i>'More Than Just Words follow on strategic guidance for Welsh language in social care'</i> .
Additional Information:	

Date Published 18/02/2020