



# Inspection Report on

**Amberleigh Care - Golfa Hall**

**Powys**

## **Date Inspection Completed**

14 June 2022

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## About Amberleigh Care - Golfa Hall

Type of care provided	Care Home Service Childrens Home
Registered Provider	Amberleigh Care Limited
Registered places	19
Language of the service	English
Previous Care Inspectorate Wales inspection	19 November 2019
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 people /children who use, or intend to use their service

### Summary

Young people are happy living in the home and speak positively about the care staff and the care and support provided. They receive person-centred care from a dedicated staff team who understand their physical and emotional well-being needs. Young people feel safe, respected, listened to, and understand how to raise a concern. Information received during the pre-admission process informs young people's personal and therapeutic plans, risk assessments and provider assessment. Young people are encouraged to be involved in their care planning and are provided with a child friendly version of the personal plan. The documents are regularly reviewed and updated, and care and support are provided in line with commissioning arrangements. Young people receive therapeutic support, education and partake in keyworker sessions. They have access to a variety of health and social care services and have access to an independent advocacy service. Young people are encouraged to lead a healthy lifestyle, develop independent living skills, and can participate in recreational activities of interest to them.

The home is spacious, suitably furnished, and young people's rooms have en-suite facilities and are personalised. Maintenance work and various health and safety checks are completed. The provider completes safe recruitment checks and newly employed care staff receive a formal induction. Regular supervision is provided, and detailed records are completed. Care staff have access to various training pertinent to their role and receive regular supervision where detailed records are completed. Quality monitoring audits and reports are completed, and the responsible individual (RI) has a clear oversight of the service.

## Well-being

Young people are supported to have control over their day-to-day life choices and are listened to. The service's Statement of Purpose (SoP) and young people's guide accurately describe the type of care and support available. Young people have opportunities to express their views within regular keyworker and community meeting discussions, attend review meetings and can choose the type of activities they want to participate in. We saw care staff using positive role modelling and a person-centred care approach when listening to young people. They treated young people with respect, understanding and were patient in their approach. Young people described the staff team as *"nice", "helpful"* and *"they are honest with you but also fair"*. Although there are two fluent Welsh speaking care staff working at the home and the young person's guide is available in Welsh, the service does not currently provide an 'Active Offer' of the Welsh language. The provider should refer to Welsh Government's 'More Than Just Words: Follow-on strategic framework for Welsh Language Services in Health, Social Services and Social Care' for further information.

Young people have access to various health and social care services and are encouraged to lead a healthy lifestyle. Care staff arrange and attend various health appointments with young people and consultations outcomes are recorded within care files. Young people told us they are encouraged to eat healthy and to participate in activities to keep fit. They participate in a variety of physical and recreational activities of personal preference and interest and can choose to complete activities as a group. Young people told us *"I go to different places and do different activities"* and *"I do things I want to do; I can try different things; you ask staff and they will arrange it"*. If deemed appropriate, young people can have independent time and are encouraged to maintain contact with their family and friends.

The service has relevant policies and procedures in place to ensure young people are safeguarded from harm. Care staff have access to safeguarding training and the provider's safeguarding/child protection and whistleblowing policies. They told us they do not have any concerns relating to the safety and well-being of young people and are aware of the reporting process. Young people told us they know how to raise a complaint and who to speak with, and stated, *"I feel safe"* and *"people can't hurt me, staff help us to make sure it doesn't happen"*.

Educational provision is available. Young people attend the provider's school provision located on the same site which ensured education provision continued during the COVID-19 pandemic. Care staff and education staff liaise daily to provide updates of young people's education and behavioural progress. Care file records show regular educational reviews are held and young people described the education as *"really good"*.

Young people live in suitable, safe accommodation that supports them to achieve well-being. The home is located within substantial grounds and situated close to a local town

with various amenities. Both accommodations are spacious, clean, suitably decorated, well-furnished and contain various facilities to further develop young people's independent living skills. There are ample areas within the home where young people can socialise or have private time. The provider has a maintenance team available and relevant health and safety checks are identified and completed in a timely manner.

## Care and Support

The service's pre-admission process assesses whether and how it can meet young people's needs and supports them to achieve personal outcomes. A Referrals Manager oversees the referral and admission process. Information regarding young people is collated from various sources, including commissioning services and informs young people's personal plans, risk assessments and the provider assessment. It considers if young people's care and support needs can be met and placement suitability and compatibility with other young people is considered. Young people are also involved in the pre- and post-admission process.

Personal and therapeutic plans are linked to well-being outcomes. The service provides a multi-disciplinary, holistic approach towards young people's identified care, educational and therapeutic needs, and is an accredited Therapeutic Community with the Royal College of Psychiatry. Care staff told us they are kept informed of young people's progress daily and have regular conversations with the education and therapy teams. They also told us the personal plans and risk assessment information provides an accurate representation of young people's needs. The personal plans contain detailed information and are regularly reviewed, updated, and include informed targets for young people to achieve. Young people receive a child friendly version of their personal plan and are encouraged to be involved in the development of the document. We saw consistency was required to ensure daily records contain an accurate and detailed account of the young person's day, and in care staff signing risk assessments to say they have read and understood the document.

The service has systems in place to ensure young people are listened to. Young people attend community meetings and keyworker sessions, have access to an independent advocacy service and are involved in reviews about their progress. They also have access to social workers and their views, wishes and happiness regarding their care and support are obtained as part of the quality assurance process. Young people told us they know how to raise a complaint and the services complaint record shows the management team investigate matters in accordance with its complaints policy. It shows young people's views are obtained and actions taken to resolve matters. Despite this an improvement is required to ensure the closure of each complaint is consistently recorded.

Young people have access to various external health services. Care file information and discussions with young people and care staff highlights young people receive prompt medical care and advice when required. Care staff support them to attend appointments with a range of services relating to their physical, emotional well-being and social needs. The information is shared with the care staff team and appointment consultation outcomes are documented and acted upon. Prescribed medication is stored securely, care staff receive medication training and medication audits are completed. Medication administration record (MAR) charts are used and overall contained accurate information. Despite this,

more vigilance is required when documenting second signatures within the controlled drugs record book and using the correct coding within the MAR when medication has been refused.

Relevant safeguarding and whistleblowing procedures are in place. Care staff have access to safeguarding training and access to the service's safeguarding policy which references Wales Safeguarding Procedures. They told us they understand the safeguarding and whistleblowing process and did not have any concerns regarding how young people's care and support is provided. Care staff told us they were confident any reported concerns would be dealt with professionally and fairly by the management team. The provider also submits notifiable safeguarding events to Care Inspectorate Wales and safeguarding referrals to the local authority when required.

## Environment

Young people live in a home which meets their needs, supports them to maximise their independence and achieve a sense of well-being. The service is registered to accommodate up to 19 young people within a campus style site. It is situated within eight acres of land on the outskirts of a large town. Significant improvements have been made since the last inspection. An additional building has been acquired on-site and young people reside within two detached buildings, the primary being a large country house. Improvement has also been made to the office area within the main country house as it has been extended and the lounges have been redecorated and contain new furniture. Also located on site are a detached school building, a therapy cottage, detached office and meeting spaces, and various workshops and storage facilities. We completed a site inspection and viewed various rooms bedrooms, lounge, kitchen and dining areas within both living accommodations, the therapy cottage, workshop and storage facilities, and the outdoor area.

Both accommodations are spacious, well-furnished, and well-maintained. We saw young people's en-suite bedrooms were spacious, well-furnished, and contained personal items of importance to them. Young people told us they are "*really happy*" with the size and decoration of their rooms, and that their rooms are "*private*". They also told us they have opportunities to socialise with others in the communal and lounge areas. The large dining/communal area situated within the main country house contains ample seating and enables young people and care staff to enjoy meals together. It also contains of a pool table, piano, dartboard, and an area to use computers.

The maintenance and management teams told us the provider is supportive regarding making changes to the home, which was also confirmed during our discussions with care staff. The management team also informed us plans are in place to further improve areas of the home. The vast outdoor area provides young people opportunities to learn and further develop various skills associated with gardening, planting, and social and physical development. They have access to vegetable gardens, a forest school, trampoline, a multi-use games area and take responsibility in maintaining a chicken shed. The vast grounds also enable communal and group activities to be held which includes celebrating themed events, barbeques, numerous seating areas and provide an area where therapy and education sessions can be held. The provider has also made a significant investment to improve the large car park ensuring both accommodations are easily accessible. Young people also have access to the providers eight-seater minibus and four cars to access larger towns and cities via the home's transport arrangements.

Health and safety checks of the premises are completed. The provider's maintenance team completes environmental checks and audits, and young people and the staff team told us identified work is completed in a timely manner. Written records confirm checks relating to



the testing of electrical equipment and fire safety are completed. Procedures are also in place to ensure confidential and sensitive information is stored securely.

The service promotes hygienic practices and manages risk of infection. Care staff have access to the provider's infection control policy, personal protective equipment, and cleaning products. Care staff told us they are satisfied with the infection control procedures in place and confirmed they have received regular COVID-19 management guidance updates from the provider since the beginning of the pandemic.

## Leadership and Management

Governance arrangements are in place to support the operation of the service and they provide a sound basis to ensure quality care and support for young people. The management team told us they are involved in discussions regarding the home, are kept informed of decisions made and have regular contact with the RI. A monthly management meeting is chaired by one of the provider's Directors and departmental management reports are completed. They are shared with the RI and board of Directors which enables the RI to discuss any issues raised and advise as required. Young people and care staff confirmed the RI visits the home on a regular basis, and described the RI as *"kind"*, *"calm"*, *"chatty"* and *"wants the best for the young people"*. The RI also receives reports from an independent visitor and provides written feedback regarding their observations.

The service is provided in accordance with their Statement of Purpose (SoP) and arrangements are in place for the effective oversight of the service through ongoing quality assurance processes. The updated SoP accurately describes the current service provision. The current reporting system monitors, evaluates and reviews the quality of care provided. A Quality and Compliance officer has recently been appointed and the management team complete regular audits. The manager completes a six-monthly quality of care review report which monitors effective practice and areas for improvement. There is clear evidence of consultation with young people, care staff and commissioning services. Young people produce an action plan outlining their views regarding the service and potential improvements which is presented to the management team. Care staff and commissioning services are encouraged to provide feedback regarding service provision and the provider is part of the 'Investors in People' and has achieved the Gold Award. The inspection highlighted ways in which to further improve the Quality of Care report process which was discussed with the provider.

Overall, there are appropriate numbers of suitably fit care staff available. The care staff rota records show young people receive care and support in accordance with their needs and commissioning service's arrangements. The provider has successfully recruited new members of staff, verifies employment references and completes enhanced staff recruitment checks. Newly employed care staff complete the provider's induction programme and the All-Wales Induction Framework for Health and Social Care if they have not previously done so. The provider currently has several care staff vacancies and are actively looking to recruit new care staff. Agency staff are currently utilised to assist the staffing situation. Care staff and the management team told us the same agency staff are used to ensure young people receive continuity of care. Care staff spoke positively about working for the provider and told us they are *"happy to do"* additional shifts, *"there is no pressure to do the hours"* and stated, *"we have managed to keep morale quite high"*.

Care staff receive regular supervision and training. They receive consistent supervision, both individually and as part of a group and a significant improvement has been made to the way supervision notes are recorded since the last inspection. Detailed records are kept, and care staff told us they are supported by a *“really nice”*, *“supportive”*, *“approachable”* and *“knowledgeable”* management team. They told us they *“feel listened to”*, are able to express their views in an *“open and honest manner”* and can contact the management team or the provider’s on-call provision when required. The staff training record shows care staff have access to a variety of training opportunities. They complemented the quality and quantity of training available, describing it as *“high quality”* and that *“it has helped me in my role”*.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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