



## Care Inspectorate Wales

### Regulation and Inspection of Social Care (Wales) Act 2016

## Priority Action Report

### Care Home Service

This report contains notices where priority action must be taken by the registered person in respect of identified non-compliance with the regulations. You, as the registered person, are required to take action to ensure compliance is achieved in the timescales specified.

**The issuing of this report is a serious matter. The notices contained within the report have been issued in accordance with our Securing Improvement and Enforcement Policy. Failure to achieve compliance will result in Care Inspectorate Wales taking action in line with this policy.**

A copy of the Securing Improvement and Enforcement Policy is available on our website

Further advice and information is available on our website  
[www.careinspectorate.wales](http://www.careinspectorate.wales)

**Ty Nant**

Swansea

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<b>Leadership and Management</b>	<b>Our Ref: NONCO-00010874-RYCL</b>
<b>Priority Action Notice identified at this inspection</b>	
<b>Timescale for completion</b>	<b>30/09/21</b>
<b>Evidence</b>	
<p>The service provider is not compliant with Regulation 7(1) and 7(2) of The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.</p>	
<b>Evidence</b>	
<p>The statement of purpose does not accurately describe the service provided, nor provide accurate details regarding lines of accountability. The service provider has not kept the statement of purpose under review, on at least an annual basis.</p> <p>Evidence: Although the home's statement of purpose states that care staff are trained in a range of therapeutic techniques, this training was not evidenced within staff training records.</p> <p>There was no evidence at inspection, in records and from our observation of care staff's day to day practice, that the service model described in the statement of purpose, is being followed.</p> <p>The frequency of staff supervision does not accord with the information provided in the statement of purpose.</p> <p>The statement of purpose does not provide details of the quality assurance arrangements for the home.</p> <p>The home is registered with CIW to care for 3 young people, as stated in the statement of purpose. However, between 26/04/21 and 28/04/21, a fourth young person was admitted to the home.</p> <p>The statement of purpose states that fire drills are undertaken on a monthly basis. However, records showed that fire drills were undertaken on a quarterly basis, throughout 2019 and 2020. The last recorded fire drill took place on 11/11/20.</p> <p>The statement of purpose is dated 2018. The statement of purpose has not been updated since that time, although the statement of purpose and statutory guidance states that this document should be reviewed annually.</p> <p>Impact: Young people's well-being and personal outcomes cannot be assured as the service provided to them is not as described in the statement of purpose.</p>	
<b>Regulation number</b>	
<b>Description of non-compliance/Action to be taken</b>	
<b>7(1)</b>	

<b>Leadership and Management</b>	<b>Our Ref: NONCO-00010879-SJLH</b>
<b>Priority Action Notice identified at this inspection</b>	
<b>Timescale for completion</b>	<b>30/09/21</b>
<b>Evidence</b>	
<p>The arrangements in place to monitor, review and improve the quality of care and support provided by the service are not sufficiently robust.</p> <p>Evidence.</p> <p>The home has been without a manager since January 2021. Although the deputy manager is acting up in that role, they have continued to discharge all or part of their own responsibilities since that time.</p> <p>At the time of CIW's inspection the home's Responsible Individual (RI) had been absent since 03/12/2019. Despite this lengthy absence, temporary "cover" arrangements have remained in place. Alternative permanent arrangements were not progressed until 23/03/21 when CIW received an application for registration from the acting RI.</p> <p>The acting RI has not received any training in respect of the RI role and responsibilities.</p> <p>Monthly reports completed by the deputy manager, for March 2021 and April 2021 state that they were "satisfied with the systems in place" for effective record keeping despite CIW's inspection identifying legislative non-compliance.</p> <p>The latest quality of care review (September 2020) did not seek the views of young people living in the home, their representatives, local authority social workers, or the home's care staff.</p> <p>The latest quality of care report (September 2020) did not provide evidence of an analysis of aggregated data on incidents, notifiable incidents, safeguarding matters, whistleblowing, concerns and complaints, any action taken and outcome of any audits undertaken.</p> <p>Quality assurance arrangements have failed to identify and address areas where the service does not meet legal requirements.</p> <p>Impact:</p> <p>Young people cannot be confident that that the home is carried on with sufficient care, competence and skill to ensure that their care and support needs are appropriately met. Quality assurance and governance arrangements are not robust enough to ensure that service</p>	
<b>Description of non-compliance/Action to be taken</b>	<b>Regulation number</b>
The service provider is not compliant with regulation 8(1) and 8(2) of The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.	8(1) 8(2)

shortfalls, including non-compliance with legislation, are identified and addressed in a timely way.

<b>Care and Support</b>	<b>Our Ref: NONCO-00010882-KVFM</b>
<b>Priority Action Notice identified at this inspection</b>	
<b>Timescale for completion</b>	<b>30/09/21</b>
<b>Evidence</b>	
<p>Personal plans are incomplete; they have insufficient information and guidance to ensure that care staff fully meet young people's needs. Young people have limited input or involvement in the development of their plans.</p> <p>Evidence:  Personal plans are not prepared in line with statutory guidance - outcomes are not specific and measurable.</p> <p>Personal (placement) plans do not accord with young people's care and support plans. Significant issues in respect of their needs and associated risks are not included within their personal plans.</p> <p>Personal plans do not provide detailed guidance for care staff on the steps to be taken / strategies to be implemented to meet young people's day to day needs and achieve personal outcomes.</p> <p>Of five personal plans viewed, only two had included any views by young people. There was no evidence of any young person actively contributing to the development of their personal plans.</p> <p>Young people's expressed goals and what needs to happen to enable them to achieve them are not consistently included in their plans.</p> <p>Impact:  The impact on young people using the service is that they are not involved in their care planning. They cannot be confident that care staff have access to a suitable personal plan. Plans do not provide sufficient, clear guidance to ensure care staff effectively provide care and support which enables young people to achieve their personal outcomes.</p>	

<b>Care and Support</b>	<b>Our Ref: NONCO-00010883-JBVJ</b>
<b>Priority Action Notice identified at this inspection</b>	
<b>Timescale for completion</b>	<b>30/09/21</b>
<b>Evidence</b>	
<p>The service provider is not compliant with regulation 21(1) of The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.</p>	
<b>Evidence</b>	
<p>The service provider has not ensured that care and support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.</p> <p>Evidence:</p> <p>Personal plans for young people do not have clear aims or personal goals and lack guidance for care staff on how to provide day to day care and manage risk.</p> <p>Although social workers have completed risk assessments for young people, we saw no evidence of risk management plans in place to address identified risks.</p> <p>Behaviour modification plans do not provide sufficient guidance for care staff on managing challenging behaviours. Although risky behaviours are identified, specific action to address these behaviours is not provided.</p> <p>Behaviour modification plans and safety documents are undated, have no authorship and no review dates.</p> <p>Documentation relating to young people (impact assessments, personal plans, safety plans, risk assessments and behaviour modification plans) are disjointed and do not provide care staff with clear, joined-up, consistent guidance on working with young people and managing challenging and risky behaviours.</p> <p>Impact:</p> <p>Young people's well-being is compromised and they are placed at risk of potential harm. The service provider has failed to ensure appropriate guidance is in place for care staff, to enable them to keep young people safe, promote their well-being and ensure positive outcomes.</p>	

<b>Leadership and Management</b>	<b>Our Ref: NONCO-00010884-RXWB</b>
<b>Priority Action Notice identified at this inspection</b>	
<b>Timescale for completion</b>	<b>30/09/21</b>
<b>Description of non-compliance/Action to be taken</b>	
<b>Regulation number</b>	
The service provider is not compliant with Regulation 36(2)(b) and 36(2)(e) of The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.	36(2)(b) 36(2)(e)
<b>Evidence</b>	
<p>Care staff do not receive the training they require to ensure they have the knowledge and skills to meet young people's needs. They do not receive supervision at the frequency stated in the home's statement of purpose. Supervision sessions do not provide care staff with sufficient opportunities to reflect on their individual working practices.</p> <p><b>Evidence.</b></p> <p>Although the home's statement of purpose states that care staff are trained in a range of therapeutic techniques, training records do not show that care staff have attended this training.</p> <p>Although the statement of purpose states that all staff have received training to recognise signs of bullying, training records showed only one member of care staff had undertaken training on bullying and harassment.</p> <p>Training records showed that care staff had not completed training in respect of the the specific needs of young people living in the home.</p> <p>On 21/05/21 we were advised by the deputy manager that supervision sessions had not been held on a monthly basis.</p> <p>The supervision record of one care staff member (dated 21/04/21) did not record any discussion regarding young people and the working practices of the staff member. There was no evidence of reflection and learning.</p> <p>The deputy manager and acting RI are not readily able to gain an overview of training undertaken by the staff team in order to identify staff's learning needs and team training gaps. Three requests were made by CIW for a copy of the home's training matrix.</p> <p><b>Impact:</b></p> <p>Young people's well-being is compromised as they are being cared for by care staff who do not have the support, guidance and training to meet their complex needs.</p>	



