



# Inspection Report on

**College Fields**

**413 Western Avenue  
Cardiff  
CF5 2BD**

## **Date Inspection Completed**

16 November 2022

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## About College Fields

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group Ltd
Registered places	7
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">[Manual Insert]</a> 08/06/2021
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

College Fields is a residential adapted property that is clean, homely, and well maintained. The vision for the service and ethos around rehabilitation and recovery is clearly set out in the Statement of Purpose (SoP) and assisting documentation. People working at the service are professional, well trained and implement the service's values and vision by assisting people to maximise their independence and prepare for more independent living.

People are treated as individuals by staff who are committed to ensuring they have choice and control over their lives. Individual achievement is recognised and celebrated by the staff team. People are supported to be physically and emotionally well. They are seen to make progress in the service and develop skills that are important to them.

People's care documentation is personalised, and they engage in their care planning and goal setting. People's rights are upheld, and their safety is promoted by a service that is well run. Staff treat them as individuals, with care and consideration to their abilities and life experience. The home environment is safe, comfortable and suits the needs of people who live there.

### Well-being

People have control over their day-to-day life and a say in how their service is run. They have a positive sense of belonging and have developed meaningful relationships with staff and co-residents. Compatibility prior to any new admissions is carefully considered. Pre-assessment and care planning considers staff skill mix alongside other residents' needs. People have staggered admissions to ensure the service can meet their needs and expectations. Care documentation is up to date, comprehensive and evidence that people are consulted about how they want support. Risk management plans are in place to guide staff and give people the opportunity to develop strategies and skills to reduce risks and harmful behaviours. People are supported to develop life skills like cooking and to maintain their environment in preparation for a more independent type of accommodation. Care workers know people well and can identify in a timely way if they need support. People's care documentation is set out with measurable goals that are regularly reviewed jointly with their key workers. The service promotes independence and supports people to gain the confidence and skill to move on to independence.

People receive good support to maintain their physical and mental health and wellbeing. Records show that people are supported to access a wide range of health care professionals in a timely manner. Medication support is conducted safely and policies and procedures support this. The service has good links with Health and Social Care commissioning teams and facilitates regular contact between people and their care teams. Care planning is also undertaken and reviewed with commissioners. People receive the care and support they need at the time they choose; we saw staff rotas reflect sufficient staff are on duty and staffing is altered to suit people's support needs. People we spoke to told us they were well supported and happy at the service.

Good systems are in place to protect people from abuse and neglect. Staff receive regular training on safeguarding and would report any concerns. The service assesses risks for individuals and has personal plans to provide guidance on how to reduce them. The service has good infection control measures in place. We identified no hazards during the visit and the entrance and exits to the home are secure. The home is clean throughout. Good fire safety measures are in place and equipment is serviced and maintained.

The service is professionally managed with a clear staff structure that supports. Staff we spoke with are enthusiastic about providing a caring and individualised approach. They told us they feel very supported by the manager and there is a supportive team ethos in the service. There are effective systems for monitoring and auditing overseen by the responsible individual (RI).

People live in accommodation, which is suitable and well maintained. People told us they like their home. The home has useful links to the city centre, which enables people to access activities independently.

## Care and Support

The service considers a wide range of views and information to confirm it can meet people's needs and outcomes. A pre-assessment period is conducted before a decision is made about whether the service can meet a person's needs. This consists of multiple visits, pre-assessment and planning with people's clinical teams and consideration of compatibility

with those already living at the home. People are encouraged to try the service by having overnight stays and building up slowly to moving in. Personal profiles of the staff team are also available so that people have information on the care team.

A comprehensive care plan system helps staff to have a good understanding of how people like to be supported. Personal plans reflect people's individual needs and are reviewed regularly. Risk assessments are integrated into people's plans. Daily records are consistently completed. Interactions observed show people's needs and preferences are well known. Staff are warm and understanding to the people they are supporting, and good relationships were witnessed.

People receive skilled care from experienced workers. There is a small consistent team of staff at the home. People are familiar with the care workers supporting them, likewise individuals supported are well known by the care team. They can recognise any changes in people's mood and respond appropriately. We saw care workers are patient and responsive to people's wishes. We saw staff adapt support to suit individuals. All people spoken with were positive about the care workers and manager. People we spoke to commented "*Staff support you to do things for yourself*" and "*Staff know when to give you space, they are respectful.*"

People are helped to maintain their physical and mental health. Appointments are arranged in a timely manner to see a wide range of healthcare professionals. Staff are trained to look after medication, and they have their competency checked. The service conducts audits on medication to ensure good systems have been followed. There is a medication policy for staff to follow to ensure safe administration of medication. The policy promotes working towards self-medication. This allows people to take responsibility for their own medication with supervision, monitoring and prompting from care workers. People's medication is kept in a locked cupboard in their own room. People are supported in line with a Recovery Model of Care to develop skills to manage their mental health and wellbeing. People are supported by staff after any incidents to reflect on triggers and alternative responses enabling them to develop strategies and skills to reduce risks and harmful behaviours. Detailed risk assessments are in place to guide staff that include triggers and reactions, with examples and guidelines for care workers to follow. This ensures people's needs are well understood and staff can support people to remain well and develop skills to support their own wellbeing.

## Environment

The service provides people with care and support in a convenient location and environment. Facilities and equipment promote personal outcomes effectively. The environment supports people to start to live more independently. The home is accessible and safe with appropriate security measures in place. The general environment is welcoming and clean. Redecoration and refurbishment have recently taken place. People have their own front door and bedroom key. Care records are kept in a locked cabinet, in locked offices to maintain people's confidentiality.

People benefit from an environment that is warm and homely. Where needed measures are in place to maintain people's safety. All bedrooms have their own ensuite bathroom. People decorate their rooms as they choose. There is a communal bathroom for anyone who prefers to bathe rather than shower. A large lounge area adjoining a dining area, and conservatory with a pool table, enable people to spend time together. There is a large communal kitchen. A quiet room with computer facilities is accessible for people to meet with care teams, family members or visitors. Outside, there is a good-sized secure garden with a covered smoking area.

Health and safety of the home is managed. An in-house team oversees all maintenance issues and has a good system in place to support this. Audits take place to ensure fire safety equipment is safe. Gas, electric and other services have been checked. Maintenance of the home is planned, and it was evident that the service has a rolling programme of work in place to maintain a high standard.

## Leadership and Management

The service clearly sets out its vision, values and purpose within the SoP and Service User guide. This means people accessing the service are clear about the service offers. Both documents have been kept under review, however we informed the manager that the reviewed SoP needs to be submitted to CIW at time of review.

Management at the home leads the staff team and supports the principles and values set out in the SoP. They are supported by a deputy manager and a 'shift leader.' Staff are valued and well supported. They told us *"It's a fantastic team, we work together, and all share the same goal of making this a great home for residents"*. Care workers are appropriately recruited, supervised, and trained to meet the needs of people accommodated. Care workers spoken with told us they felt their training was relevant to the role they undertake. They also take on additional 'champion' roles in the home. Staff told us training was easily accessible via the company's training system. They told us that if anything was not available it would be sourced for them. All the care team hold a professional care qualification and are registered with Social Care Wales. A training matrix of completed training was seen. The staff team is skilled to meet the complexity of needs at the home.

There are systems to monitor and improve the quality of support people receive. The manager is supported by the regional service manager and RI who visit the service regularly and in line with regulation 73 quarterly visits. The manager conducts regular audits to monitor the day-to-day running. The manager's and RI's audits of the home contribute to a six-monthly quality of care report. The report shows that the people using the service are consulted about their experiences of the service. This report also identifies any improvement. There have been no complaints since the last inspection. Accidents/incidents and safeguarding referrals which might affect the well-being of individuals receiving care are recorded and reported to regulatory bodies and statutory agencies as appropriate. Records of these are maintained by the service for audit and analysis. The home has sufficient policies and procedures in place to support its operation. We looked at a selection of policies. They were available for staff and contained sufficient detail. The service has a culture of working to improve the service. The service has an open relationship with key stakeholders and responds well to recommendations. The service invests in the environment and is continually enhancing management tools.



### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
12	The service provider must ensure that all policies and procedures in place are reviewed	Achieved

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