



# Inspection Report on

**The Paddocks**

**Swansea**

## **Date Inspection Completed**

19 August 2022

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## About The Paddocks

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">20 October 2020</a>
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

The Paddocks is a small care home service for adults with mental health support needs in Swansea. It comprises of a larger, 3 bedrooms building and separate annex which contains two self-contained dwellings. The paddocks sits in its own grounds with parking facilities and large garden.

People living in the Paddocks have active lives and are often out and about doing things they enjoy. People are supported by dedicated care staff who treat them with dignity and respect. Personal plans reflect people well, are reviewed routinely and guide staff on how best to support people at different times. Most people in the service have lived there a long time and all appear settled and comfortable with others and the care staff supporting them. The service is well maintained and homely with bedrooms and apartments personalised to individuals' personalities and preferences, Improvements have been made to the outside space and a new kitchen has been installed. The provider is proactive in improving the building to further support people as their needs change. Care workers spoken with are happy in their roles and feel supported by an approachable manager who is routinely in the service. The responsible individual (RI) visits the service routinely and regulatory reports for quality assurance are completed in a timely way. There is good oversight of the service and people are able to contribute to driving improvements in the service.

## Well-being

People have a voice and are treated with dignity and respect. Care workers give choice to people on all aspect of their lives and what they want to do with their time. People can decide on the decor of their own personal space and also have influence in other areas of the environment of the service. Up to date personal plans are developed with people and are accompanied by risk assessments to ensure appropriate support is given. People were observed and are happy in the service and have a good rapport with others and the care team supporting them.

People are protected from harm and neglect. Appropriate safeguarding training has been undertaken by care staff and those spoken with are aware of their responsibilities to report any concerns they may have. We saw the safeguarding policy which has been updated to reflect the Wales Safeguarding Procedures. There are good maintenance procedures and environmental checks are in place to ensure the service is safe, secure and comfortable.

People's physical health, mental health and emotional wellbeing is promoted. Many care workers have been in the service for some time and have built good relationships with people and know them well, which enables them to identify if there is any deterioration in their health. We saw timely referrals are made if people need medical intervention. Personal plans are written with indicators on how best to support people when their needs change. Care workers adapt their approach to people to suite these changes in need as required. There are good procedures in place to support people with their medication and this is also stored appropriately.

People live in a service that is well maintained and suitable for their needs. There has been improvements to the outdoor area of the service since the last inspection and a new kitchen has been installed. There is an ongoing improvement programme in the service and the provider is taking steps to improve and adapt the service to meet the needs of people as they age.

There is good oversight of the service. The manager in post is relatively new to the service however is well respected by people and the care team. Care staff are trained and supported in their roles and receive routine supervisions and appraisals. The RI visits the service regularly and speaks to people and care staff about their experiences there. Regulatory reports are completed at appropriate time intervals, and these include feedback from people and improvements and time scales for the service to work towards.

## Care and Support

Personal plans are developed with people as much as possible to ensure they meet their needs. We looked at two care files and found them to be detailed with personal plans that reflected people well. It was clear to see how people should be supported and there was guidance for staff of possible triggers to mental health relapse and indicators on how to recognise and react to people's changing needs appropriately. Risk assessments are also in place to correspond with these personal plans. We saw that both personal plan and risk assessment documentation is reviewed routinely and updated as required. People's involvement in the personal plan could be evidenced more through signatures to confirm their involvement. Despite this people told us that they were involved and happy with the care received.

There are safe systems in place to manage medication in the service and to maintain people's health. We saw medication is stored in locked cupboards in people's own rooms and temperature checks are in place at each to maintain the efficiency of the medicines. Medication administration charts (MAR) were seen, and all completed correctly. We spoke with care workers who know the people they support well and recognise if they are unwell or mental health deterioration. This knowledge of people enables care staff to act efficiently to seek additional support when needed, we saw details of appointments to confirm this. We saw that the use of as and when needed (PRN) medications are not used routinely, however information is available for care staff to raise awareness of their use when required and possible side effects.

People are supported to do things that they enjoy. During the visit people were out shopping in the community with support and others were sitting together, reading the paper and chatting with care workers. People told us they are supported to go on holidays, and they really looked forward to them. The manager told us people were engaged in voluntary work and are often going out and visiting family and their favourite shops etc. Overall people are happy in the service and were complimentary of the care staff, comments included "*It's good here*" and "*all ok here at the moment, the manager is good too*". Although it was clear that people do lots of things that they enjoy, the recording of 'activities' in the service were not always evident and this can be improved.

The provider has mechanisms in place to safeguard people supported in the service. People are supported by a care team that know them well, care workers spoken with are aware of their responsibilities and know the procedures if they have concerns about people. Training around safeguarding is mandatory and we saw almost all staff are up to date with this. The provider has a policy in place which has been updated to reflect the Wales safeguarding procedures. People who are not able to make decisions about their accommodation, care and support have appropriate Deprivation of Liberty Safeguards (DoLS) in place which are reviewed annually as required.

## Environment

People receive care and support in a service with appropriate facilities in a suitable location that promotes achievement of their personal outcomes. The Paddocks is a detached property with separate annex which sits in its own grounds off the main road of a housing estate. The garden has been refurbished since the last inspection and there is a large accessible patio area and garden furniture for people to enjoy the outside space. The grounds of the property are spacious, and people told us they enjoy doing things in the garden and have attempted to grow vegetables recently. The main building has large communal areas which are spacious, modern and homely, there is a large kitchen/ diner which has been refurbished since the last inspection. People's bedrooms are personalised and reflect people's personalities well. There are ongoing plans to adapt en-suite bathrooms into wet rooms to better suit people's needs. There is a separate office which is locked when there is no one inside for safe storage of documentation and the laundry room is also locked when not in use. We saw cleaning products and chemicals that are hazardous to health were stored appropriately and locked away. Separate to the main building there is a separate annex which houses a one bedroom self-contained flat and studio. These facilities enable people to build on their independence whilst still being able to access support from the care staff.

There are procedures in place to identify and mitigate risks to health and safety. The Paddocks benefits from being part of a large provider which has a contracted maintenance team. The service manager is able to request any maintenance tasks online and these are addressed by the maintenance team in order of priority. There is a health and safety file in place with daily, weekly, and monthly checks that take place in the service to minimise risk to people. We found these checks to be up to date with no gaps: these checks include window restrictors, emergency lighting and furniture safety. Regular maintenance and servicing take place for utilities and equipment in the home and we saw certificates in place for these which includes electricity, gas and fire safety.

The service promotes hygienic practices and manages the risk of cross infection. Care staff in the service wear personal protective equipment within the building in accordance with the provider's Covid-19 risk assessment. Care staff have been participating in routine testing regimes to minimise the risk of an outbreak in the service. Hand sanitiser is available on entry to the property and visitors are required to show evidence of a negative lateral flow test (LFT) result on arrival, prior to signing in the visitor's book. The provider has a Covid-19 guidance document in place which is updated in line with governmental guideline changes.

## Leadership and Management

The service provider has systems in place to support the smooth operation of the service, to ensure the care and support of individuals enables them to achieve their personal outcomes. There are robust procedures in place to ensure that policies and procedures are reviewed routinely. The services statement of purpose (SOP) has been updated to reflect recent management changes and continues to reflect the service well. The provider has an online auditing tool which the manager follows to ensure that audits of paperwork and systems are carried out routinely. There is an area and regional manager who also carry out audits of paperwork in the service and care and personnel files. Overall, there is a good management structure in place and people told us the manager is “*approachable*”, “*lovely*” and had had a “*huge positive impact on the service*” since their appointment.

The service provider has good systems in place to recruit, train and support care staff. We looked at two staff files and found them in good order with all required pre-employment paperwork and checks are in place including up to date Disclosure and Barring Service (DBS) checks. We spoke with care workers, some who were new to the service and all told us they feel supported in their roles, they said: “*I feel like I'm getting good support here*” and “*the manager and deputy are easy to talk to and are very approachable*”. Care workers told us they receive an induction when they start working but feel that hands on approach when working in the service is more beneficial. We looked at the training matrix and saw that over 93% of staff were up to date with mandatory training and over 82% developmental training which includes more specific training to assist with the people they support. Supervision and appraisals are completed with all care staff in a timely manner.

There are arrangements in place for the effective oversight of the service through ongoing quality assurance. We saw that the RI visits the service regularly and they conduct an audit of various documents and the environment, as well as speaking with people and care staff. These audits and feedback drive the improvements noted in the visit reports seen. The manager completes a bi-annual quality of care report and the last two of these were seen. These reports detail success stories of supported individuals, the outcome of RI visits, an overview of the service since the last report and improvements with time scales to work towards.

The service provider has oversight of financial arrangements and investment in the service. Since the last inspection, the kitchen has been refurbished and the patio has been laid in the garden. There are further improvements planned for the near future. Staffing levels in the service are appropriate for the support required and feedback from staff regarding the

staffing levels is positive. There are two vehicles in the service which people can access daily and go places where they like to spend their time.





### 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
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