



Inspection Report on

Thompson Court

Cardiff

Date Inspection Completed

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About Thompson Court

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	14 June 2019
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

Thompson Court is a small residential adapted property. The vision for the service and ethos around rehabilitation and recovery is clearly set out in the Statement of Purpose (SoP) and assisting documentation. Staff understand the needs of people they support and assist them to work towards independence at an achievable pace. 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.

Staff are professional, well trained and implement the service's values and vision through the way they work. Staff are motivated in their role and report feeling well supported by management and the organisation.

People's care documentation is personalised, and individual to their needs. People's rights are upheld, and their safety is promoted by a service that is well run. Consideration is given to people's abilities and life experience when support is planned. The home environment is safe, comfortable and suits the needs of people who live there

Well-being

People are treated respectfully and have the support they need to develop independence. The service provider works with residents to ensure they have a sense of control over their every-day lives. People make positive changes and develop skills needed to live independently whilst living at Thompson Court.

People living in the home told us they are very happy with the care provided at Thompson Court. Timely referrals to healthcare professionals and effective administration of medication support people to remain as healthy as possible. 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 living in the home told us they were very happy with the care provided at Thompson Court.

Good systems are in place to protect people from abuse and neglect. Staff receive regular training on safeguarding and know how to 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 inspection. 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 home is nicely decorated, and people have access to outside space. Bedrooms are individually decorated, and people have their own keys. The kitchen supports people to prepare meals and snacks independently.

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

Care and Support

People are involved in planning their care and how they are supported at Thompson Court. Compatibility prior to any new admissions is carefully considered. Pre-assessment and care planning considers staff skill mix alongside other residents' needs. Admissions are managed to ensure the service can meet the needs and expectations of people. Care documentation is personalised and recognises individuals' strengths. Monthly meetings are held between people and their named key worker. This gives opportunity for individuals goals and aspirations to be revisited and they can in collaboration with their key worker identify progress made. We saw achievement being celebrated, and staff encouraging people to identify and recognise their achievements.

The service uses the 'Star Recovery' which is a recognised approach that enables staff to support individuals they work with to understand their recovery and plot their progress. People gain skills and strategies to manage their mental health independently. Appropriate risk assessments are in place for individuals which provide staff with practical guidance on how to assist people to remain safe. People are supported to develop independent living skills and develop healthy daily routines in preparation for a more independent type of accommodation

Care needs are appropriately met by well-informed staff. Reviews were carried out at regular intervals and included people's views. There is a small consistent team of staff at the home. People are supported by familiar staff, who know them well. They can recognise any changes in people's presentation and respond appropriately. We saw care workers are 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 "*its sound here, staff help me a lot with things I need, I trust all the staff*".

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, 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. People are supported 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

Thompson Court is a homely environment set in a convenient location for people to access the local community and City centre. The environment and location support people to start to live more independently. The home is accessible and safe with appropriate security measures in place. The overall environment is welcoming and clean. 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. Communal areas also reflect the people who live in the home. People can decorate their own rooms to individualised taste. All bedrooms have ensuite facilities, there is a communal kitchen, living room and garden to the rear of property. There is a smoking shed outside. People told us they liked the environment and felt staff were respectful of their individual space. The kitchen supports people to prepare meals and snacks independently as individuals have their own fridges and cupboard space.

Health and safety of the home is managed, with maintenance plans in place to maintain the high standards. Regular fire safety equipment checks are undertaken. Personal evacuation plans are tested and kept under review. Gas, electric and other services have been checked by appropriate companies.

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.

People live in a well-run home which aims to maximise their potential. Staff are valued, supported, and given clear direction. Care workers are appropriately recruited, supervised, and trained to meet the complex and diverse needs of people they care for. Care staff have professional care qualifications and are registered with Social Care Wales. Care workers told us they felt their training enabled them to do their job competently. A training matrix of completed training was seen. Care workers are also delegated additional 'champion' roles by the manager in the home, which gives them individualised responsibility for areas like Health and safety, safeguarding and other areas. This acts as a support mechanism to managers but also gives care staff responsibility and experience at a wider service level. Care staff told us they felt they have *"good and relevant training"* *"the manager is one of the best managers I have had very supportive"*. *"Love working at the service and feel we help the people we support"*.

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 timely. The manager conducts audits to monitor the day-to-day running of the service, which 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. 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
New	This non-compliance was identified at this inspection.
Reviewed	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.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	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 operate a whistleblowing policy which enables people to raise concerns	Achieved
9	The service provider must ensure that CIW is informed of the interim arrangements for undertaking the RI responsibilities in the absence of the RI	Achieved
12	The service provider must ensure there is an effectively operated safeguarding policy	Achieved

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