

Inspection Report on

Mencap Cymru Domiciliary Care Shotton

Mencap
Unit 6
Deeside Enterprise Centre Rowleys Drive
Deeside
CH5 1PP

Date Inspection Completed

04/04/2023



About Mencap Cymru Domiciliary Care Shotton

| Type of care provided | Domiciliary Support Service |
|--|---|
| Registered Provider | Royal Mencap Society |
| Registered places | 0 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | This is the first inspection of the service under RISCA |
| Does this service provide the Welsh Language active offer? | This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture. |

Summary

People are provided with a person-centred service which is flexible, encourages them to be in control, to make choices and increase their independence in supported living. Personal plans are tailored to each individual including important details about what people really want and how they want to be supported. There are work opportunities, leisure activities as well as social events where people can meet other people and form positive relationships. Staff actively seek out new experiences for people to try with balancing the benefits of positive risk taking. Wellbeing outcomes are being achieved by people who use the service.

People are valued and supported by committed and enthusiastic staff teams who provide consistency and build positive relationships with people and their families. Staff feel listened to, valued, supported, and trained in their roles. Managers are motivated, approachable and lead by example. Managers and staff are positive about the service and talk about upholding its values. There is clear oversight of the service with systems and processes in place to monitor and identify any issues with a focus on promoting creativity and continually improving the service people receive.

Well-being

People are in control; they speak for themselves and contribute to decisions affecting their lives. People, their families and advocates are involved and contribute to personal plans and reviews. Plans reflect what support is right for them, when they want it and staff are recruited who share common interests with them. Outcomes are clearly set out, understood by staff, evidenced in daily records with video clips and closely monitored to ensure they remain relevant and achievable. Staff communicate with people in a way they can understand, using signing, pictures and electronic equipment to aid conversations. Staff comments include "supported living" is "to live lives as independently as possible, to live it without any obstacles".

Peoples physical, mental health and emotional wellbeing needs are being met. Staff know people well and can notice if there are any changes in needs. Further advice and support are obtained from professionals as required. People do the things that make them happy including socialising at clubs, discos, participating in leisure activities and meeting up with their friends and families. Staff are creative and actively look for new experiences for people to try to enhance their lives. Active support is used and staff told us about people preparing and making meals and being involved in baking and cooking. A person told us they are happy living in their home, they go to work, have lots of friends and like the staff supporting them. Relatives feedback includes people being "really happy", they "enjoy being there", with good staff who know and understand them.

People are protected from abuse and neglect. Staff receive training in safeguarding and told us they can raise any issues or concerns they have with management. People and relatives also told us they feel able to say if they are not happy about something or make a complaint if needed. Consideration is given to positive risk-taking weighing up the benefits and positive outcomes this can have for people. Issues reported to management are followed up and action taken where necessary.

People live in their own homes which support their wellbeing. Consideration is given to compatibility of people living together and they are involved if a new person wants to move in with them. Staff advocate for and support people to keep their homes safe, clean, well maintained and equipped to promote their independence. Rooms are decorated to their tastes, designed and planned with them and their families where appropriate.

People have accurate and up-to-date plans for how their support is to be provided which meets their individual needs. Personal plans are tailored to each individual and compiled with people, their relatives and other representatives. One-page profiles are completed providing information about what is important to them, what they are great at, what they might find difficult and what support they want. Reviews are held as required or when needs change and plans are updated accordingly. Staff are informed of any changes and read amended support plans. Daily records show support is being delivered in line with people's personal plans. Outcomes are set and progress is closely monitored to achieve these.

People are provided with the quality of support they need through a service designed in consultation with them. They are involved in meetings, reviews and decisions being made about their lives with advocacy and professionals' involvement where required. People are the focus of staff attention and are included and involved in what is going on. Staff spend time with people regularly chatting with them about any changes they want to make in their lives. People make plans with staff who support them to have more choice and independence. They discuss ideas and possibilities to try different things with positive risk taking, helping them plan to make it happen. Information about the service is shared with people through events and parties which are held to bring people and staff together, recognising achievements, good practice and finding ways to further improve the service. A social media site is used for work purposes with photos of people and what they have been up to. Newsletters are also sent out to people and a manager told us people like to see themselves and people they know in these.

People have the same rights and responsibilities as other people and are supported to understand these. They live in their own home with a tenancy agreement and are involved in decisions about how their home looks. People open their front door to visitors and receive and open post addressed to them. They are supported to understand money and budgeting. Consideration is given to compatibility where people share living accommodation and when things change plans are put in place to help people move and make plans for their future. Social stories are used to help people understand changing circumstances and to manage expectations.

Leadership and Management

There are governance arrangements in place to ensure quality care is provided. Policies and procedures are in place which are reviewed and updated and the statement of purpose accurately reflects the service provided. There is a positive and proactive culture with

managers and staff talking about upholding the values of the service and their enthusiasm and commitment to providing person centred support to people. Staff comments include a service which is supportive and flexible, management are very approachable, staff are positive and love their job. Staff told us people really are at the centre of it, they have a good quality of life and they try to give them the best experiences they can. An electronic system enables the RI and managers to oversee information and check records and audits are completed comprehensively and on time. The RI visits the service three monthly, speaking with people and staff and collates a report. Quality of care review reports are also completed six monthly to identify what the service does well and any areas for improvement.

People are supported by a stable staff team who are highly motivated and skilled. People are involved in the recruitment process. Staff matching tools are used to find the right individuals considering preferences, personality types and similar interests. Robust recruitment processes are followed with checks made to ensure staff are suitable. Inductions are completed and general observations of practice are continually carried out with staff. They receive comprehensive support and training to meet people's individual needs. Managers lead by example and praise staff focusing on their strengths and the different qualities they bring to the team. Managers told us supervisions are currently being reviewed to further improve this process. Staff told us training is "excellent" and discussions are held with them after attendance to check their learning. Team meetings are held to encourage discussions and share ideas to improve practice. When asked what is good about the service staff commented on having a strong team, working on problems, and having good communication. Relative's comments included being "really happy with everything", "care wise can't complain goes out with staff", "loves them all", they are "happy", and staff "joke and have a laugh with them".

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| 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 | |

| N/A | No non-compliance of this type was identified at this | N/A |
|-----|---|-----|
| | inspection | |

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