



# Inspection Report on

**Cunliff Street**

**WREXHAM**

## **Date Inspection Completed**

15 July 2021

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## About Cunliff Street

Type of care provided	Care Home Service Childrens Home
Registered Provider	Keys Young People Limited
Registered places	2
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

Young people are happy living in the home and receive person centred care from a dedicated staff team. Information obtained during the pre-admission process informs the provider assessment, young people's personal plans and risk assessments. Care staff regularly review the documents whenever changes occur and young people's care files contain up-to-date information. Care staff understand young people's personal needs and encourage their independence through participation in recreational activities and leading a healthy lifestyle. Young people are encouraged to be part of their care planning and participate in regular keyworker discussions. They have access to education, health and social care services and when required, therapeutic support via the provider's internal service. Young people know how to raise a concern, feel safe and speak positively about the care staff. Various health and safety checks and identified maintenance work is completed. Young people's rooms contain suitable furnishings, are personalised and they are involved in choosing the home's décor. The provider completes safe recruitment checks and care staff complete a formal induction, access training and receive regular supervision. The responsible individual (RI) has a clear oversight of the service and is in regular contact with the manager who feels supported. Quality monitoring audits and reports are also completed and shared with the provider's senior leadership team.

## Well-being

Young people are supported to have control over their day-to-day life choices and are listened to. Young people told us they are encouraged to express their views and opinion about their care and support. They participate in regular keyworker discussions and speak positively about the care and management staff team. Young people told us they are “*treated well*” and “*respected*” by care staff and describe them as “*good*” and “*nice*”. Care staff provide young people with person centred care and written records document how to achieve this.

Young people have access to various health and social care services. Care staff record appointments, and recommendations and outcomes within young people’s care files. They use the information to support young people’s health and social well-being needs and to inform personal plans and risk assessments. Young people are encouraged to lead a healthy lifestyle and participate in a variety of recreational activities. The service has some care staff who speak Welsh and have a Welsh young person’s guide available. The provider is currently in the process of looking into translating the Statement of Purpose (SoP) into Welsh.

The service has relevant policies and procedures in place to ensure young people are safeguarded from harm. Care staff have access to safeguarding training and the provider’s induction process enables them to access a variety of safeguarding/child protection, anti-bullying, complaints and whistleblowing procedures. The whistleblowing policy did not contain contact details for Care Inspectorate Wales (CIW), which the provider addressed before the completion of this report. Young people understand the complaints procedure and have access to an independent advocate. They state they feel “*safe*”, that care staff “*protect*” them and “*tell me what’s right to do and what’s not*”.

Educational provision is available and young people have access to community activities. Care staff state they have developed a positive working relationship and “*great communication*” with the schools during the COVID-19 pandemic. Young people continued to access education during the pandemic and state care staff supported and encouraged them to complete schoolwork at home. Young people participate in physical and recreational activities of personal interest to them and are happy with the choice available.

Young people live in suitable accommodation that is safe and supports them to achieve well-being. The home is tidy, suitably furnished and contains facilities to encourage and develop young people’s independent living skills. Young people’s rooms contain personal items important to them and there is enough space for them to have private time or to socialise with others. They state they “*like*” living at the home, feel “*settled*” and are “*happy*”. Relevant health and safety checks are completed and the home has, and continues to benefit from significant renovation and redecoration.

## Care and Support

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The pre-admission process assesses how the service is able to meet young people's needs and personal plans are linked to well-being outcomes. The pre-admission documentation shows consultation with commissioning services, informs a detailed provider assessment, young people's personal and positive behaviour management support plans, and risk assessments. Care staff complete daily handovers and speak positively about the introduction of a significant events book, and support plan overview document, which has further improved communication between them. Care staff update personal plans, risk assessments and inform each other of changes to young people's circumstances. We saw an example where information had not been included within a positive behaviour management support plan in a timely manner, and recommended consistency is required to ensure each current, active working document is updated as soon as possible. Care staff also monitor and evaluate young people's progress, are able to liaise with the provider's therapeutic teams if required, and a child friendly version of their personal plan is available.

The service has systems in place to ensure young people are listened to. Young people told us they attend a weekly house meeting and have regular key worker sessions. One young person told us they "*enjoy*" the key worker sessions where "*staff listen to me*". They told us care staff "*help me*" to develop their independence and "*respect my rights*". Young people understand how to contact their social worker and an independent advocate. Care staff also encourage and assist them to attend Looked After Children review meetings and education. One young person told us they are aware how to make a complaint and records show no complaints submitted since November 2019.

Young people have access to various external health services. Care staff support young people to attend appointments to ensure they receive medical care, and record treatment outcomes within care files. Young people have access to a range of services relating to their physical, emotional well-being and social needs. They participate in physical and recreational activities important to them and are encouraged to maintain contact with family and friends. Young people told us they are encouraged to eat healthily, are involved in menu planning and enjoy occasional take away meals. Prescribed medication is stored securely, care staff receive training and the medication administration records viewed were accurate.

Relevant safeguarding and whistleblowing procedures are in place. The safeguarding policy references Wales Safeguarding Procedures and care staff have access to safeguarding training. They told us they know how to report safeguarding concerns and the importance of reporting matters. The provider submits notifiable safeguarding events to CIW and makes safeguarding referrals to the local authority when required. Care staff consider young people to be "*very well looked after*", have access to the whistleblowing policy and told us they are confident in the provider's whistleblowing process.

## **Environment**

Young people live in a home which meets their needs, supports them to maximise their

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independence and achieve a sense of well-being. The home is located close to a town centre and young people have access to a variety of amenities such as shops, recreational facilities and public transport. We completed a site inspection and viewed each room within the home and the outdoor area. Overall, the areas of the home viewed were clean, tidy and well kept. The home is undergoing a period of renovation and has benefited from significant changes to the kitchen, bathroom and living room areas. Walls have been repainted, new carpets fitted and there are further plans to upgrade the indoor and outdoor areas of the home, including the upstairs hall, staff office, roofing and the rear garden. The lounge and dining room areas, are suitably decorated, furnished and contain ample seating. The new kitchen contains various appliances to encourage young people's independent living skills. Young people's bedrooms are personalised to their liking and contain memorabilia important to them such as toys, books, dvd's and photographs. They are also involved in choosing the home's décor and furnishings. Young people share a bathroom and a separate toilet area. The home has two other bedrooms used by care staff when sleeping in, one of which doubles up as an office space. The large rear garden area is secure and consists of a shed, punch bag, patio, table and chairs.

Health and safety checks of the premises are completed. The manager has oversight of maintenance records, which they verify, and sign. Maintenance records show they report identified improvements to the maintenance team and document when the work is completed. Discussions with care staff and written records confirm the completion of regular electrical equipment/appliance testing and fire safety checks. We discussed the use of window restrictors with the provider as we saw one young person's room did not contain one due to personal choice. We recommended the provider seek further advice and information regarding this and to document their decision within a risk assessment.

The service promotes hygienic practices and manages risk of infection. An infection control policy is available to care staff. Care staff told us the provider has provided them with specific COVID-19 management guidance since the beginning of the pandemic. Care staff have access to personal protective equipment and cleaning products, and are happy with the current infection control procedures in place. The home has experienced two COVID-19 related episodes, which were successfully contained. Care staff participate in weekly testing, have received vaccinations and the RI attends twice-weekly COVID-19 meetings with their line manager.

## Leadership and Management

Governance arrangements are in place to support the operation of the service and they provide a sound basis to ensure quality care and support for young people. The manager told us they receive regular support from the RI who involves them in decisions regarding the operational running of the home. The manager is relatively new to the home and states they have “*appreciated*” the support provided by the RI who has “*guided*” and “*advised*” when required. They state the RI and provider respond positively to their ideas and plans for the home’s operational development. The manager attends monthly meetings with managers of the provider’s other regional homes, and whenever possible, attends a monthly meeting with managers from other children’s homes to share and discuss best practice development.

Arrangements are in place for the effective oversight of the service through ongoing quality assurance processes and the service is provided in accordance with their SoP. The RI attended the home during the inspection and young people and care staff confirmed the RI visits on a regular basis. They told us the RI obtains their views regarding their personal well-being, development and the day-to-day running of the home. Care staff describe the RI as “*a good person*”, “*helpful*” and “*approachable*”. The RI has a clear oversight of operational matters via a comprehensive reporting system. The RI receives, completes and submits reports to the senior leadership team covering various operational topics. They obtain information via their visits, auditing and the managers detailed quarterly quality assurance reports as part of the quality of care process. An independent visitor evaluates particular themes pertinent to service provision on a monthly basis. The manager and RI have oversight of their findings, and review and address any recommendations made. The current SoP also accurately describes the current service provision arrangements.

There are appropriate numbers of suitably fit and qualified care staff available and they receive regular supervision and training. The provider completes enhanced staff recruitment checks and verify employment references. An area for improvement within the interview process is required to address any gaps in employment history within application forms. Newly employed care staff complete the All Wales Induction Framework if they have not previously done so, as well as the provider’s induction programme. Staff rota records shows staffing numbers in line with commissioning service’s arrangements and the provider is looking to recruit additional care staff. Care staff and the manager currently complete additional shifts to cover a shortfall in the staff rota. They each state they are happy to do this as they share hours equally and it ensures young people receive consistent support from familiar staff. Care staff speak positively about the manager, describing them as “*supportive*” and “*understanding*” and state they receive regular supervision. They acknowledge the manager has brought “*stability*” to the home and provides them with clear leadership and guidance. The staff training record shows a variety of training is available and care staff are happy with its quality and content.





**Areas for improvement and action at, or since, the previous inspection. Achieved**

**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None	
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**Areas where priority action is required**

None	
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**Areas where improvement is required**

None	
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**Date Published** 14/09/2021