



Inspection Report on

Cherry

Denbigh

Date Inspection Completed

25/11/2022

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About Cherry

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Mental Health Care (Highfield Park) Limited
Registered places	2
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?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are supported by staff who know them well and can communicate with them using different methods. They are encouraged to make choices and are involved in their care and support and their reviews. Personal plans are person centred and independence is promoted. People have access to appointments and checks to keep themselves healthy and well. Professionals are positive about the support people receive and are complimentary about the manager and staff. People can do the activities they enjoy, keep in touch and are visited by families or an advocate where appropriate.

Rooms are personalised and consideration is given to the environment so that it suits the needs of people living there. Refurbishment and redecoration in some areas has been completed with more work planned. Risks are identified and reduced where possible to keep everyone safe. Recruitment checks are carried out and we spoke with the manager about ensuring dates are checked on application forms and references. The manager and staff feel supported in their roles and receive training and supervision. Arrangements in place ensure that the RI has good oversight and identifies and takes action to address any issues identified.

Well-being

People have control over their day to day lives. They are treated with dignity and respect by staff who know them well. Staff understand how best to communicate with people using different methods and communication passports are also in place. Staff told us people are involved in making choices about what they want to eat, what they want to do and where they want to go and have access to an advocate if needed. The manager told us about the use of a tool which measures and supports people to achieve their outcomes. Staff record any progress made in people's daily diaries which is reviewed bi-monthly so as to move people forward in a meaningful way. Staff comments about what is good about the service include "*person centred*", "*do what they want to do*" and "*are happy*".

Peoples physical, mental health and emotional wellbeing needs are being met. Health appointments and checks are recorded and there are health action plans in place. Health and social care professionals involved provided positive feedback about the service. People can do things that make them happy both inside and outside their home including going out for walks and swimming. People keep in touch with their families and they can come to visit them when they wish. The manager and staff have built positive relationships with people and speak fondly of them.

People are protected from abuse and neglect. There is a safeguarding policy in place and staff receive training. The manager and staff feel able to raise any concerns they may have. Positive behaviour support (PBS) plans and risk assessments are in place to keep people and staff safe.

People live in a home that is suitable and meets their needs. People's rooms are personalised and they are involved in how their home looks. There is a garden area for people to access and spend time in.

Care and Support

People receive the quality of care and support they need through a service which involves them. People are encouraged to make choices using Makaton, pictorial cards and pictorial menus. Now and next picture boards let people know what is happening that day.

Communication passports are in place informing staff about words used, what these mean for people and how to respond. Personal plans include detailed information, there are one-page profiles about what is important to people and the best way to support them. People, their families, staff and professionals contribute to plans and reviews. People can attend their own reviews and stay for as long as they want to. Professionals told us about reviews *“The staff who participated in the review were knowledgeable”* and *“provided thoughtful and insightful feedback”* and *“They definitely seemed to have a good understanding”* of the person’s needs. Another professional told us *“Throughout the review I was happy with the level of support and understanding shown towards them”* and *“I was very impressed with the staff and service overall”*. We saw a notice in the office to remind people that they can access their records whenever they wish to do so.

People can access services to stay healthy and well. All appointments are recorded, health action plans are in place and hospital passports are in place. Annual health checks and medication reviews are carried out. Where a particular need is identified assessments are requested and risk management plans completed to keep people safe and well. Activities like walking and swimming are encouraged and fresh fruit is available to them.

People are protected from harm and abuse. There are policies in place for safeguarding, whistleblowing and concerns. Staff feel able to raise concerns and receive training in safeguarding. Positive behaviour support plans are detailed for staff to follow alongside risk management plans.

Environment

People live in a home which meets their needs. The home was clean and tidy throughout. Rooms are personalised and the manager explained this was in keeping with people's preferences. People had been supported to pick room colours from colour charts. Attention has been paid to the environment, the manager spoke about certain types of switches and use of autism friendly colours based on their own research. Scented photo frames are to be used and the manager told us they are trying out new things. The kitchen had been refurbished and new chairs purchased for the lounge/ dining room. Maintenance work has been completed including some redecoration and more work is planned. There is a private garden for people to use and the manager told us about other ideas for this area such as fidget boards. There is also a summer house for a person to spend their time in.

Risks are identified and action is taken to reduce these. There is a fire safety policy in place. Fire risk assessments have been completed and checks are carried out on fire alarms and extinguishers. Fire evacuations are carried out and each person has a personal emergency evacuation (PEEP's) plan in place. Health and safety audits are completed.

Leadership and Management

People can be confident management monitors the quality of the service they receive. Arrangements are in place to support the smooth operation of the service and ensure good quality care and support for people. The responsible individual (RI) visits the home every three months and completes a report of their findings. The manager feels supported by the RI who is contactable and provides reassurance. The manager and deputy told us they support each other really well and can raise any issues they have. The manager can also contact other managers within the company for advice and support, who are non-judgemental and all of them have different skills and experiences to share.

People are supported by staff who undergo recruitment checks and receive supervision and training in their roles. Staff files contain the necessary information including references, forms of identification and Disclosure and Barring Service (DBS) checks. We spoke with the manager about ensuring that dates on applications are cross referenced with those provided on references. The manager told us the team have been here a long time. There is an all-male staff team and they help to provide cover when needed. One member of agency staff is used to reduce the number of unfamiliar faces coming in. Staff said they felt supported comments included the team leader is *“very supportive”*, *“Staff team very supportive”*, *“work well as a team approach”* and *“support each other”*. We looked at record and staff told us they receive supervision and spoke about the training they receive. The manager is aware of some training that is still needed and is booking places for staff to attend.

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
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Date Published 19/12/2022