

CAERPHILLY COUNTY BOROUGH COUNCIL DIRECTORATE OF SOCIAL SERVICES

COMMISSIONING TEAM (ADULTS)

CONTRACT MONITORING REPORT

Name/Address Of Provider: Parkside Residential Home, Hillview, Maesycwmmmer, Caerphilly, CF82 7QE

Date Of Visits: Monday 24th July 2017

Visiting Officer(s): Amelia Tyler: Contract Monitoring Officer, Caerphilly CBC

Present: Michelle Flanagan: Manager, Parkside Residential Home

1. Background

1.1 Parkside is a residential home located in the village of Maesycwmmmer and is registered to provide accommodation for up to 17 people over the age of 65 with a diagnosis of dementia. It is noted that one of the rooms is registered for double occupancy. At the time of the visit there were 5 vacancies for people who require residential support who have a diagnosis of dementia.

1.2 In line with the contract monitoring strategy, Parkside is subject to a minimum of two monitoring visits a year (one announced and one unannounced, out of hours) as well as an inspection by its regulating body: CSSIW, to ensure that contractual agreements, national minimum standards, regulatory and legislative standards are being maintained in addition to providing a good quality of life and maximising the independence of those living there.

1.3 The purpose of the visit was to follow up on the recommendations made during the previous monitoring visit completed on the 17th October 2016.

1.4 At the time of the previous report there were 3 corrective actions and 4 developmental actions identified. These actions were reviewed and the findings are outlined below. Any actions not completed will be addressed in the next visit. Corrective actions are those, which must be completed (as governed by legislation etc.), and developmental actions are those, which are deemed to be good practice.

2. Previous Recommendations

2.1 The plan is drawn up with the participation of the resident, recorded in a style accessible to the resident; agreed and signed by the resident whenever capable and/or representative (NMS 6.5)

Not met. This was originally highlighted during a monitoring visit in 2014. There was no evidence on the files seen that residents or their representatives had been involved in writing the plan or asked to sign the document. It was mentioned that a relatives meeting was due to be held on the 28th July and this would be raised with attendees to emphasise the need for this to be completed.

- 2.2** Monthly reviews of service plans to be meaningful and be able to reflect any changes in need (NMS 6.4)
Partly met. It was acknowledged that the reviews seen were more personalised and the Contract Monitoring Officer was told that the CSSIW inspector had also noted improvements. Both files had documented service plan reviews that had been completed in the past month. It was noted that the service plan for one gentleman did not mention the use of a wheelchair, but this was highlighted in the review: it is recommended that the use of the wheelchair and detail around safety, maintenance and transfers be incorporated into the plan. The Manager highlighted that there were no changes to the care needs of the people that were looked at but it was stated that additional detail is needed in the reviews.
- 2.3** Ensure application forms contain a detailed employment history and any gaps are explored and the outcome recorded in line with NMS 22.1.
Met. Staff files were seen for 2 employees during the visit: 1 file highlighted that the reason for the gap in employment was due to moving area and being a housewife, the second file did not record any dates next to their place of employment. The Manager stated that the member of staff had started their job prior to this action being highlighted and said that full employment histories are now in place for new starters.
- 2.4** Consideration to be given to splitting the training matrix into mandatory and non-mandatory worksheets
Met. The Contract Monitoring Officer was provided with copies of the training matrix and it was evidenced that the matrix had been divided.
- 2.5** The Manager to consider reviewing all feedback questionnaires in order to gain more focussed answers to the questions.
Not met. The questionnaires had not been reviewed as the Manager had not had opportunity to look at these since the previous visit. In order to obtain a more accurate picture of the service and the views of those living and working at the home, it is recommended that the questionnaires incorporate more of a scale rather than yes/no responses. It is felt that some people may find it difficult to categorise their answer e.g. 'Were staff friendly and helpful while you were in the building?' Yes/No? It may be that the majority were really friendly and 1 employee appeared abrupt, but the visitor may be inclined to mark this as 'No' due the conduct of the individual.
- 2.6** Consideration to be given for a 'signed for' sheet to be present on the resident's files to evidence that staff have read and understood the service delivery plans for the individual.
Not met. This had not been completed at the time of the visit, however, following the meeting the Manager stated they planned to implement a separate book for care staff to sign and date for each resident to evidence they have read and understood the service delivery plans.
- 2.7** It is good practice for the names and signatures of interviewers and the date of the interviews to be logged on the interview records. It is also recommended that a scoring system and the outcome of the interview be documented.
Partly met. There was a separate book in place that documented the interviews held. It appeared from the information provided that interviews were only

conducted by the Manager: it is good practice to have a minimum of 2 interviewers to ensure there is agreement on the information provided and the overall outcome. There was no scoring system in place and it was stated that this is also good practice to ensure there is something to refer to should the candidate request feedback and also to assist in making a decision should 2 applicants have very strong interviews.

3. Findings from visit

3.1 Staff feedback

3.1.1 The member of staff spoken to said that the emphasis on health and safety can sometime be a bit restrictive as there is too much focus on potential risks. However, it was stated that this has improved since the home undertook the 'butterfly project' run by Dementia Care Matters. This has increased the understanding of dementia and how to meet the emotional needs of residents.

3.1.2 In order to support the emotional needs of residents, staff spend time talking to residents, giving hugs, providing reassurance and talking about their own personal experiences.

3.1.3 It was stated that the Manager spends lots of time walking around the home, engaging with staff, residents and visitors and working directly as part of the team. The Contract Monitoring Officer was told that the employee felt able to speak to the Manager about any concerns they might have were encouraged to offer suggestions about how the lives of the residents could be improved.

3.2 Resident feedback

3.3.1 2 residents were spoken to in order to obtain their feedback and views of the service: One gentleman said that he didn't do much during the day apart from reading the newspaper and stated that he was bored: however, when the Contract Monitoring Officer spoke to their relative they highlighted that care staff had tried to get him involved in various activities such as crosswords, puzzles and word searches. The second resident was playing domino's and played a couple of games with the Contract Monitoring Officer whilst chatting. It was stated that she listened to music, watched TV and played board games.

3.3.2 Both residents reported that they enjoyed the meals and neither could think of any meals they would like that they are not offered at the moment.

3.3.3 One resident told the Contract Monitoring Officer they didn't get to go out, but when prompted, could not state where they wanted to go or what they would like to do, another resident stated that they did get to go out occasionally but would like to go out more.

3.3.4 Each resident commented that the members of staff are always kind and caring and told the Contract Monitoring Officer "They do well, they look after me" and "The girls are very good to me".

3.3 Relative feedback

- 3.3.1** The Contract Monitoring Officer was given a copy of the outcome of the questionnaires completed by relatives and this gave a positive overview of the care provided to residents. The only concern raised was around members of staff ensuring that woollen items aren't put in the tumble dryer. All responses stated they are happy with the meal choices and stated the Manager was approachable if they had any issues.
- 3.3.2** 2 relatives were contacted to provide feedback to the Contract Monitoring Officer and both commented that they were always made to feel welcome at the home and staff members always offered them a drink. The atmosphere at Parkside was described as warm, friendly, welcoming and homely. One relative said "the care is wonderful" and "the whole team are very, very caring".
- 3.3.3** When asked, both relatives stated they were kept informed if any changes in health or any medical appointments.
- 3.3.4** If there was anything that could be changed about the home, 1 relative said that there was nothing at all she would change in the way of care, but would have liked her Mother to have a larger room. The second relative commented the décor was a bit dated, but there wasn't anything else they could think of.

3.4 General observations

- 3.4.1** The training matrix provided evidenced that 18 members of care staff had completed training around dementia, leaving 4 outstanding that need to be nominated promptly. The Manager informed the Contract Monitoring Officer that she will nominate both cooks to attend nutrition training when it becomes available.
- 3.4.2** It was noted that the home has a good continuity of staff member with low turnover and they do not utilise agency carers.

4. Corrective / Developmental Actions

4.1 Corrective actions (Deadline for all corrective actions 27.03.17)

- 4.1.1** The plan is drawn up with the participation of the resident, recorded in a style accessible to the individual; agreed and signed by the individual whenever capable and/or representative (NMS 6.5)
- 4.1.2** Monthly reviews of service plans to be meaningful to be able to reflect any changes in need. If there is no change required to the service plan, brief explanation to be recorded (NMS 6.4)
- 4.1.3** Ensure application forms contain detailed employment history and any gaps are explored and the outcome recorded in line with NMS 22.1.

4.2 Developmental actions

- 4.2.1 The Manager to consider reviewing all feedback questionnaires in order to gain more meaningful, focussed answers.
- 4.2.2 Consideration to be given for a 'signed for' sheet to be present on the resident's files to evidence that staff have read the service delivery plans for each resident.
- 4.2.3 It is good practice for the names and signatures of interviewers and the date of the interview to be logged on the interview records. It is also recommended that a scoring system and the outcome of the interview be documented.

5. Conclusion

- 5.1 Following the previous report, it was noted that of the 7 recommendations made, 2 were met, 2 were partly met and 3 were not met. It was acknowledged that the Manager does not have many supernumerary hours which would enable her to focus on the actions identified due to other priorities within the home.
- 5.2 Staff members have been observed to be very caring towards residents and to chat to them on a 1:1 level and offer reassurance when needed. Parkside also offer choice and promote independence and encourage residents to take part in daily activities such as washing up and laying the table where they wish to do so.
- 5.3 It is noted that there is some documentation that needs to be completed and training to be attended, but the staff group appear very knowledgeable about the people they are supporting and their preferences. It was also mentioned that a volunteer attends the home once a week to engage in activities and games etc. to stimulate residents, although this is on an informal basis. The Contract Monitoring Officer also observed the personalised pictures beside each room which gives a brief description of the individual, their likes and what things are important to them.
- 5.4 The Contract Monitoring Officer would like to thank the staff, relatives and residents at Parkside for their time and hospitality during the visit.

Author: Amelia Tyler
Designation: Contract Monitoring Officer
Date: 8th August 2017

N.B. This report will be made available via Caerphilly County Borough Council's Internet site. Hard copies of the report will also be made available to prospective residents and/or their families should they ask to see them.