



Inspection Report on

Bath House Residential Assessment Centre

Date Inspection Completed

09/03/2021

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About Bath House Residential Assessment Centre

Type of care provided	Residential Family Centre
Registered Provider	38.6 Solutions LTD
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	First inspection
Does this service provide the Welsh Language active offer?	The service is working towards the active offer.

Summary

Bath House is a service which provides a twelve week assessment of parents' ability to provide safe and nurturing care to their children. The period can be extended with the agreement of the management team if the local authority requests. The parents are required to attend parenting programmes, establish routines, attend appointments and staff are there to support the parents in achieving these goals.

People told us they have good relationships with some care staff and feel they care about them. They told us they feel safe and supported by the care staff and management team. They are able to voice their wishes, feelings and concerns and have opportunities to do so. The people we spoke with were not sure of the advocacy services available to them.

People are cared for in safe and homely surroundings. They can choose some of the décor of their bedrooms, which are comfortably furnished, although the garden would benefit from being improved.

The manager and the responsible individual are active in the life of the home and aware of the care being provided, resulting in good internal quality assurance systems. However, there is a lack of independent checks, which would give a more impartial view of the operations of the service and support continuing improvement.

Well-being

People know and understand what care, support and opportunities are available to them, and use these to help them achieve their well-being. People are supported to have some control over their day-to-day life choices and are listened to. They have meetings as a group and individual meetings with their key workers. The management and care staff treat the people with dignity and respect, and listen to their views and requests and take action to make changes. People told us they feel comfortable to raise issues and make complaints. People should have access to an advocacy service through the placing local authorities, but the people we spoke with were not aware of these services. We spoke with the provider about how they could improve people's awareness of these services and how to access them.

People know and understand the care, support and opportunities available to help them achieve positive outcomes. Each person has a personal plan, which focuses on what they need to do and how care staff will support them. Care staff consult with the people and seek information to help them to make decisions about things that affect their lives. The people we spoke with were very positive about their key workers and said they felt 'Very supported'. A person said they felt able to raise issues with their key workers and records confirmed this. We observed people to be relaxed with the care staff on duty during the visit. Staff spoke very positively about them and were genuinely interested in their well-being.

Care staff encourage and support people to be emotionally and physically healthy. People have regular contact with health professionals who monitor their babies/children's physical health. Care staff encourage people to be active by planning a group walk every day. People have positive relationships with some care staff and are able to share their feelings so they get the right care and support as early as possible, and it is regularly reviewed and updated. Three members of staff speak Welsh, so people can communicate with them in their first language.

The manager and care staff protect people from abuse and neglect. Care staff are aware of how to keep people and their children safe, and how to take action if they are concerned for their well-being. People told us they feel safe and social workers confirmed there is very good communication from the service. The service encourages people to maintain contact with friends, partners and families and runs a programme for parents about safe and healthy relationships.

Care and Support

The service obtains detailed information about people before agreeing to provide a placement. A social worker said the matching process had been very thorough. The management team review the information gathered to assess whether the service can meet the person and their child's needs. They also check that any new people will be compatible with those already living in the service. They meet with the social worker to discuss further, and if a match is suitable, complete an admission plan so the person can visit the home and meet care staff before they move in, however this has been affected by Covid-19 restrictions. A person told us they had been able to view the service and meet staff before they moved in, and felt welcomed by care staff when they arrived.

Personal plans are in place and include, preparing healthy meals, mental health, abstaining from drugs and alcohol, openness and honesty with professionals, ability to safeguard their child, parenting and routines, self-care and developing coping skills. The plans include the views of the person and what will be put in place to achieve outcomes and who will be responsible. The plans are regularly reviewed and contain what they have achieved in meeting the outcomes and what has been a struggle. The plans are individualised and reflect the parents' wishes, for example, two parents wanted to bathe their children daily another twice weekly. A plan states that a person wants to feed their baby on demand and the plan reflects how this will be supported by staff.

The service runs a number of programmes to support parents to understand and meet their children's needs. These include, Infant massage; The Solihull Parenting Programme; The Family Links Nurturing Parenting Programme; The Incredible Years Programmes and Rethinking Anger and Healthy Relationships. The parents we spoke with were very positive about the programmes and the tutor that delivers them. They had learned a lot about their children's development and needs and how to meet them. This was confirmed in the parent feedback forms we read.

There are weekly key worker meetings to discuss what has worked well over the week and what has not worked so well. People are able to make requests and actions are identified, for example, a person had asked for the service to check with the local authority regarding a reduction in support. Also, the records showed staff had praised them for their achievements and had supported the parents, for example, with setting alarms on their phones for feeds. People have the choice to fill in the records themselves, or for staff to help them. People have achieved things such as opening a bank account, applying for a provisional licence, looking at college courses and making a weaning plan for their child.

Leadership and Management

The provider sets out how the home will meet the needs of people in the home's statement of purpose and service user's guide. A person told us they had received a copy of the guide before moving in and had visited the website. The guide is written in a friendly format and explains what is available to people. We spoke with the management team regarding seeking information from local authorities about the advocacy arrangements to be provided for people while they are living at the service.

There are appropriate numbers of suitable care staff available and the provider follows safe procedures to recruit staff. They provide relevant training and guidance to equip care staff to provide the right care for people. The pandemic has affected the range of training on offer for care staff. However, the care staff we spoke with were positive about some of the training they had attended, especially the mental health first aid course, which included information about personality disorders and depression. Line managers supervise care staff every two to three months. The meetings include discussions about people's needs, training and care staff members' own well-being. The management holds regular team meetings, and care staff told us the individual supervision meetings and team meetings are valuable for discussing people's progress or issues and how best to support them. Care staff confirmed they are asked for their opinions about the service and the management listen and make changes.

People live in a service where there is a consistent management team, which sets high standards and there is effective use of resources. Care staff told us the standard of support from management is high, and both the manager and responsible individual are visible and approachable. Care staff told us they enjoy working at the service, work well together as a team and morale within the team is good. Care staff said communication is generally effective across the shifts as the handover documents have been improved at their request and are more detailed.

The provider has quality assurance systems in place to monitor the operation of the service and maintain standards. The responsible individual and the manager work at the service full time and are also the directors of the company. This means that they are active in the life of the service and aware of the care being delivered. However, this also means that staff are limited to who they can approach within the company if they have issues with the management team. Staff told us the manager and responsible individual listen if they have issues or concerns. The responsible individual completes checks on the operation of the home every three months and writes reports of their findings. We suggested to the management team that contracting an independent visitor to carry out an audit of the home on a regular basis would provide an independent view of its operations.

The manager has completed a review of the quality of care provided at the home, and includes analysis of good practice and identifies areas for improvement. However, this is

required to be completed every six months, and at the time of the inspection was overdue. We read 17 questionnaires that had been given to parents when staying at the service. These were positive about the service and some identified areas for improvement. We discussed with the management team how able parents are to make negative comments about the service while they are being assessed. The management team agreed and said they have started using a survey company so that responses are anonymous and we read 5 of these. We also read 13 questionnaires issued by the service to local authorities and other agencies and the feedback contained in them was universally positive.

Environment

The service is provided in a terraced house located in a residential street very close to the centre of a town. The service is within easy reach of shops, parks and beaches. We visited the property on two occasions and found it to be comfortable, clean and appropriately furnished. People living at the service are expected to keep the accommodation clean and tidy as part of the assessment process. There is a rota for people to use the kitchen so that they can have the space to prepare and cook meals. Each person has their own fridge and shared use of two freezers. We saw that the ice compartment of a fridge was being used to store bread. We gave the provider advice about safe storage of food as these compartments are only safe to store food for up to three days. There is a dining room and two lounges. There are four bedrooms for people to use and two bathrooms, which are suitable and the people we spoke with told us they liked the house and their bedrooms. The office is located on the ground floor.

There is a small garden to the rear of the property. A shed is used to store various outdoor equipment and other items. The area where prams are stored is protected by PVC strips rather than doors. We suggested to the provider that the storage of prams could be upgraded and the outdoor area could be improved generally to make it more attractive. They told us there is a plan to refurbish the garden within the next six months.

There is a fire risk assessment and management organise fire drills and regular testing of fire safety equipment and smoke detectors. There are certificates to show that the heating and electrical systems have been checked. The home identifies risks for the environment and puts measures in place to reduce them and these include risks from Covid-19. We observed staff and management following infection control procedures during our visit, they wore face masks, regularly cleaned the surfaces and there was sufficient hand sanitiser available in all areas. We were tested for Covid-19 on arrival at the property.

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

The responsible individual must put in place suitable arrangements to monitor, review and improve the quality of care and support provided by the service. This must take place at least every six months, and a report be provided.	Regulation 80(2)
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The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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