

Bridgend County Borough Council

Cyngor Bwrdeistref Sirol Pen-y-bont ar Ogwr

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Maple Tree House

Action Plan in relation to Care Inspectorate Wales Inspection

10th August 2020

NON-COMPLIANCE NOTICE	ACTIONS	TIMESCALES	DESIRED OUTCOME	UPDATE	LEAD OFFICER	Status
<p>Regulation 15 – Personal Plan: Personal Plans were not prepared in line with Statutory Guidance – outcomes were not specific and measurable. They also did not include the detailed guidance to staff about how personal outcomes would be met. Risk Assessments did not include specific and detailed guidance to staff to minimise risk or evidence the success or otherwise of strategies staff were to follow.</p>	<p>Personal plans to be reviewed and updated to ensure the outcomes are measurable and they contain detailed guidance to staff about how personal outcomes are to be met.</p>	<p>18th September 2020</p>	<p>Personal Plans to the outcomes are measurable and they contain detailed guidance to staff about how personal outcomes are to be met.</p>	<p>All 3 Plans have been reviewed and updated. They contain measurable outcomes and detail guidance to staff about how personal outcomes will be met.</p>	<p>Steven Howell, Group Manager</p>	<p>Completed</p>
	<p>Young People need to be involved in the development of their Personal Plan.</p>	<p>09th October 2020</p>	<p>Personal Plans will be developed with the YP in order to ensure they include and reflect their wishes and feelings.</p>	<p>YP have had the opportunity to contribute to their Plans and their wishes and feelings recorded. Plans will be discussed with YP during keyworker sessions to ensure they continue to have the opportunity to contribute to them.</p>	<p>Karl Culpeck, Residential Manager</p>	<p>Completed</p>
	<p>Personal Plans to be reviewed and updated during the Fortnightly Professionals meeting.</p>	<p>18th September 2020</p>	<p>Personal Plans demonstrate the progress being made by each young person in achieving the outcomes identified within the plan and guidance to staff is updated in a timely manner.</p>	<p>Fortnightly meetings are being held (chaired by Karin Henderson) where the plans are being reviewed and updated.</p>	<p>Steven Howell, Group Manager</p>	<p>Completed</p>

	<p>Personal Plans to be reviewed and updated following any incident.</p>	<p>18th September 2020</p>	<p>Plans are up to date and reflect any changes that are required to ensure the YP meets their stated outcomes.</p>	<p>There is evidence that these plans are being reviewed and updated following any incident.</p>	<p>Karl Culpeck, Residential Manager</p>	<p>On-going</p>
	<p>All Personal Plans to be reviewed by the Residential Manager and Group Manager Placements and Provider Services and the Responsible Individual Quarterly.</p>	<p>18th December 2020</p>	<p>Management Oversight of the Personal Plan to ensure they continue to meet the desired standards and YP achieve positive outcomes.</p>	<p>Residential Manager and Group Manager have contributed to the review and update of Plans. RI visit on 16th October 2020 where one plan viewed.</p>	<p>Laura Kinsey, Responsible Individual</p>	<p>On-going</p>
	<p>Training to be provided to all staff in respect of developing and reviewing Placement Plans.</p>	<p>Seniors by 21st September 2020 Residential Workers by 30th November 2020</p>	<p>For All staff to have a clear understanding of the requirements in relation to each child's personal plan.</p>	<p>Date planned for 23rd October 2020</p>	<p>Steven Howell, Group Manager</p>	<p>Overdue</p>
	<p>Risk assessments to be reviewed and updated to ensure that they provide specific and detailed guidance to staff in respect of actions they are required to take to minimise Risk. The Risk Assessment are to also evidence the success or</p>	<p>18th September 2020</p>	<p>Risk Assessments provide specific and detailed guidance to staff in respect of actions required to minimise risk.</p>	<p>All 3 Risk Assessments have been updated and they now provide detailed guidance to staff in respect of the</p>	<p>Steven Howell, Group Manager</p>	<p>Completed</p>

	<p>otherwise of the strategies that staff are required to follow.</p>		<p>Risk Assessments provide information that can be analysed to demonstrate the success of strategies used with YP to reduce risk and where necessary can identify the need to develop a different strategy.</p>	<p>actions they need to take to minimise risk.</p>		
	<p>Risk Assessments to be reviewed and updated as necessary following an Incident.</p>	<p>18th September 2020</p>	<p>All Risk Assessment to be up to date and reflect any changes required to Safeguard a Young Person.</p>	<p>Risk Assessments are now being reviewed and updated where necessary following all incidents.</p>	<p>Karl Culpeck, Residential Manager</p>	<p>On-going</p>
	<p>Risk Assessments to be reviewed and updated during the Fortnightly Professionals meeting.</p>	<p>18th September 2020</p>	<p>Risk Assessments are up to date and reflect any changes that are required to ensure the YP is safeguarded.</p>	<p>Fortnightly meetings are being held (chaired by Karin Henderson) and risk assessments reviewed and updated.</p>	<p>Steven Howell, Group Manager</p>	<p>On-going</p>
	<p>All Risk Assessments to be reviewed quarterly by the Residential Manager, Group Manager, Placements and Provider Services and the Responsible Individual on a Quarterly basis.</p>	<p>18th December 2020</p>	<p>Management Oversight of the Risk Assessment to ensure they provide the sufficient detail to guide staff actions to safeguard young people</p>	<p>Residential Manager and Group Manager have contributed to the review and update of Risk Assessments.</p>	<p>Laura Kinsey, Responsible Individual</p>	<p>On-going</p>

			and that there is evidence that the risks have been reviewed and updated as required.	RI visit on 16th October 2020 where one Risk Assessment was viewed.		
<p>Regulation 26: Safeguarding - The service provider has not ensured that the service is always provided in a way which ensures that young people are protected from harm and abuse.</p>	<p>All Incident reports to be completed within 24 hours. Management Oversight is required for each Incident Report completed to ensure that actions taken are in line with Personal Plans, Risk assessments and Protocols.</p>	11 th September 2020	<p>All incidents are responded to in line with plans and protocols and in a way that safeguards young people.</p>	<p>All incident reports since 10th August have been reviewed by a Residential Manager and where shortfalls in quality were identified they were returned to seniors and remedial actions completed.</p>	Karl Culpeck, Residential Manager	On-going
	<p>CIW notification to be submitted within identified time scales, all senior staff to be able to report.</p>	11 th September 2020	<p>CIW have a clear oversight of significant incidents and evidence of steps taken to safeguard young people.</p>	<p>All notifications since the last inspection have been submitted within timescales.</p>	Senior Staff and Karl Culpeck, Residential Manager	On-going
	<p>Debrief sessions to continue to take place following incidents to ensure staff are supported and action to respond appropriately to behaviours is identified.</p>	11 th September 2020	<p>Staff feel supported and are provided with an opportunity to learn and develop.</p>	<p>De-briefs are being undertaken and recorded following every incident.</p>	Senior Staff and Residential Manager	On-going
	<p>Timely debrief sessions to be undertaken and with YP following an incident to assist a Young Person to consider the appropriateness of their</p>	14 th September 2020	<p>Young People have their voice heard and also have an opportunity to learn about their behaviours</p>	<p>Young People are being engaged post incident, but this area requires further improvement.</p>	Senior Staff and Residential Manager	On-going

		<p>behaviours and the impact on others.</p> <p>Develop a form to capture the de-brief sessions that are undertaken with Young People.</p> <p>Daily recording to be Quality Assured to ensure they reflect the strategies and protocols used by staff to engage with and safeguard young people.</p> <p>See Actions detailed above regarding Risk Assessments.</p>	<p>18th September 2020</p> <p>11th September 2020</p>	<p>and the impact it has on their own safety and the safety of others.</p> <p>There is clear evidence of de-brief sessions being undertaken with Young People.</p> <p>The daily recording will provide detailed evidence of daily interaction between staff and YP along with evidence of how staff are working in accordance with the YP Personal Plan, Risk Assessment and Protocols.</p>	<p>Behaviour Clinic have been asked to develop a de-brief form to use with YP.</p> <p>Some quality assurance has been undertaken and improvement commenced.</p> <p>Further work required in order to ensure the improvements have been/can be sustained.</p>	<p>Karl Culpeck, Residential Manager</p> <p>Karl Culpeck, Residential Manager</p> <p>As detailed above regarding Risk Assessments.</p>	<p>On-going</p> <p>On-going</p>
Regulation Supporting and developing staff:	36 – The	All staff to be provided with regular supervision in line with Departmental requirements.	11 th September 2020	All staff receive regular supervision that	Supervision between Residential Manager	Senior Staff and	On-going

<p>service provider needs to ensure that staff are supported, receive regular supervision, core training appropriate to the work to be carried out and more specialist training as appropriate.</p>	<p>Staff training to be scheduled and delivered in relation to Core Areas such as Child Sexual Exploitation, alcohol and substance mis-use, self-harm, first aid, Restorative Approaches (this is not an exhaustive list).</p> <p>Review to be undertaken to identify staff who are trained to deliver first aid to ensure that a member of staff is working each shift who can administer first aid as required.</p>	<p>30th September 2020</p> <p>30th September 2020</p>	<p>supports their learning and development.</p> <p>Staff have received training to be able to meet the needs of the young people that they are caring for.</p> <p>When required young people will receive first aid from a member of staff who is trained to provide it.</p>	<p>and Senior staff has commenced.</p> <p>Residential Manager is monitoring staff supervision to ensure that it is completed in line with Departmental Policy.</p> <p>2 x CSE Training to be delivered to 12 staff by the end of October 2020.</p> <p>4 x iPads now at MTH for staff to access relevant e-learning.</p> <p>Currently exploring restorative Approaches training for staff.</p> <p>Training delivered on 15/16 October 2020. All Seniors are now first aid trained so there is always a first aider on shift.</p>	<p>Residential Manager</p> <p>Steven Howell, Group Manager</p> <p>Karl Culpeck, Residential Manager</p>	<p>On-going</p> <p>Completed</p>
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	All staff to be trained in the use of Team Teach.	31st December 2020	When required to safeguard a Young Person or others, staff are able to safely restrain Young people.	Team Teach training delivered on 8 th and 9 th October 2020 and will be delivered again on 22 nd and 23 rd October 2020.	Steven Howell, Group Manager	On-going
	Behaviour Clinic to deliver a rolling programme of Positive Emotional Behavioural Support (PEBS) across 3 months to ensure that all staff at MTH receive appropriate training in relation to the Therapeutic Model being used.	21 st September 2020	All staff will have an understanding of the PEBS Model, the impact of Trauma and the therapies used. Staff will understand the different behaviour types and the approaches used to manage behaviours.	Behaviour Clinic to roll out training to all staff. The staff team will be split into two cohorts and undertake the training weekly over 10 sessions. Currently planning the roll out which is impacted by current Covid restrictions.	Steven Howell, Group Manager	On-going
	Staff training database to be reviewed and updated.	30 th September 2020	Staff training to be monitored to ensure that mandatory training is completed (and renewed as appropriate).	Have developed a worksheet to enable the Residential Manager to monitor compliance with Mandatory and specific training.	Karl Culpeck, Residential Manager	On-going
Regulation 80 – Quality of care review: The service provider has not ensured suitable arrangements were in place to establish	The Quality of Care process is to be reviewed to ensure that where shortfalls are identified during monthly visits there is a process in place for these to be followed up to	30 th September 2020	Regular visits are undertaken at MTH that review the quality of the service provided and where shortfalls are	New Monthly Visit and RI paperwork has been developed.	Steven Howell, Group manager	On-going

<p>and maintain a system for monitoring, reviewing and improving the quality of care and support provided by the service.</p>	<p>ensure any remedial actions are completed.</p>		<p>identified they are responded to in a timely manner to ensure individual's safety, health and well-being.</p>	<p>Further work required to detail the procedure to be followed when completing a visit.</p>		
	<p>Responsible Individual to resume on-site visits.</p>	<p>30th November 2020</p>	<p>RI is able to undertake a holistic assessment of the quality of service provision, reviewing the appropriate written records and receiving feedback from staff members and young people.</p>	<p>On-site RI visit undertaken on 16th October 2020</p>	<p>Laura Kinsey, Responsible Individual.</p>	<p>Completed</p>
	<p>Karl Culpeck to continue in his role as Residential manager for Maple Tree House until a New Manager has been recruited and Steven Howell, Group Manager will be based at Maple Tree House 3 x week.</p>	<p>11th September 2020</p>	<p>Increased managerial oversight at MTH to ensure the required work is undertaken to 1) reduce the frequency of incidents and 2) improve the quality of recording.</p>	<p>Management cover is present at MTH 5 days per week.</p>	<p>Laura Kinsey, Responsible Individual</p>	<p>Completed</p>
	<p>Group Manager/Principal Officer to initially chair professionals meetings held in respect of YP to ensure a robust review of the personal plans, risk assessments and protocols.</p>	<p>14th September 2020</p>	<p>Improvement in the quality of and management oversight of young people's plans and assessments.</p>	<p>Karin Henderson is chairing these meetings.</p>	<p>Laura Kinsey, Responsible Individual</p>	<p>Completed</p>

	<p>All incident reports to be reviewed to ensure that:</p> <ul style="list-style-type: none"> • They are of the required standard. • They fully reflect and outline what occurred during an incident. • They evidence learning from an incident. • Personal Plans and Risk Assessments are reviewed and updated following an Incident. 	<p>09th October 2020</p>	<p>Incident Reports that set out details of an incident along with any steps taken by staff to reduce the risk to a YP.</p> <p>Incident Reports evidence learning following an incident and this is incorporated into the Personal Plan and Risk Assessment as required.</p>	<p>Liz Walton-James is undertaking a safeguarding review of all incidents between April – July 2020.</p> <p>Debra Evans has undertaken a review of all incidents since 10th Aug and highlighted areas for improvement.</p> <p>Seniors have completed the work identified.</p>	<p>Steven Howell, Group Manager</p>	<p>Completed</p> <p>Completed</p> <p>Completed</p>
	<p>All notifications to be reviewed by Residential manager prior to them being submitted to CIW.</p>	<p>31st August 2020</p>	<p>CIW appropriately notified of significant incidents.</p>	<p>E-mail sent to all seniors to remind them that this is required 30.09.20</p>	<p>Karl Culpeck, Residential manager</p>	<p>Completed</p>
	<p>All incident reports that require a notification to CIW to be forwarded to Steven Howell, Group Manager and the Responsible Individual, who will review the actions taken in conjunction with the Residential Manager.</p>	<p>11th September 2020</p>	<p>Increased management oversight of significant incidents and deployment of additional resources if required.</p>		<p>Steven Howell, Group Manager</p>	<p>On-going</p>

Other areas of non-compliance identified during the Inspection September 2019

NON-COMPLIANCE NOTICE	ACTIONS	TIMESCALES	DESIRED OUTCOME	OUTCOME	LEAD OFFICER
<p>Regulation 14(1) – Suitability of the service: The service provider must not provide care and support for individuals unless the service provider has determined that the service is suitable to meet the individual’s care and support needs and to support the individual to achieve their personal outcomes.</p>	<p>The admissions process to be reviewed in respects of analysing the suitability of a young person being accommodated.</p> <ul style="list-style-type: none"> • (Accommodation panel considers referral) • Pre-decision consideration meeting • Risk assessments / management plan (mitigate risks) • Planning meetings • Young person’s plan to be reviewed. • Young Persons assessments to be reviewed • Moving in and out plans to be developed 	<p>December 2019</p>	<p>The process for considering placements is clear and provides an evidenced based decision involving relevant parties.</p> <p>Plans clearly identify outcomes and relevant parties wishes and feelings</p>	<p>Completed</p> <p>Completed</p>	<p>Residential Managers</p> <p>Maple Tree management team</p>
<p>Regulation 17 - The service provider has not given a copy of the personal plan to the young people living in the home.</p>	<p>Providers assessment to be followed ensuring regulation 15 is followed which will ensure engagement with young people in respects of their plans</p>	<p>January 2019</p>	<p>Young people are involved with and have sight of their placement plans</p>	<p>Completed</p>	<p>Maple Tree management team</p>
<p>Regulation 18 – Provider assessment: The service provider has not carried out,</p>	<p>Provider assessment REG18 to be developed and implemented. Young people’s wishes and feelings to be</p>	<p>January 2019</p>	<p>Process to monitor that the provider assessment is followed is in place.</p>	<p>Completed</p>	<p>Training department</p>

within 7 days of the commencement of service, an assessment of how young people's individual needs can be met in line with requirements.	captured with evidence of their involvement clear.				
Regulation 22 – Continuity of care: The service provider must put arrangements in place to ensure individuals receive continuity of care as is reasonable to meet their needs for care and support.	Staffing review being undertaken to ensure levels are fit for purpose, once complete recruitment drive to be undertaken	January 2019	The staff structure meets the demands of the service	Currently in the process of recruiting to the new staff structure.	RI, Maple Tree management team, HR
Regulation 35 – Fitness of staff: The responsible individual has not ensured that agency staff are subject to the same checks as permanently employed staff and have evidence to demonstrate the checks have been undertaken.	Agency staff checklist to be completed prior to the engagement of staff. Information to be stored centrally.	December 2019	Process to ascertain the appropriateness of agency staff is in place a readily available to audit	Completed	HR, Maple Tree management team
Regulation 60 – Notifications: The service provider has not notified CIW of all the events specified	All senior staff to be able to input notifications with guidance provided as to when they are to be submitted, management to have oversight that they are being sent	November 2019	Processes are clear in respects of reporting notifiable events	Completed	Maple Tree management team

in Schedule 3 of the regulations and has not ensured notifications were made without delay.					
Regulation 78 – Duty to ensure there are systems in place for keeping records: The responsible individual has not ensured that there are effective systems in place in relation to the keeping of records.	An audit of recording systems to be undertaken to ensure accuracy and consistency is maintained. Staff to receive recording training, to assist in understanding effective recording	January 2019 December 2019	Systems to capture information are relevant, clear and concise. Recording skills audit system The staff team are clear of the importance and quality of recordings	Completed Completed	Maple Tree management team, RI Training, Maple Tree management team
RECOMMENDATION	ACTIONS	TIMESCALES	DESIRED OUTCOME	OUTCOME	LEAD OFFICER
The frequency of fire evacuations drills is amended so that one is carried out whenever a young person is admitted to the home or a new member of staff appointed.	Staff to be advised of the process of carrying out fire drills with a clear record of participation maintained	December 2019	All staff are clear of the processes around fire safety	Completed	Maple Tree management team
Activity planners are developed together with young people to ensure they are engaged in meaningful activities.	Keyworkers to engage young people in discussion to establish the types of activities they would like to engage in and plan accordingly	December 2019	Clear evidence is available as to the engagement and types of activities offered	Completed	Maple Tree management team
House meetings take place more frequently to provide opportunities for young people to have their voice heard formally.	A senior to hold lead responsibility for ensuring young people's meetings take place, management to have oversight to ensure compliance	November 2019	Minutes are maintained and a schedule to support meetings to take place is established	Completed	Maple Tree management team

Independence plans are developed.	Promoting Independence plans to be further developed with a Senior Residential Worker having overarching responsibility to ensure consistency	December 2019	Independence plans are in place with Senior staff having oversight.	Completed	Maple Tree management team
A system to ensure any damage is repaired in timely manner.	Relaunch system for reporting repairs, staff to be made clear of the process.	November 2019	Process flow chart to show how to report a repair	Completed	Maple Tree management team
Key worker sessions to take place more frequently.	Key work sessions to be monitored with a report being developed within the first week of the preceding month.	November 2019	Keyworker reports are completed with identified time scales	Completed	Maple Tree management team
More structure, routine and space to be established within the home to allow opportunities for young people and staff to congregate together, for example, eating meals.	Work to be undertaken with the staff team to consider group activities within and outside of the home, consideration of how best the space can be used to be considered	January 2019	The environment is better utilised to support communal living, with evidence of activities undertaken with clear recording of young people's engagement.	Completed	Maple Tree management team
The accommodation to have more decorative items and photographs to provide a more welcoming environment where young people feel a sense of belonging.	This has started with the lounge being refurbished; there is a process of redecoration taking place with young people being involved in choosing paint colours and participating in the redecorating activity.	January 2019	The home is suitable to meet the needs of young people accommodated.	Completed	Maple Tree management team