



Inspection Report on

Aria Care Home

**147 Bryn Bevan
Newport
NP20 5QN**

Date Inspection Completed

20 January 2022

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About Aria Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Arcadia Care Homes Ltd
Registered places	28
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes. 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

Aria Care home is able to accommodate up to 28 people who are living with dementia. Ali Al-Mufti is the Responsible Individual (RI) who oversees the running of the home. The RI is currently recruiting for the vacant manager's post at the service.

People living at the service are happy with the care and support they receive. They are complimentary about the compassion and professionalism of the care staff and management. The service recognises what is important to people and supports them to maintain their overall wellbeing. Personal plans are detailed and clearly written to inform staff of how best to support each person. Plans are regularly reviewed and accurate records are kept.

Care staff feel valued and supported in their roles. Supervision meetings with their line manager need to happen more frequently and refresher training courses are not always completed as often as the provider requires.

The environment is clean, spacious, well maintained and homely throughout. Overall health and safety is well managed but the provider must ensure that accurate records of fire drills are kept. The provider has taken appropriate action after being informed of some requirements following a food safety inspection. People told us that they enjoy the food, which is varied and nutritious.

Well-being

People have control over their day-to-day lives as much as possible. We saw people socialising with each other and care workers supporting people to engage in activities.. People choose where to spend their time. We saw some people prefer to stay in their rooms whilst many spend time in the communal lounge and dining areas.

People enjoy having visits from their loved ones and some go out into the community to see family and go for a walk their dog, for example. Residents also have friendships within the home and enjoy socialising and chatting with each other. People we spoke to were complimentary about the home and care staff. One person told us *“Everyone is kind and caring here, there are always staff around who are happy to help which is a big comfort”*. Another person said, *“We have a good laugh here, I am among friends that I have made since I came here. Everyone is so nice and kind, they always help you. If the staff don’t know something they will always find out and come back to me.”*

Residents receive the support they need to maintain their health and wellbeing. The service completes a range of risk assessments and personal plans, which identify each person’s care and support needs and how these can best be met. Individuals are supported to access medical and specialist services, as required. Care workers recognise when people need emotional support and provide this with kindness and compassion.

Residents have their own rooms, which are personalised to their individual tastes. People have some of their own furniture, family photos, cards and collectables in their rooms, which gives a homely feel to their surroundings. Residents also enjoy the use of the hair salon and cinema room in the home.

The service helps to protect people from abuse and neglect. Care staff complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the Wales Safeguarding Procedures and is kept under regular review. People are encouraged to share their views about the service they receive.

Care and Support

People receive the care and support they require, as and when they need it. We saw that care staff were attentive, courteous and supportive to people throughout our inspection visit. Requests for support, both with tasks and emotional support are responded to promptly and provided with warmth and compassion. Personal plans and risk assessments are thorough, detailed and person-centred. All plans are under regular review and clearly written which gives guidance to care staff of how to best support each person along with relevant information to be aware of. Peoples likes, dislikes and social histories are recorded to ensure care staff are familiar with them. This allows for care staff to better understand each person they are supporting. Care staff records are accurate and overall comprehensive, although we did see some occasional gaps in recording charts.

Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP). Records are kept of all appointments and outcomes for review as required. Care staff records are accurate and overall comprehensive, although we did see some occasional gaps in recording charts. Detailed daily notes evidence that care staff are supporting people in line with their personal plans.

People are encouraged to engage in activities if they choose to do so. We saw people participating in a seated exercise class in the morning and having a sing along after lunch. People enjoy their meal experience, they are encouraged to be as independent as possible and supported when required. Residents told us that the food is excellent, there is good choice and the main meals are always hot. The service was informed of actions that were required to improve the management of food provision during a food standards inspection. We spoke to the RI about this matter and saw that actions had been taken; the RI told us that the service is due for a follow up inspection on food standards.

Systems are in place for the safe management of medication within the service. People receive appropriate support with their medication, which helps to maintain their health. We had previously been notified of some medication errors by the provider. We discussed these with senior care staff who told us that improved competency checks had been implemented which has reduced the amount of errors significantly. A new electronic medication system is being introduced to further improve systems and audits. The records we checked were all completed accurately.

Infection prevention and control procedures are good. Care staff wear appropriate personal protective equipment (PPE) and wash their hands regularly. Temperatures of residents are taken daily and regular COVID-19 testing is carried out on staff. We were asked for evidence of a negative lateral flow test result before we entered the property and had our temperature taken before entering.

Environment

The service is clean, spacious, well maintained and homely. All bedrooms have en-suite facilities and there are communal bathrooms on each floor. We saw that people's bedrooms are personalised to their individual tastes, residents have some of their own furniture in their rooms as well as photos of loved ones and other belongings. Communal bathrooms are spacious and contain the necessary equipment for supporting people as required to ensure their dignity is maintained.

The entrance is warm and welcoming with display cabinets containing some achievements the home has been recognised for as well as photos of activities and special occasions. The lower floor contains a tastefully decorated cinema room, hair salon where we saw people enjoying having their hair done by a local hairdresser who visits weekly. There is a dedicated bar area where residents are served non-alcoholic drinks, a large open plan lounge with TV and open plan dining area. All furniture is in good condition and suitable for the people living at the home. The RI told us that the dining room furniture had all been replaced the previous year. The service has an ongoing maintenance programme to ensure that all areas of the home are maintained to a high standard.

People benefit from a secure environment, the front door is kept locked. We viewed the maintenance file and saw that all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency. No records were available for fire drills being completed in the previous year. While no immediate action is required, this is an area for improvement and we expect the provider to take action. We will follow this up at our next inspection.

Increased cleaning is taking place due to the COVID-19 pandemic. We saw that the home is kept clean and tidy. The housekeeping team maintain the cleanliness of the home and have one dedicated day a week where they complete 'deep cleans' of specific areas.

Leadership and Management

The provider has effective governance arrangements in place to support the smooth running of the service. The model of care described in service's statement of purpose accurately reflects the actual support provided. The RI works from the home and knows the residents and staff team well. The RI completes detailed and thorough audits of the quality of the support provided as well as the wider running of the home. We discussed the frequency of the quality of care reports with the RI who assured us that they will be completed six monthly in line with regulations. The manager post is vacant; the RI has given us assurances over the safe running of the services whilst this important role is filled. While no immediate action is required, this is an area for improvement and we expect the provider to take action. We will follow this up at our next inspection.

We saw that sufficient care staff are employed at the service to support people in a dignified and unrushed way. Occasional short-term absences during the COVID-19 pandemic have led to lower staff numbers than normal. This is a sector wide issue and the RI has made arrangements to ensure that safe staffing levels are always maintained. Residents told us that there are always enough staff available to support them when they need it. Staff personnel files are well organised and contain the required information to ensure that they are safe to work in this environment.

Staff feel valued and supported in their roles, we saw care staff were confident in going about their duties and supporting people in a variety of ways. Care staff receive supervision with their line manager. This one-to-one support provides opportunity for staff members to discuss any concerns or training needs they may have and for their line manager to provide feedback on their work performance. The frequency of these supervisions needs to increase to a minimum of once every three months. Staff receive training in all the necessary areas but not all refresher courses are completed as often as the provider requires. While no immediate action is required, these are areas for improvement and we expect the provider to take action. We will follow them up at our next inspection.

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
67	No manager is currently in post. Ensure that a suitably experienced and qualified manager is	New

	employed to manage the service	
36	Care staff have not received regular one to one supervision and refresher training has not been kept up to date. Ensure that all care staff receive a one to one supervision at least every quarter and that training compliance is improved	New
57	No records of fire drills taking place at the service during 2021 were available for inspection. Ensure records are kept of all fire drills which must be conducted as frequently as your fire risk assessment requires	New
59	Gaps in routine mouth care documented for people living at the service.	Achieved

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