

Inspection Report on

Heathfields Residential Home

27 Merthyr Mawr Road Bridgend CF31 3NN

Date Inspection Completed

29/11/2022

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About Heathfields Residential Home

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Heathfields Residential Homes Ltd
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	7/6/2022
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the care and support they receive at Heathfields Residential Home. They told us they enjoy living at the service and provided positive feedback on care workers. Personal plans highlight people's individual outcomes and are clear and concise. Regular reviews ensure care documentation including personal plans and risk assessments are current. There are strong governance arrangements in place. The Responsible Individual (RI) is compliant with legal requirements in relation to visits and quality of care reviews. Policies and procedures are regularly reviewed and aligned with current statutory guidance. Care workers are recruited in line with regulation and have access to an on-going programme of development. However, improvements are required to ensure that all staff have one to one supervision at regular intervals. The home is clean with appropriate furnishings and décor throughout. Regular servicing and maintenance ensure the environment, it's facilities and equipment are safe to use.

Well-being

People are treated with dignity and respect. We observed positive interactions between people and care workers throughout the inspection. We could see people and care workers have a genuine, good rapport. Care workers are familiar with people's needs and the best ways of providing care and support. Positive feedback from people and their representatives regarding the quality of care provided supported our observations. A care manager told us "It has a very warm and friendly atmosphere".

The service supports people to be as healthy as they can be. The home works with healthcare professionals and refers any concerns. Activities on offer promote people's overall well-being. Meals are of a good standard and people with special dietary needs are catered for. People's personal plans are detailed and consider risks to their health and safety. Medication is securely stored and administered as prescribed.

People are protected from harm and abuse. There are policies and procedures in place underpinning safe practice. Care workers are trained to meet the needs of the people they support and can spot the signs of abuse, neglect, poor health, and act accordingly. Care workers we spoke with said they feel confident any issues raised with the manager will be actioned promptly. There is a safe recruitment process and staff are supported within their roles.

The environment is clean and comfortable, supporting people to achieve their well-being.. Bedrooms are comfortable and personalised. We saw people are relaxed and comfortable in their environment, and people told us they like living there. The home appeared clean and well-maintained. A care manager told us "I have always found the care home to be very clean".

Care and Support

People living at Heathfields Residential Home receive a good level of care and support. We saw care and support being provided in a dignified manner with positive friendly interactions between people and care workers. Care workers appear to know the people they support well and are familiar with their routines and preferences. Positive feedback from people living at the service included the following comments: "I'm in the best place, I'm very lucky", "whatever you ask for they get you" and "they are very caring". We saw people can engage in activities if they wish to do so and are offered a choice of meals and drinks.

Care workers have access to detailed information relating to people's individual care and support needs. Personal plans are developed using a person-centred approach containing information about people's outcomes and what support is needed to achieve these. We saw evidence of assessments being completed prior to admission to ensure the service can provide the required level of care and support. Risk assessments are also in place which are specific to each person's needs.

People are supported to remain as healthy as possible. We saw personal plans contained documented information that suggests people have good access to additional health and social care services. Medication is stored safely and administered in line with the prescriber's recommendations. We examined medication administration records (MAR) charts and found them to be filled in correctly with no gaps. Staff carry out the relevant storage temperature checks on a daily basis. Controlled medication is also appropriately stored and recorded. Meals are freshly prepared, and we found that meals are well presented and served efficiently. People told us that they enjoyed the meals and could always have something different if they wished. A relative said "She loves the food, she says it's a 5* hotel".

There are systems in place to protect people from harm or abuse. Risks to individuals health and safety is included in care plans and risk assessments and are regularly reviewed. There are appropriate policies in place to guide staff in all areas, including safeguarding and whistleblowing. All staff are up to date with their safeguarding training. Incidents, accidents, and potential safeguarding concerns are audited and referred to the relevant external organisation.

Environment

A personalised environment supports people to feel included, uplifted and valued. The home takes a person-centred approach to accessorizing rooms to find a balance between creating a warm, homely environment whilst maintaining personal safety. The home is set over three floors with a lift in situ to ensure people can move between floors safely. There are handrails in place where required and the flooring is suitable for the use of walking aids to reduce the risk of falls. People have access to call bells to alert staff when they require assistance. All areas of the home appear functional and well maintained, as well as comfortable and homely.

The service has systems in place that ensure the home and its facilities are safe. We looked at a range of documentation that relates to health and safety and the maintenance of the service. The information provides a detailed overview of a rolling programme of safety checks, servicing and maintenance of the home's equipment and facilities. Effective and efficient fire procedures, testing and training are in place to protect people. Records confirmed fire alarm tests take place weekly. We saw that window restrictors are in place and harmful chemicals are securely stored.

Confidentiality is maintained throughout the home. People are safe from unauthorised visitors entering the building. All visitors have to ring the front door bell before gaining entry and are asked to record their visits in the visitor's book when entering and leaving. Care records are stored safely and are only available to authorised care workers. Personnel records are securely stored.

Leadership and Management

The service has a clear vision and ethos. Its aims, values, and delivery of support are set out in the Statement of Purpose in a transparent way. There are robust, up to date company policies and procedures in admissions, whistleblowing, infection control and medication. A written guide is available for people in the service, containing practical information about the home, and the support provided.

Care is provided by appropriately recruited, trained and supported staff. The provider carries out the necessary checks when recruiting staff. Enhanced staff recruitment checks are up to date. A number of staff have worked at the home for several years, which provides continuity of care for people. Nurses and care workers receive training to meet the needs of the people they support. The service is compliant with its core training requirements, and we are told more specialist training is also available. New care staff receive an induction in line with Social Care Wales's requirements. Staff do not receive regular one-to-one formal supervision. We notified the provider that they are not meeting legal requirements and we will follow this up at the next inspection. However, staff say they feel valued, supported and find the management approachable. Regular staff meetings take place. Staff we spoke with told us "It's like one big family here", "the manager has always been very good to me" and "I love my job".

There are systems and processes in place to monitor, review and improve the quality of care and support provided. We saw evidence that the manager and RI have good oversight of the service. We looked at documentation, which confirmed formal quarterly visits take place. On a six-monthly basis, the RI produces a quality of care report. The service also offers various formal and informal opportunities for people and their representatives, to ask questions and give feedback.

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		
58	Current medication storage, record keeping and administration practice demonstrates the service provider does not follow current best practice guidance for medication storage and administration.	Achieved		

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		
36	Not all staff have had regular supervisions	New		
57	The service provider must ensure that any risks to the health and safety of individuals are identified and reduced so far as reasonably practicable.	Achieved		
15	Personal plans do not provide a clear and constructive guide for care staff about the individual, their care and support needs and outcomes they want to achieve	Achieved		

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