

Inspection Report on

Three Cliffs Care Home

Three Cliffs Care Home Penmaen Swansea SA3 2HQ

Date Inspection Completed

30/11/2023

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About Three Cliffs Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Heart of Wales Care Ltd
Registered places	51
Language of the service	English
Previous Care Inspectorate Wales inspection	25 November 2021 & 29 November 2021
Does this service promote Welsh language and culture?	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

Three Cliffs Care Home has a team of friendly, attentive staff who are committed to helping people enjoy the best quality of life. Care workers respect people as individuals and support them to do the things they enjoy. Personal plans are kept under review and provide a detailed account of people's care needs and preferences. Care workers communicate with people effectively and provide timely, appropriate care. However, improvements are needed to ensure the service consistently promotes the least restrictive practices. These are acts which limit a person's movement or freedom to act independently. They may include monitoring devices and physical barriers that are used to help keep people safe.

There are ongoing changes to the management of the service, although experienced leaders ensure the home continues to run smoothly. The service has robust systems for recruiting and monitoring staff. People are cared for by appropriate numbers of trained staff, as outlined in the service's Statement of Purpose (SoP). This is a document that explains what the home aims to provide and how. The Responsible Individual (RI) monitors the service closely and sets actions to drive improvement.

The home is set in a tranquil location overlooking Three Cliffs Bay. There are numerous areas where people can socialise with others and admire the view. People are accommodated in comfortably furnished rooms that have a personal touch. There is ongoing investment in the service, with people benefiting from various renovations. Improvements are needed to ensure essential maintenance is completed without delay and facilities remain in good working order.

Well-being

People enjoy a good quality of life at Three Cliffs Care Home. They experience personcentred care which enhances their physical and mental well-being. Care workers ensure people receive the right level of care and support, in line with their personal plans. They make prompt referrals to medical and specialist services to promote people's health and well-being. People consistently receive their prescribed medicines, which are managed in an organised, safe way. People enjoy a varied programme of activities and events. They have meaningful interactions with care workers, who they have developed positive relationships with. Staff complete a range of relevant training to ensure they practise safely. The management team provides effective leadership.

There are systems in place to help protect people from harm. Care workers deal with accidents and incidents confidently and know how to report concerns about people's welfare. They have access to up-to-date policies and procedures to guide their practice. Managers review and adjust staffing levels to ensure people receive appropriate care and attention. People are cared for by a suitable workforce that is vetted by the Disclosure and Barring Service (DBS). Managers monitor staff practice through formal supervision and appraisal, addressing any underperformance or misconduct via disciplinary procedures. The RI supervises the management of the service closely and regularly analyses the findings of internal audits.

Care workers recognise and respect people for who they are. They support people to make everyday choices and celebrate their achievements. The service involves people and their representatives in the development and review of personal plans, which identify what matters to people most. The RI seeks people's views about the service during formal visits. To fully uphold people's rights, the service must ensure people are not restricted without lawful authorisation. Improvements are needed to ensure care documentation accurately reflects individual arrangements and that these are fully understood and followed by staff.

The home's coastal location provides eye-catching views of the bay from many private and communal rooms. The provider offers a transport service to help staff and visitors get to the home. There are numerous communal areas where people can socialise and enjoy daily activities. The home is maintained to a good overall standard of hygiene. Equipment and utilities are regularly serviced, although improvements are needed to ensure priority maintenance works are completed in a timely manner. The provider has taken action to ensure bedroom locks allow both privacy and freedom of movement. People benefit from continuous environmental upgrades. Rooms are designed to cater for people's needs and preferences.

Care and Support

People are occupied and stimulated. Care workers regularly interact with people and support them with individual and group activities. Daily recordings include many examples of positive, person-centred interactions. We saw people colouring, using sensory equipment and taking part in a Christmas karaoke session. People also enjoyed a live performance from a children's school choir. Care workers created an inclusive, upbeat atmosphere by engaging with each person in a deliberate, enthusiastic way. This had a positive effect on people as they smiled, laughed, sang and danced along to the entertainment. One person said, *"I want a bit more!"* The home offers a transport service that supports visits from family and friends. A relative told us this has *"been excellent… a really lovely thing"*.

Care workers communicate with people well, which visibly uplifts them. We saw people's anxiety reduce as care workers used effective techniques to support them. A relative told us care workers know how best to support their loved one during difficult times: *"They know exactly how to handle XX"*. We saw people's individual routines being respected as they chose where and how to spend their time. One person said, *"All staff are friendly and kind; I see the same group and we can understand each other."* Staff complete training in relation to Deprivation of Liberty Safeguards (DoLS), although some restrictions within personal plans were not supported by the required authorisations or best interest decision-making. The service must ensure people are supported in the least restrictive way and that strategies are accurately reflected within care documentation. This is an area for improvement and we expect the provider to take action.

People have access to medical and specialist services to promote their health and wellbeing. Records confirm that various health and social care professionals are involved in people's care. Staff act promptly when there are changes in people's health, requesting urgent medical attention or a GP (general practitioner) review. Where possible, the service provides transport to enable people to attend appointments. Personal plans provide a good overview of who people are and what is important to them. Daily recordings and monitoring charts show that people receive the right level of care, as outlined in their personal plans. For example, people receive regular pressure relief to promote their skin integrity and fortified foods and snacks to support their nutrition.

The service has a clear, informative medication policy to support safe practice. We found medicines to be stored securely and at appropriate temperatures. Records show that people consistently receive their prescribed medicines, as intended. Staff document why 'as required' medicines are given and how effective they are. This helps inform medical reviews, so people can continue to benefit from the most appropriate medicines. Best interest decisions are clearly documented for those who may be given their medicines covertly. Senior staff carry out medication audits to ensure medicines are being handled safely.

Environment

The accommodation has some homely touches and interesting features. Staff carefully consider the location of people's rooms to promote their comfort and social well-being. Bedrooms contain items that are important to people and are laid out according to their needs and wishes. People have access to a central garden and patios alongside the building that offer enviable views of the bay. We saw people relaxing and socialising in the various lounges and conservatories. Equipment and adaptations enable people to move around and use the facilities safely. However, people cannot access one of the shower rooms and bathrooms as they are out of use. We also found that bedroom locks could not be easily opened from the inside, as specified in the service's SoP. This is an issue that the provider had identified, although planned work to replace the locks had not been fully completed. Therefore, a better system for monitoring the completion of priority works is needed. This is an area for improvement and we expect the provider to take action. Shortly after the inspection, the RI assured us that all bedroom doors had been fitted with safety handles that simply release internal locks.

There is ongoing investment in the environment. New doors with glass panels have been fitted in ground-floor hallways, bringing in extra light. The walls are being repainted and new flooring has been laid. There are plans to renovate first-floor hallways in the same way. We were told these areas will be personalised once redecoration is complete and will include dementia-friendly features, such as colour contrasts and sensory boards. We saw that other work has been completed to a high standard. For example, serving areas have been created within lounge and dining areas. These allow food options to be displayed, helping people make choices. 'The Pier' has been created in one area overlooking the garden; it has been thoughtfully designed and furnished with lanterns, plants and a shelving unit containing sensory items. Two first-floor bedrooms have been refurbished to a good standard.

The home is safe and secure. External areas are monitored via CCTV (closed circuit television) and a record is kept of visitors entering and leaving the premises. Exits and other doors leading to potential hazards are fitted with keycodes to prevent people accessing these areas without support. Records show that utilities and equipment are inspected within recommended timeframes. We found private and communal rooms to be clean and tidy. Staff told us they have the resources they need to complete all cleaning and laundry duties. We observed damage to the flooring in a ground floor toilet and shower room, compromising standards of infection control. Managers assured us arrangements have been made to replace the flooring. They will also monitor bathrooms and sluice rooms to ensure items are not stored there inappropriately. All staff complete training in relation to health and safety, control of substances hazardous to health (COSHH) and infection control. The service was awarded a food hygiene rating of 5 (very good) in October 2023.

Leadership and Management

There are ongoing management changes. The home is being well-led by an experienced deputy manager and clinical lead, with the support of the company's Head of Region. A qualified manager is regularly visiting the home to get to know residents and staff before taking up their post in December 2023. The new manager is familiar with the home having previously worked there as a deputy. Staff receive good support from the management team. They told us *"The regional manager is just a phone call away"* and *"If I have any worries or concerns, I go to the nurses and, of course, my seniors"*. Records confirm that staff receive regular supervision and an annual appraisal, allowing them to reflect on their personal and professional development. The RI formally assesses standards every three months, which informs six-monthly quality-of-care reviews. The RI gathers feedback about people's experiences and analyses data relating to internal audits. These processes result in improvements being identified and actioned.

People receive timely support from caring, attentive staff. Managers keep staffing levels under review, adjusting them when needed to meet people's needs. Care workers confirmed that additional staff have been allocated to support with activities and night shifts, allowing them to spend more quality time with people. We saw that care workers were available to anticipate people's needs and respond promptly to call bells. Staffing rotas show that staffing levels consistently meet or exceed those planned. New staff are not initially included in shift numbers as they shadow more experienced staff and build relationships with residents. Staff undergo the required recruitment checks before being appointed. This includes a criminal check via the DBS. The service operates a clear disciplinary procedure to address any issues with staff performance and conduct. This ensures people continue to be supported by staff who are suitable for their roles.

Staff have the knowledge and skills to provide safe care. Their compliance with the home's mandatory training programme has improved following internal quality reviews. Records show that staff complete a range of mandatory and specialist training, as outlined in the service's SoP. This includes training in relation to dementia and safeguarding adults at risk. Staff told us managers support them to progress their careers and accommodate requests for extra training. The new manager plans to provide further dementia training and continually reinforce the right culture through positive language and practice. There are up-to-date policies and procedures to support staff in their roles. Staff keep clear records of accidents and incidents, which they deal with appropriately. Shift handovers and regular staff meetings keep staff updated about people's health and welfare. Staff spoke proudly about the progress people have made. For example, they have observed people become more healthy, mobile and socially active.

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
31	Restrictive practices have been implemented without legal authorisation or evidence of best- interest decision-making. The least restrictive	New

	options must be consistently promoted in the provision of care and support. Staff must understand their responsibilities under Deprivation of Liberty Safeguards (DoLS), ensuring the principles are reinforced in practice and accurately reflected in care documentation.	
44	Facilities are not available in accordance with the service's statement of purpose. The provider must ensure the premises is suitably equipped and that individual rooms allow both privacy and freedom of movement. Suitable systems must be in place to ensure priority works are completed without delay.	New

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