



# Inspection Report on

**New House**

**St Brides Road  
St. Fagans  
Cardiff  
CF5 6DU**

## **Date Inspection Completed**

09/08/2023

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## About New House

|   |  |
|---|--|
| Type of care provided                                 | Care Home Service<br>Adults Without Nursing  |
| Registered Provider                                   | Ocean Community Services Limited   |
| Registered places                                     | 7  |
| Language of the service                               | English  |
| Previous Care Inspectorate Wales inspection           | 22 April 2021  |
| Does this service promote Welsh language and culture? | 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

People are happy with the support they receive and speak positively about living at New House. Care staff engage well with the people they support and treat them with dignity and respect. Care staff levels are good and ensure people do not wait for care. Personal plans of care are thorough and clearly outline people's needs and how they should be met. Documents are reviewed regularly to ensure they remain accurate. Quality assurance monitoring processes are in place, and the Responsible Individual (RI) visits the service regularly. People have their own personal daily routines and are encouraged to be as independent as possible. People engage in activities of their choice and do the things that matter to them. There are policies and procedure in place for the running of the service and people are given information on the service they can expect to receive. People are cared for in a safe and suitable environment that would benefit from a general tidy up and deep clean in places. Care staff are safely recruited and receive appropriate training and supervision. Care staff like working at the service and feel valued by the provider.

## Well-being

People get the right care without delay. Care documentation is detailed and clearly outlines how people should be supported. Documents are kept under review and evidence that people receive support from internal and external professionals when required. Care staff are appropriately trained and have the skills required to support people correctly. Care staff enjoy their roles and feel well supported by the management team. There are policies and procedures in place for the running of the service which are reviewed and updated regularly. Quality assurance monitoring takes place regularly which is important as this demonstrates the provider is committed to providing a quality service and making improvements when necessary.

People are treated with dignity and respect. Care staff understand the needs of the people they care for and do so with kindness and patience. People are encouraged to be as independent as they can be and to live their lives the way they choose. People have choice regarding the food they eat and the activities they attend in the home and the community. The RI engages with people during their monitoring visits and seeks their views as part of quality assurance monitoring. People are given information about the service they can expect to receive which includes details of how they can complain if they are not happy with the service. People are cared for in a suitable environment and have single bedrooms which offer space and privacy.

People are protected from abuse and harm. New House has a robust safeguarding policy in place and all staff receive training in safeguarding adults at risk of abuse. Safeguarding referrals are made appropriately, and Care Inspectorate Wales are notified about incidents as set out within the regulations. Referrals are made to the Deprivation of Liberties Safeguarding (DoLS) team which ensures that placements at the home are legal when people lack the mental capacity to make decisions regarding their care and accommodation. People live in a safe environment where hazards are reduced as far as practically possible. Fire safety is taken seriously, and safety checks of the building are completed. Care staff are recruited safely with pre-employment checks completed prior employment commencing. There is a system in place to ensure that Disclosure and Barring Service (DBS) certificates are renewed regularly.

## Care and Support

People get the right care at the right time. Care documentation is thorough and clearly outlines people's needs and how they should be met. We saw evidence that referrals are made to health and social care professionals without delay and any advice or guidance is added to personal plans of care. Personal plans are reviewed regularly to ensure they are kept up to date and accurate. These documents are important as they guide care staff on how to care for people correctly. Care staff have a good understanding of people's needs and can anticipate needs of people who cannot verbally express them themselves. People have built positive relationships with care staff who support them and tell us they are happy with the care they receive. One person said, "*I like the staff very much*" and another person said, "*the staff are good, and they help me*". Care staffing levels at the home are very good and ensure that people receive their care without delay. Care staff rotas indicate that staffing levels are consistent and there is a minimal use of agency care staff. Medication is stored correctly and administered safely. There are Medication administration Record (MAR) charts in place which are signed correctly but we noted that they are missing a photograph of the person. We were given assurances that this would be rectified immediately.

People can be assured they have autonomy over their lives. People are at the centre of care planning and have opportunity to express their wishes and feelings regarding the care they receive. Personal plans of care are individual and clearly highlight people's likes, dislikes and preferences on how care is provided. People have their own personal activity plan in place and do things that matter to them. We saw people enjoying different activities during inspection and one person told us "*I go wherever I want to go and do things I like; I choose and staff support me*". People are supported to be as independent as possible and encouraged to do things for themselves where possible. One person told us "*I'm really good at cooking and staff help me do it myself*". People have choice about the meals they eat and when they eat them. People have their own budget to buy the food of their choice and have an opportunity to enjoy an evening meal that is prepared for everyone living at the service.

## Environment

People live in a suitable environment. New House is located in a rural suburb on the outskirts of Cardiff. The service is made up of one main house that has five single bedrooms and two self-contained flats that have their own lounge, bedroom, bathroom, and outdoor space. The main house benefits from ample communal space including a large kitchen, dining room, lounge, and a conservatory. This space enables people to spend time together and enough room for care staff to support people correctly. There is safe outdoor space with furniture for people to use as they wish, but the area would benefit from a general tidy up. The service is generally clean throughout and no malodour was detected but would benefit from some cosmetic redecoration and a deep clean in places. There are enough bathrooms and toilets at the home, all clean and in good working order. All bedrooms are single occupancy and offer an opportunity for privacy and quiet time. We found bedrooms to be clean, warm, and spacious and personalised. People are encouraged to personalise their rooms through their own choice of decor and personal items and are free to access their rooms as they wish.

People live in a safe environment. On arrival to New House, we found the main entrance secure, and we were asked for identification before we were permitted entry. We did a tour of the building and found that hazards have been reduced as far as possible. We noted one fire door wedged open, but the manager rectified this immediately. Harmful chemicals are locked away safely, and window restrictors are in place. Safety checks of the building including gas and electricity safety testing are completed in line with legal requirements and fire alarms and emergency lighting are tested weekly. New House has a fire risk assessment in place which is reviewed annually, and all care staff receive training in fire safety. All people living in New House have a Personal Emergency Evacuation Plan (PEEP) in place. PEEPs are important as they guide staff on how to evacuate people in the event of an emergency.

## Leadership and Management

People benefit from the leadership and management in place. New House benefits from an RI with good oversight of the service and a manager who is registered with Social Care Wales, the workforce regulator. Quality assurance monitoring takes place regularly and includes seeking the views of people using the service and care staff working at the service. The RI visits the service in line with regulatory requirements and produces a report to support the visits. We saw the manager interacting positively with people using the service and care staff described the manager as “*great*”. Complaints to the service are taken seriously, dealt with appropriately, and monitored as part of the governance arrangements in place. The manager understands legal requirements of caring for vulnerable people and makes referrals to the Local Authority safeguarding team when required. Any referrals are stored centrally with outcomes recorded. This is good practice as it enables the provider to monitor referrals for themes, trends, and patterns of abuse. There are robust policies and procedures in place and people are given detailed information on the service they can expect to receive.

People are supported by care staff who are well supported and safely recruited. Care staff are happy working at New House and tell us that they feel well supported by the management. A care staff member told us “*I really like working here and enjoy the job very much*”. Care staff have opportunity to progress within the company if they wish to do so. We examined the care staff supervision matrix and found that most care staff are up to date with supervision. Supervision is important as it is an opportunity to discuss practice issues or needs in a formal setting that is recorded. Care staff receive appropriate training and feel well equipped to undertake their roles. New care staff receive a robust induction which includes training and shadowing of experienced care staff. We examined a selection of care staff personnel files and found that they contain required information. We were able to see that Care staff recruitment is safe as pre-employment checks including DBS certificates and references are applied for prior to employment commencing. These checks are important as they determine a person’s suitability to work with vulnerable people.

### Summary of Non-Compliance

| Status              | What each means   |
|---------------------|---|
| <b>New</b>          | This non-compliance was identified at this inspection.  |
| <b>Reviewed</b>     | 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. |
| <b>Not Achieved</b> | Compliance was tested at this inspection and was not achieved.  |
| <b>Achieved</b>     | 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 |
|------------|---------|--------|
|------------|---------|--------|



|     |  |     |
|-----|--|-----|
| N/A | No non-compliance of this type was identified at this inspection | N/A |
|-----|--|-----|

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