



# Inspection Report on

**Wentwood Court**

**Wentwood Court  
Newport  
NP18 2AA**

**Date Inspection Completed**

*27/06/2023*

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## About Wentwood Court

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ocean Community Services Limited
Registered places	14
Language of the service	English
Previous Care Inspectorate Wales inspection	12 July 2021
Does this service provide the Welsh Language active offer?	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

Wentwood Court provides a service to people with complex care and support needs. The service is divided between a main house and eight individual bungalows. The environment is personalised and homely, providing opportunities for people with complex care and support needs to live as independently as possible in their own space. People are happy living at the service and experience positive wellbeing outcomes.

The service benefits from the oversight and governance processes in place, and there is a clear pathway for staff development. There is strong leadership and management presence within the home, and staff speak highly of the support they receive through induction as well as ongoing opportunities for development.

## Well-being

People are happy with the service and the care and support they receive, they told us “*They have my best interests at heart.*” Staff are kind, polite and respectful when talking to, and about people. Staff are knowledgeable about the people they support as well and the values of the service. The service supports people to maintain contact with friends and family. We heard about the service supporting this contact through facilitating meetings with people’s advocates and relatives.

There is evidence that people’s needs and well-being outcomes are worked towards and achieved consistently, people told us “*They don’t give up on me.*” We heard people and staff proudly talk about their achievements such as hosting garden parties, and trips to the hair salon. People have core staff teams which support them to achieve their wellbeing goals, and there is strong evidence of positive rapport between people and their core teams. People have person centred activity planners and choose how they spend their time. People’s activity plans are designed to support their understanding, and we saw examples of these using pictures, photographs, symbols, and written word.

People prepare their own meals with support from staff, to ensure people have the food and drinks that they like and enjoy. The service has a five-star food hygiene rating. The service has an ethos of building better lives which is based on the active support model of care. This means they work with people to increase their skills across different areas by providing opportunities for people to participate in all aspects of their daily lives, such as completing their laundry, preparing meals, and planning a bus route.

People have positive relationships with the management of the service and can raise concerns if needed. There is opportunity for this as part of meetings with key workers also. The service has a clear policy for safeguarding people, and people told us they feel safe and well looked after. The service considers needs and risks in planning the environment, by considering compatibility of people before admission. The individual bungalows allow for people with complex care and support needs to live as independently as possible, and the main house offers opportunity for people to live communally and socialise to build relationships and skills.

## Care and Support

People benefit from the care and support they receive at the service. Both people and staff speak proudly of their achievements in the service, and there are systems in place to support people to develop. Staff engage positively with people in the service, we saw clear signs of positive rapport between staff and people.

Personal plans are clear and comprehensive, with a focus on wellbeing outcomes and guidance for staff to support people to achieve these. They are complemented by positive behaviour support plans which focus on improving quality of life and have clear strategies within for reducing restrictive practices. The service routinely completes restrictive intervention reviews to ensure that lessons are learnt, and that they can continue to work towards the least restrictive options for people's support. People are involved in the care planning process through meetings with their key workers, giving people opportunity to express their wishes and aspirations for the future.

There is strong evidence to show how this information is transferred to personal plans, and that these are followed each day in practice. This is supported by key group meetings which enable people's core teams to come together to problem solve and set consistent procedures to support people to meet their wellbeing outcomes. Activities in the service are person centred. We saw people's activity planners which are designed to meet their needs and preferences, both in terms of their content and their design. We saw examples of visual planners, calendars and written activity plans being used. Staff encourage people to actively participate in planning their days.

Risks and specialist needs are considered in the care planning process, and ongoing review and assessment takes place to ensure that the service is meeting people's care and support needs. The service works well with a wider team within the organisation to ensure that the right support is provided to people. The service should ensure that all documents are reviewed when changes are implemented as a result of ongoing assessment.

Medication is managed effectively at the service. We saw evidence of staff training in medication that is thorough and ongoing, to ensure people are supported safely with their medication. The service has accurate medication records which are audited to ensure that the likelihood of errors is reduced, but that appropriate action can be taken in the event of an error.

## Environment

The service is divided into a main house, and eight individual bungalows on the grounds. The main house has plenty of communal space for people to spend time socialising in the lounges and kitchen, as well as preparing their own meals. It benefits from a detached laundry which people are encouraged to use as part of their daily activities. There is space for people to spend time alone as well as communally. Downstairs there are shared bathroom facilities for two bedrooms, and upstairs each bedroom has en-suite facilities for people. Bedrooms in the main house are personalised with people's belongings and laid out in a way which works for them. People are supported to maintain their bedrooms, and support with household activities such as organising shopping, cleaning, and cooking. The main house is decorated in a homely way, with consideration to safety and the needs of people living in the home.

The individual bungalows are personalised to meet the needs of people living in them. Each bungalow is named by the person, adding a sense of ownership to them. We saw consideration of the types of furniture in the bungalows. Consideration is given to the needs of people in each bungalow, and the environment is reflective of this. We saw consistent assessment of needs impacting on design and layout of the environment which enabled staff to safely support people in their own spaces. Some bungalows need repairs; however, the service has a plan to address this based on their ongoing assessment of people's needs. The service plans carefully consider the needs and the safety of people, as well as providing a positive environment for people to live in. We look forward to seeing these renovations and repairs at the next inspection.

There is a patio and garden area that provides plenty of communal space for people to enjoy activities and celebrations together, and each bungalow also has a private garden to enable people to join in from a place they feel comfortable. Some gardens are designed to a high standard to support people's interest in hosting parties. We saw plenty of seating spaces for people to enjoy the outdoors.

The service has robust processes for ensuring the environment is safe for people, including maintenance and repairs, as well as safety certifications. There is clear oversight of these processes from management, the responsible individual (RI), as well as staff working in the service.

## Leadership and Management

People benefit from the leadership and management in the service. Staff speak highly about the “*morning walk around*”, this is an opportunity each day for the manager and deputy to speak to staff and people and greet them for the day. We saw evidence of the positive impact this has on rapport and relationships with people living in the service. People and staff are confident in communicating with the management team at the service, including the RI.

There are clear and robust governance arrangements in place to support the smooth running of the service. There are processes in place for ongoing monitoring and auditing of each aspect of service delivery. The RI completes regular visits to ensure the service is providing care in line with their statement of purpose.

There are enough staff on duty to support people effectively. Each person in the bungalows has core staff teams to support them, and there is a core staff team for the main house. This ensures that people are supported by staff who know them well, and who can support them to achieve their wellbeing goals by working consistently. The service has key group meetings to enable core teams to come together and address areas of concern as well as celebrate achievements, however the service and staff would benefit from team meetings designed for the staff team also.

Staff speak highly of their induction to the service, as well as their ongoing support within their roles. We saw good systems in place for support and supervision which enable the management team to have oversight of any potential concerns as well as areas of strength. There is a step up to management programme to support staff to develop within their roles, which staff speak highly of. There is a culture of practice leadership in the service, with staff at all levels supporting and developing one another with guidance and structure from the management. Staff tell us this empowers them within their roles. The service has ongoing training opportunities for staff to ensure they feel confident and competent when supporting people with complex care and support needs. There is ongoing analysis of incidents and restrictive practice within the service which fosters a culture that focuses on improving quality of life for 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
15	Individuals need to feel confident that service providers have an accurate and up to date plan of how their care is to provided to meet their needs.	Achieved

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**Date Published** 21/07/2023