

# Inspection Report on

**Cottage View** 

Powys Health Care Nhs Trust
Knighton Hospital
Ffrydd Road
Knighton
LD7 1DF

## **Date Inspection Completed**

15/02/2024



### **About Cottage View**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Powys Teaching Health Board
Registered places	15
Language of the service	English
Previous Care Inspectorate Wales inspection	15 August 2022
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**

People are happy with the care and support they receive at Cottage View. Care staff are friendly, caring and kind. They work very hard to make sure people feel at home and their personal outcomes are met. There are opportunities for people to do things they enjoy and are interested in.

The manager has very good oversight of the service. Care staff feel very well supported and good teamwork is evident. They have training opportunities, so they have the knowledge and skills to provide the right care for people. Information within personal plans tell care staff how people want to be supported and people are involved in reviewing these to make sure their personal outcomes are met.

The responsible individual (RI) visits the service as part of the quality assurance process. Reports are produced showing what is working well and what needs to improve. The management demonstrate a commitment to making sure people feel happy living in Cottage View and they have the right support to achieve their personal outcomes.

#### Well-being

People have choice and control over their daily lives. They have information about what to expect from the service and have opportunities to contribute their ideas about what works well and what they would like to see improved. We saw people spending time in the communal areas as well as in their own bedrooms. They told us care staff respect the decisions they make. It is clear people have good relationships with the care staff. This allows them to know what is important to the individual and the care and support they need can be tailored to individual preferences. At the time of our visit, there were no care staff fluent in the Welsh language, but they told us they try very hard to have some conversation in Welsh with people where possible.

The manager and staff promote people's health and well-being. There is a range of activities available based on people's likes and preferences. Care staff work hard to encourage and include people in social activities. We heard so much laughter which clearly helps to enhance the well -being of people. Relatives and friends visit regularly helping to maintain important relationships. Care staff are attentive and respond quickly when people need support. Medication is managed well. Referrals to health professionals are made in a timely way making sure people get the support they need quickly.

People are protected from abuse and neglect. Care staff know what to look out for and how to raise concerns if they suspect someone's well-being is compromised. They receive training relating to safeguarding and policies and procedures are in place to guide their practice. Care records give care staff the information they need to provide them with the right care and support.

People live in accommodation which is safe and promotes their well-being. The home is clean and comfortable. It is nicely decorated, and people's bedrooms are personalised with items important to them. There is an ongoing programme of maintenance and checks of equipment to make sure people are kept as safe as possible. The outside space is being improved and includes a courtyard with raised flower beds where people can sit and relax.

#### **Care and Support**

People can say how they want their care and support needs met. They and their family/ representative are involved in initial assessments to make sure their individual needs can be met when they move into Cottage View. Personal plans are developed, taking into consideration individual likes and preferences. People are involved in reviewing the plans to make sure they continue to meet their personal outcomes. The provider has recognised the need to have more consistency in the care files and is in the process of introducing a new electronic care planning system to help with this.

People are supported to remain as healthy as possible. We saw health professionals visiting people during our visit. Care records show people have access to professionals including doctors when they need it. Information about people's health needs is available for care staff in the care records. There is a dedicated room where medication is stored securely. Regular audits take place and care staff have training in medication management. Care staff we spoke with confidently showed us the medication management system and there is a policy in place to guide their practice.

Processes are in place to keep people as safe as possible. Care staff are visible in all areas of the service and respond quickly when people need assistance. They know people very well and report any concerns they have about people's well-being promptly. Restrictions are only placed on people's liberty when it is in their best interest.

People can do things important to them. The activity programme is based around what people like to do. Individual books are developed with the person and include things people are interested in. Photographs show activities they have taken part in which we saw includes sewing, crafts and enjoying celebrations including birthdays. We saw people taking part in group activities. They were clearly enjoying themselves. There was a lot of laughter with people clearly at ease with the care staff. People told us "I like it here, I can make my own cup of tea" and "I'm very happy here, the girls are good."

#### **Environment**

People live in accommodation to meet their needs. The living accommodation has been extended since our last inspection to accommodate more people. There is now more space for people to socialise, meet people in private or spend time on their own. The dining room is more spacious. We saw people enjoying meals together. Tables were nicely laid with menus on each table. There is a mural on the wall of the local town which promotes conversation between people. We saw fruit and cold drinks readily available and a kitchenette where people can make drinks and have snacks. People tell us they have all they need in their bedrooms which we saw are personalised with items important to them. Communal areas have been decorated. Signage around the home is in Welsh and English. The outside space has been extended which is a nice accessible area for people to enjoy and includes some raised beds.

People live in an environment which is clean and tidy. Domestic staff were visible cleaning all areas. Care staff have infection prevention and control training both online and face to face. Personal protective equipment is readily available. Audits of the environment take place regularly so issues can be identified and quickly addressed.

The provider has health and safety systems in place to protect people. Regular checks of equipment are carried out including fire safety. Staff have fire safety training, so they know what to do in an emergency. There is a system in place to report any concerns care staff have about the environment. They say issues impacting on the well-being of people are responded to quickly.

#### **Leadership and Management**

The provider has systems in place to make sure the quality of the service is continuously reviewed, and improvements are made for the benefit of people living at Cottage View. People's views are sought through daily discussion with care staff and the manager, resident meetings, and care plan review meetings. The responsible individual speaks to people and care staff during their visits. The six-monthly quality of care report shows what is working well in the service and what needs improving. There is a system to oversee complaints and concerns so if any improvements are identified, they can be actioned quickly. People tell us all the staff are approachable including the manager. They feel confident to speak with them about any issues they may have. The manager tells us she feels supported in her role. She demonstrates a commitment to implementing new ideas to benefit people living and working at the service. Care staff spoken with speak very highly of the support they have from the manager. Comments include "we work very well as a team" and "not only are the residents happy here, the staff are too".

People have information about the service. The statement of purpose is reflective of the service provided. The guide to the service includes useful information for people when they move into Cottage View.

Care staff have opportunities to learn and develop to help support people living in Cottage View. Care staff tell us they feel very well supported in their role. Records show they have regular one to one meetings with the manager and an annual appraisal of their work. This allows them to discuss career progression and training opportunities they may need for their personal development. Team meetings are held to share information, but care staff tell us the manager is always approachable. We saw good communication between the manager, care staff and people using the service. This helped to create the friendly atmosphere we experienced. We identified some issues with the recruitment of care staff, but these were addressed immediately making sure all the required checks are in place before new staff start work.

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		

N/A	No non-compliance of this type was identified at this inspection	N/A
35	The provider does not undertake Disclosure and Barring Service checks as often as required in the Regulations.	Achieved
16	People, their representatives and the placing authority (where applicable) are not involved in three monthly reviews of their personal plans.	Achieved

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**Date Published** 04/04/2024