



Inspection Report on

Newton Care Home

**Newton Care Home
280-288
New Road
Porthcawl
CF36 5PL**

Date Inspection Completed

18 August 2022

18/08/2022

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About Newton Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	breaksea residential homes ltd
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes. 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

At the time of the last inspection, three areas of the service that Newton Care Home provide were not meeting regulatory requirements. We notified the Responsible Individual (RI) that priority action needed to be taken to improve frequency and regularity of staff training and supervision, to improve the consistency of monitoring visits and to improve the analysis and auditing of the quality of care provided in the home. This report is based on a follow up, focussed inspection to see what progress has been made in these areas.

Since our last visit three months ago, the RI has completed a monitoring visit as required. A detailed quality of care report has also been produced. Care staff have received face to face training and completed e learning courses to improve their knowledge and skills. Supervision sessions have been completed with a number of staff to identify any issues or areas for development.

We also looked at ongoing progress made with other areas identified as needing improvement, although these will be tested formally at our next full inspection.

Well-being

As this focussed inspection concentrates on the areas of training, supervision, and quality assurance, we consider people's wellbeing in relation to these areas only.

People can be reassured they are receiving care from care staff who feel supported and well developed. Completing training gives care staff more knowledge and confidence in the care they are providing. Individual supervision sessions allow discussion of professional roles, and areas of improvement to be identified, to promote best practice.

Reports on the quality of care being provided give people living at Newton Care Home, visitors, and staff the opportunity to give feedback about their experience. Identifying strengths and weaknesses in the home helps the RI, manager, and staff to work to provide the best service they can.

Care and Support

At the time of the last inspection, some changes were required to care documentation and reviews to make sure care staff had the right information to be able to provide people with appropriate care in line with their wishes. We looked at progress made in this area; however, this will be formally tested at the next inspection.

We noted that there had been work done on the content of people's personal plans. These have been reviewed and transferred to new templates, ensuring that only current and relevant information is included. There is a schedule in place to ensure these are reviewed regularly. The manager is working to strengthen links with health professionals such as GPs and community nurses. An activities co-ordinator is now employed by the home two days a week, adding more interest and engagement to people's days.

Environment

As this was a focussed inspection, we did not look at aspects of the environment in detail. However, we noted that work had been done in the kitchen as part of a recent food hygiene inspection. Recruiting a maintenance worker is still ongoing.

Leadership and Management

At the time of the last inspection, it was identified that the areas of training and supervision, and quality assurance processes required priority action from the service provider.

During this inspection visit, we saw evidence that care staff are offered regular support for professional development and personal wellbeing. Individual supervision sessions follow a new structure developed by the manager and they are compiling a matrix to ensure that sessions are held regularly. Some training has been completed in core areas such as manual handling and first aid as well as additional topics such as weight loss. Staff reported that the team are all getting on well and morale is good.

The RI has completed a report for a monitoring visit held in the required time frame. We discussed with the RI that some areas of the report need to include more detail. We also saw a quality of care report had been completed as required. This gives a detailed overview of a variety of aspects of the service such as staffing, training, maintenance, as well as feedback from people living there, visitors and staff. These quality of care reports need to be done every six months in order to maintain good oversight of the service, identify strengths and work on weaknesses.

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
73	The RI must evidence that 1/4ly visits are undertaken and they have consulted with service users, advocates and staff.	Achieved
80	The service provider must complete a 6 monthly quality of care review.	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
15	People's personal plans should outline how their current needs should be met on a day to day basis.	Reviewed
16	Personal plans and risk assessments require regular review to ensure they contain relevant and accurate information.	Reviewed
35	The provider must hold information about staff that proves they are fit to work at the service.	Reviewed
60	The regulatory body must be notified of significant events listed in regulations	Reviewed

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