



Inspection Report on

1A Stockwell Road

Pembroke Dock

Date Inspection Completed

20/11/2023

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About 1A Stockwell Road

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pembrokeshire Resource Centre LTD
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	23 May 2022
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People like their homely, comfortable home and they have positive, trusting relationships with trained, familiar care staff who know them well. They are supported to achieve positive health and well-being outcomes because care staff follow the guidance in their outcome focused personal plans. They are getting out into the community and taking part in activities they enjoy, although, these could be increased.

The standard of safeguarding practice and the measures in place at the home means people are kept and feel safe.

Overall, there are sufficient numbers of care staff who describe a supportive manager and team. The successful, safe recruitment of care staff is addressing the shortfall in waking night staff and ensures there are suitable numbers of care staff in the daytime to meet people's care and support needs.

The home is comfortable and homely and there has been major work to address the issues highlighted in the previous inspection. Bathrooms are refurbished and the rear garden renovated. Due to water leaks, one floor of the home will require redecoration.

The quality of care and governance of the service has improved. Quality assurance measures are meeting regulations and have improved. This has resulted in the eight areas for improvement identified at the previous inspection being met.

Well-being

People express their views and are listened to. Regular formal consultation is undertaken by the manager and people have access to information in suitably adapted formats. On a day-to-day basis people are supported to make choices about their clothing, food and activities. Care staff understand and interpret people's non-verbal communication and respond in a respectful, sensitive manner. People personalise their rooms and they decide the well-being outcomes they wish to achieve. They have trusting, positive relationships with care staff which gives them the confidence to communicate their needs and desires.

Care staff support people to achieve good health and well-being outcomes. People receive responsive care in relation to their health needs and they are supported to attend regular appointments with health professionals. Overall, prepared meals are wholesome, and people are supported to get out into the community and take exercise. People's mental health is regularly reviewed, and care staff are aware of the steps they can take to support people's mental health.

People are safeguarded from harm and abuse. They are supported by trained care staff who know their safeguarding duties. The manager makes safeguarding referrals as necessary and ensures safeguarding is a regular topic at team meetings. Care staff know people well and are vigilant to changes in their presentation. People see their families regularly and they told us they felt safe at the home. Families advocate for their relatives and are regularly involved in their multi-disciplinary meetings.

People are comfortable and confident in their home. It has a relaxed feel to it and people move around it freely. They like their rooms and value the recently renovated garden. The service provider has refurbished the bathrooms and is in the process of completing major work to address water leaks. The kitchen is a lively hub at mealtimes with people sitting together and engaging with care staff.

Care and Support

Care staff have suitable guidance to meet people's care and support needs, and this means people receive the right care at the right time. People and their representatives are involved in creating their personal plans which are outcome focused, although some outcomes need to be more specific and achievable. Care staff read and sign people's personal plans which outline their routines, likes and dislikes, important health information and guidance to understand and respond to their behaviour. Care staff we spoke to, particularly the longer standing care staff, knew people well and were familiar with how best to care for them. The service manager needs to evidence care staff are up to date with ongoing changes to personal plans and to ensure health information is consistent across all personal planning documents.

People have positive relationships with care staff who follow the guidance in their personal plans. We saw care staff responding to people with respect, empathy and kindness and records show they are supported with their varying, individual daily routines. People are encouraged and supported to do some daily household tasks themselves such as laundry and cleaning. Care staff know people well and plan activities with them based on their mood and what motivates them. Records show people are getting out into the community doing things they enjoy and are going on holiday. Sometimes opportunities are missed for people to go out and a more flexible and varied approach is being considered to address this.

A range of measures ensures people are safeguarded. Care staff are required to read the service provider's suitable safeguarding policy, they are all trained in safeguarding, and they are clear about what their safeguarding duties are. The manager makes safeguarding referrals and they follow up with suitable preventative measures. Care staff follow people's risk assessments and positive behaviour plans to ensure they receive care which balances their rights and safety. Records are suitably detailed and show the lowest level of intervention is used. Debriefs are carried out with care staff but action is needed to ensure they are also carried out with people, in a format which meets their needs.

People are supported to be healthy. People's files contain detailed information about a wide range of health needs which care staff incorporate into their daily care. People are attending regular health appointments and there is responsive care to emerging health needs. Care staff are vigilant in noting changes in people's presentations and they seek medical attention and advice. Overall, people's meals are nutritious and they are encouraged to exercise and move around. People's mental health is regularly reviewed and some are achieving significant, staged reductions in medication. PRN or "as needed" medication is used judiciously and medication administration charts and audits show the medication policy is being followed by care staff.

Environment

The home is comfortable and meets people's well-being needs. The home has a relaxed, homely feel to it and people move around it with confidence. The large lounge is suitably furnished; the manager told us the settees were repaired following the previous inspection, however, they developed further rips and new, more robust settees are due to be delivered shortly. People have spacious bedrooms which they personalise; those on the lower ground floor, require redecoration and refurbishment as a result of major maintenance work to address water leaks and damp. This unfortunately caused considerable disruption to people which was sensitively managed by the manager and care staff.

Overall, the home is clean and the facilities support people's independence. The home is subject to high wear and tear; new stair carpet is in place and flooring is replaced as needed. The kitchen is sufficiently spacious to allow people to move around it and to be as independent as possible. We saw people happily sitting together for lunch at the dining table and some people made themselves cups of tea following it. Bathrooms have been recently refurbished and the manager ensures hand soap and towels are readily available for people, until dispensers are fitted.

The home is safe and secure. On arrival we were asked for identification and were required to sign the visitors' book. Regular health and safety and fire safety checks are carried out within the required timescales. Fire drills are held regularly and at different times to ensure all people are participating. The garage is less cluttered and there is clear access to the boiler. The service provider's health and safety audits show responsive action from the manager and repairs are responded to in a timely manner.

The garden is meeting people's well-being needs. The outdoor area is much improved and provides a pleasant space for people to sit out in the fresh air. The rear garden has had major work resulting in a large, paved patio area with wooden table and chairs, barbeque and planting boxes. The overgrown area leading down from the patio has been cleared and has steps leading to a garden shed.

Leadership and Management

People and their representatives have the information they need. The statement of purpose is regularly reviewed and overall, it reflects the service we saw. People have access to suitably adapted guides to the home, safeguarding and complaints procedures and their personal plan. The manager needs to ensure these are regularly shared with people to evidence they are supported to know their rights and to be safe.

People are assured they are cared for by sufficient numbers of experienced, trained and skilled care staff in order to meet their well-being needs. Following a successful recruitment drive, rotas show, on almost all days there is a sufficient number of care staff to meet people's needs and to support them to go out into the community and do the things they enjoy. New night care staff are due to start shortly, which will address the shortfalls in waking night care staff over the last few months. Care staff told us they were happy to work overtime but the manager needs to ensure all care staff are achieving a good work life balance.

The service provider ensures care staff are safely recruited, trained and supported. Care staff files contain DBS (Disclosure and Barring Service) and identification checks, suitable references and chronologies, with follow up action in relation to any gaps in chronologies. Almost all care staff are trained in the core areas of safeguarding, fire safety, first aid and behaviour management and they also receive training on other topics relevant to their role. There are regular team meetings which provide suitable direction and discussion about people's needs and care staff told us they felt supported by the manager. New care staff told us they could freely ask questions and found the team supportive and helpful.

Quality assurance measures are suitable and are supporting improvements to the service. The responsible individual undertakes regular regulatory visits to the home; the reports of these visits evidence a range of checks and consultations with an action list followed up from one visit to the next. Quality assurance reports are addressing progress in relation to people's well-being outcomes, they evidence formal consultation with people and other stakeholders and overall provide an accurate reflection of the service. These combined with the regular audits of the service are driving actions to improve and develop the service.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
21	People are not participating in a range of activities at the regularity identified in their plans.	Achieved
15	Personal plans do not evidence consultation to produce personal well-being outcomes.	Achieved
7	Not all areas of the service reflect the SOP.	Achieved
44	Home and outdoor area are not meeting people's well being needs.	Achieved
34	People are not at all times supported by the number of staff to ensure their safety and well-being outcomes are being met.	Achieved
35	Staff files contain gaps and anomalies in employment history and checks.	Achieved
8	Quality assurance measures are not sufficiently robust to ensure people's well-being and safety needs are fully met.	Achieved
58	Medication policy and advice not followed at all times.	Achieved

Was this report helpful?

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