



# Inspection Report on

**Rosendale Park Care Home**

**Tenby**

**Date Inspection Completed**

17/02/2023

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## About Rosendale Park Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pembrokeshire Resource Centre LTD
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">[Manual Insert]</a> 16 November 2020
Does this service provide the Welsh Language active offer?	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 home, they are consulted and can influence their care. They contribute to their care planning and they are starting to achieve their outcomes. They have positive relationships with care staff and they are comfortable and confident in their home environment.

The care provided and the service provider's processes are meeting people's physical and mental health needs. Care staff ensure people attend regular health appointments in ways which suit their needs and there is positive partnership work with health professionals. Care staff complete specialist and core training and they promote healthy lifestyles for people living at the home.

People feel safe and the manager is clear and responsive in their safeguarding role. Care staff know their safeguarding responsibilities and the home's ethos is one of respecting people's rights and promoting independence.

The home is clean and safe. People personalise their bedrooms and some enjoy spending time with others in the communal areas. The garden area requires improvement.

Quality assurance processes show significant improvements in the service since the appointment of the new manager. Care staff spoke of a positive team culture and a visible and approachable manager.



## Well-being

People have a voice. People are regularly consulted about their views at house meetings, and on a more informal basis and care staff are responsive to them. Important information is shared with people and they can influence their environment and care. We saw care staff working in partnership with people to buy items they needed and to plan things they wanted to do. People contribute to the agendas for house meetings, they have advocates and see their families.

People are supported to be healthy. Care staff ensure flexible arrangements so that all people can attend important health appointments. People have wholesome diets, their weight is monitored and they take part in activities which promote their physical and mental health. There are regular meetings with professionals to oversee people's health and well-being and care staff are trained to meet specific health needs.

People are safeguarded. People are cared for by trained care staff who know their safeguarding responsibilities. The manager is clear about their safeguarding role and advocates for people when needed. There are suitable processes to monitor people's well-being and the physical safety of the home and people told us they felt safe there. Safety and safeguarding are regular topics on the house meeting agendas.

People like their home and it is meeting their needs. Individual bedrooms reflect people's personalities and they are proud of their choices of décor and furnishings. The home is comfortable and has touches which promote a sense of belonging. People happily share the dining and comfortable lounge areas and there are suitable spaces for people who prefer quieter environments. The outdoor area needs improvement.

## Care and Support

The service provider gathers information to ensure they meet people's needs. People have pre-admission and provider assessments, although the latter are not regularly updated. This is an area for improvement and we expect the provider to take action. People's personal plans are detailed and provide guidance for care staff to meet people's needs and keep them safe. There is evidence people and their representatives have contributed to their plans and well-being outcomes, which they are starting to achieve.

People have positive relationships with care staff. We saw care staff responding to people with respect and the use of gentle humour. Our observations and records confirm care staff know and understand people's particular needs and are following their personal plans. A culture of empowerment and rights is evident with people being given information and encouraged to do as much as they can for themselves. People told us they liked their care staff and they engaged comfortably and confidently with them.

People's health is promoted. Records show people are attending regular appointments with health professionals either in the community or at their home and care staff are responsive to emerging health needs. Positive partnership work and specialist training is in place to meet particular health needs and people's mental health is monitored and reviewed. Overall, people's diets are healthy and their chosen activities support their well-being. A culture of normalisation is promoted with people going out into and having a presence in the local community.

People are safe. Care staff are trained in safeguarding and they know what to do if they have any concerns. The manager makes safeguarding referrals and notifications as required and is a strong advocate for people living at the home. DoLs (Deprivation of Liberty) assessments are in place and some people have mental capacity act advocates. Suitable risk assessments are undertaken and incident reports show the least restrictive interventions are used by care staff when needed. We were advised the quality of incident reports and daily diaries had recently improved, however, gaps remain and the level of detail is not always satisfactory. The manager continues to address this area with care staff. Safeguarding information is shared with people in a suitable format and it is also displayed on the notice board for care staff.

Infection control and medication administration procedures are suitable. The home is clean and hygienic and people either have soap in their bathrooms or it is readily available for them to use. Medication administration charts (MARs) show care staff are following the service's policy and regular medication audits are carried out.

## Environment

The home is suitable. People choose the décor and furniture for their bedrooms and they enjoy alternating their time between these and the comfortable communal areas. Some of the bedrooms have been referred for re-decoration and some windows need action to ensure people's privacy. Increased window dressings and some modification of the entrance area would promote a more homely atmosphere. Pictures of people and the various arts and crafts they have created dotted around the home, promote a sense of belonging.

The home is hygienic and safe. Bathrooms and kitchens are clean and regular cleaning schedules are followed. A range of health and safety checks are regularly carried out and a bathroom has been referred for specialist work to ensure safety prior to decoration. The repair log shows action is taken to address safety issues and repairs are mostly timely. An identity check was carried out on our arrival and we were asked to sign into the visitor book. Regular fire safety checks, fire drills and audits are carried out to ensure the safety of the home. People move freely between the main house and cottage as the entrances onto the main road are safely secured.

The outdoor area is not meeting people's needs. The garden is overgrown and has not received any attention for some time. There is some garden furniture but the whole area requires work to make it an inviting space with facilities, which people could use to meet their well-being needs. This is an area for improvement and we expect the provider to take action.

## Leadership and Management

People have the information they need. The statement of purpose is regularly updated and overall, it reflects the service we saw. People have a suitably formatted guide to the home and its complaints procedure, which is shared with them. The information about CIW in this guide requires amendment. They also have visually formatted personal plans but we did not see evidence of these being shared with people.

Overall, people are supported by a sufficient number of suitably qualified, trained and experienced care staff to meet their needs. Although the weekly rotas indicate that staff numbers are not at the required levels for a significant number of morning shifts, this is often due to the rotas being insufficiently nuanced, to provide an accurate reflection of the number of hours of staff support needed. The manager told us she will often step in to cover several hours, twice a week, to ensure people can go out with care staff and achieve their well-being outcomes. Agency care staff are used to fill any shortfalls and there is an ongoing recruitment drive for the service. The majority of care staff are in the process of completing their All Wales Induction Framework (AWIF) and their progress towards qualification is being monitored by the new manager.

Care staff are suitably trained and supervised. Records show care staff are trained in the required core areas and they also undertake other relevant training. All care staff receive specialist medical training and work well together with health professionals to meet particular health needs. Care staff are regularly supervised and they spoke of a positive team culture and a visible, responsive and approachable manager. Care staff and other stake holders said the home had made significant progress over the last six months.

Quality assurance measures are in place. Regular audits show improved scores and follow up action being taken in relation to identified gaps. The responsible individual makes regular visits to the home and their reports evidence consultation with people and care staff and a range of checks on the service. The quality of care reports are meeting regulations and the quality assurance processes show the manager is taking prompt, responsive action to resolve issues.



### 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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18	Provider assessment is not being regularly reviewed and updated.	New
44	The garden area is overgrown and is not meeting the needs of the people living at the home.	New

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