



Inspection Report on
Pantbach Avenue Residential Respite Service
Cardiff

Date Inspection Completed

26th April, 2022

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About Pantbach Avenue Residential Respite Service

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Mirus Wales
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	10/07/2019
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People and their families are very much at the heart of this service. Relatives and professionals spoke about the service with high regard, praising them for their continuity of staff and support as well as the level of care provided. Care is tailored around individuals and their family's needs and person centred care plans reflect this. Care files are reviewed prior to any person staying at the service however these are not reviewed in line with regulation. We also found that some records require an update. Competent care staff receive good levels of support from managers and complete regular training. Managers are respected and ensure the smooth running of the service. The Responsible Individual (RI) conducts regular visits to the service to ensure oversight and compliance.

Well-being

People and their families are at the heart of the service. The service goes above and beyond to ensure people are happy and safe at the service. Families told us that when their loved one stays at the service, they ensure they are happy and consider who else will be staying at this time. There are regular opportunities for people and their families to come together with the service to share their feedback in a formal and informal manner. Families praised the service for facilitating events which enable people and their loved ones to meet with the services care staff and management.

Professionals told us that the service has supported the local authority throughout the Covid-19 pandemic. The service ensures during times of crisis that people continue to receive appropriate levels of care and help maintain their safety. The service maintains their own risk assessments and admission process to ensure they only support those they knew they could provide care for in a safe way. People's individual circumstances are very much considered and prioritised. The service keeps in regular contact with professionals, families, and the person. One professional told us they go "*above and beyond to build trust*".

We saw that people are encouraged to be independent and do things that matter to them. Care staff support people to access the community and attend leisurely activities of their choice. People enjoy going to the pub, swimming and bowling. People enjoy spending time at the service. One relative told us that their loved one can't wait to go to the service. People are also supported to maintain their general health, such as taking their medication at the right time and being supported with specialist equipment.

People appear happy and content at the service and around the care staff. We saw documentation such as policies which are available to care staff, people and their families. These include important contact details in order to raise a complaint or concern if required. Families told us they know all the care staff and the manager well and would never hesitate in raising a concern directly with them. Care staff hold good relationships with the people they support and are trained in how to report concerns.

Care and Support

People's personal plans are extremely detailed and person centred. The majority of risks are clearly identified and there is a great detail of information provided to help care staff understand what to do. Reviews of people's personal plans are completed before anyone attends the service or revisits the service. Relatives told us they receive calls throughout the year to update records and ensure they're up to date. However, we found that reviews are not completed at a minimum of three monthly which is a regulatory requirement. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

There are systems in place to ensure people's safety and overall well-being is prioritised. The service considers everyone's individual experience when they stay with them. They also consider who else will be staying at the service during this time to ensure that people get along and enjoy one another's company. People's independence and social well-being is promoted. We saw that care staff support people to do the things they want to. Consistent care staff know people very well and hold good relationships with them. One relative told us "*I have every confidence in them*". We saw that care staff have safeguarding training and are aware of their responsibilities and know how to report concerns. Care staff and families feel confident raising concerns directly with the manager. Policies and procedures are up to date and available. These include important contact numbers for people to use in the event of a concern. The service continued to work safely throughout the Covid-19 pandemic where they supported the local authority to ensure people were safe and provided with the right levels of support. The service maintained their own risk assessments and admission process to ensure they only supported those they knew they could provide care for in a safe way.

Medication is stored safely in people's individual rooms. Medication Administration Record (MAR) charts are completed with no gaps. This means people receive their medication at the right time and in the right way. The majority of people are assessed and their level of support is identified. However, plans and risk assessments could be improved to ensure every person has one and that these are up to date. Regular stock checks are completed to ensure no errors have been made. Care staff are trained in how to administer medication and receive annual competency checks. Competency checks assure the manager that care staff have the right knowledge and skill to administer medication.

Environment

The service is very homely, relaxing and appears clean. The home has recently been redecorated. People can access a garden where they can relax. We saw care staff wear appropriate personal protective equipment (PPE). PPE is readily available and antibacterial gel is stationed at the front entrance. People have access to equipment which meets their needs such as a hoist. There are good assessments in place which provide clear and detailed guidance on how to support the person when using such equipment. Some people have a personal emergency evacuation plan (PEEP's) in place, this informs care staff what level of support a person requires during evacuation in the event of a fire. The manager told us these documents are being reviewed and a better system would soon be implemented and that every person would have one in place.

The majority of records we viewed in relation to risk require an update. Many assessments such as moving and handling or medication appear to be out of date. Some are several years old. Some important information included within the care plan had not be reflected within the corresponding risk assessment. Risk assessments in general could be improved to include the same level of detail as other assessments created by the service. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Fire extinguishers are checked and serviced appropriately by a professional. There is a fire safety management policy and an incident recording and reporting policy in place. Policies include contact details of specialist people who can provide guidance on a matter. The policy includes people's responsibilities, use of different forms and an easy read flow chart.

Leadership and Management

Care staff and managers are described as proactive, professional, flexible and good communicators by families and professionals. The manager is visible and available within the service and knows the people they support and their families well. Care staff told us that the service runs smoothly with constant support available from managers. Professionals told us that there is always a competent person in place to manage situations and this enables good oversight. Relatives told us that they know the whole staff team and that there is “*no staff turnover*”. This has enabled trust and open, effective communication.

Care staff are recruited in a safe way and in line with regulation. We saw that care staff receive regular and inquisitive supervisions enabling the staff member to consider their personal achievements and goals. We saw that care staff have been supported to develop their knowledge and skills to progress within the service. Specialist training is provided regarding autism, epilepsy and specialist medication training. Care staff appear confident and competent within their roles. Good levels of staffing ensure that people can do what they want. One relative said “*I really mean it they’re wonderful*” and that their loves one can’t wait to go there.

People and their families have a lot of opportunity to share their feedback and/or any concerns with the service. The service holds regular events for people and their loves ones to attend. These informal events enable people and their families to meet up with one another and meet care staff and managers. The RI visits the service regularly and gains direct feedback from people and care staff. The RI also completes general observations of the service during this time to assess its quality and identify any improvements required. A Quality of Care review highlights positive stories and the services achievements. This report also identifies what the service needs to improve. There is good evidence included to show oversight and analysis of matters, such as complaints, accidents, training and recruitment. However, the Quality of Care review needs to be specific to this service alone and not include information regarding other services run by the provider.

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
16	Personal plans and risk assessments are not being reviewed every three months	New
59	Records have not been kept up to date	New

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