



**Inspection Report on**  
**Partridge Road Residential Respite Service**  
**Cardiff**

**Date Inspection Completed**

13/02/2024

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## About Partridge Road Residential Respite Service

|   |   |
|---|---|
| Type of care provided                                 | Care Home Service<br>Adults Without Nursing   |
| Registered Provider                                   | Mirus Wales   |
| Registered places                                     | 3   |
| Language of the service                               | Both  |
| Previous Care Inspectorate Wales inspection           | <a href="#">04/05/2022</a>  |
| 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

The service has made improvements since the last inspection and we found information is better recorded and has been recently reviewed. The Responsible Individual (RI) also maintains oversight of the service. Personal plans are in place and provide important information about the person and how they communicate their needs. The provider is implementing a range of systems which will enhance managers oversight and recording. The service offers a homely and inviting space for people to spend time away from their home. We noted some areas of the environment need to be addressed, the RI and management team took swift action to implement measures to address these on the day of inspection. People can plan activities of their choice during their stay. Consistent care staff know people very well and understand their needs. Knowledgeable and experienced care staff and managers receive appropriate levels of training and support. The Responsible Individual (RI) completes regular visits to the service to maintain oversight and gain direct feedback. We received excellent feedback from relatives stating the service is an essential support network to them. One person's relative described the service as a "*God send.*"

## Well-being

People have control over their day-to-day life. People are treated with dignity and respect by care staff who know them very well. People can talk openly with care staff. Personal plans include information on how people communicate their needs. Relatives told us they could raise any issues with management. People and their relatives are asked to feedback on the service. The RI speaks directly with people to gain feedback. People actively do things they want whilst using the service. People's individual needs and circumstances are considered and these are recorded in their personal plan.

People enjoy the local community and attend different activities. People are supported to do active things such as bowling and swimming. People's health needs are recorded in their personal plan. People are supported to attend hospital appointments to maintain their health. Personal plans provide information regarding people's mental health needs. People can be supported with medication administration at the service. Relatives said their loved ones always look forward to attending.

People are protected from abuse and neglect. Risk assessments help manage and mitigate risks to people. Care staff know people extremely well and understand how they communicate their emotions. Care staff receive training in how to keep people safe. Care staff go through the appropriate recruitment checks to ensure they are safe to work with vulnerable people. People, their relatives, and care staff feel comfortable approaching managers or the RI with any concerns.

The service has homely spaces where people can relax and individual bedrooms enabling privacy. There is garden space available. This needs some maintenance work to ensure it is inviting and user friendly. Managers told us that work is planned to refresh the garden space available. The service is well-maintained with some minor wear and tear that managers and the RI are aware of. The RI took swift action to address the need for improved window restrictors which meet current guidance. The service is safe and regular checks are carried out on fire systems and health and safety.

## Care and Support

Personal plans have been recently reviewed. Detailed plans include important information, such as how people communicate. The statement of purpose identifies that people can choose to communicate in Welsh, as some care staff speak Welsh. Personal plans include information on people's medical diagnosis, their history, likes and general well-being. Some sections of the plan need to be reviewed in more detail to ensure they include sufficient information, specifically regarding people's health. The provider is currently implementing new documentation which will help identify clear outcomes for people and evidence their co-production.

The service provides essential support to full-time carers when they are unable to carry out their caring duties by accommodating people and keeping them safe. Relatives told us the service is a much-needed support network to them. People are supported to develop independent living skills and plan activities of their choice such as swimming, bowling, and going to the cinema. Relatives told us they are "*over the moon*" with the level of care and support and that their loved one looks forward to attending the respite service. Some people have been using the service for several years. The service ensures a smooth transition for new admissions to ease the process and ensure the person feels safe. One relative said "*they are absolutely wonderful people.*"

People's medication is monitored and stock checks are completed when required. Medication records do not always use the appropriate codes to show when the person is not using the service, which may cause confusion. Managers assured us this would be addressed. A medication profile explains what type of support people need with their medication, and important contact numbers for health professionals. Relatives told us the service ensure people attend health appointments when needed.

Personal Emergency Evacuation Plans (PEEP's) have been developed with a Health and Safety professional. Most required risk assessments are in place and provide a good level of detail. Some people have equipment such as monitors in place for when they are sleeping, this is to ensure they are safe at night. Records regarding people's involvement and decision making need to be better evidenced.

## Environment

The service has made several improvements since the last inspection, including redecoration and the purchase of new soft furnishings and carpets. Garden space is available. This requires some maintenance to make it an inviting space. Managers told us they have plans in place for this space to be better maintained and refreshed.

There are good infection control measures in place, such as colour coded chopping boards, labelling of opened food and checking temperatures. These could be enhanced by a deep clean and daily cleaning schedule; management told us this would be actioned. Regular fire drills and checks are carried out to ensure the building remains safe. Fire safety equipment is in place and inspected. The manager regularly carries out audits and checks on the environment. We noted window restrictors in place need to be modified so that they meet the current guidance in place for care homes. The RI took swift action to address this.

## Leadership and Management

The service benefit from a large management team. Some of the managers have worked at the service for many years and bring a wealth of knowledge and experience. One relative said the management team are “*wonderful.*” Most care staff have also worked at the service for a long time which provides continuity for people using the service. Care staff and families alike told us they feel confident management would deal with any issues raised, promptly and appropriately.

Care staff have regular opportunity to feedback to the service and discuss their own personal development via supervision and meetings. Care staff told us they feel listened to. Care staff receive good levels of training specific to the needs of the people they support. All care staff have a disclosure and barring service check to ensure they are safe to work with vulnerable people. Recruitment checks are good. Care staff records are kept online and can be time consuming to access. We discussed the importance of managers having access to staff records when required. The RI told us this would be actioned. Every care worker we spoke to told us they love their job, the family atmosphere and culture of the service. Staff are described by relatives as “*absolutely amazing*” and “*go above and beyond.*” One person said “*they are a God send.*”

People and their relatives have opportunities throughout the year to feedback to the service via surveys. The RI visits the service to meet with people and care staff. Feedback from care staff needs to be better recorded. A quality of care review is completed by the RI. This document explains how the service can improve and what they do well. It evidences some positive stories about people’s experiences whilst using the service. Including a broader oversight and analysis of the service would strengthen the document. Managers told us they feel supported by the RI. Managers complete audits of day-to-day records to ensure they are of good quality.

### 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 |
|------------|---------|--------|
|------------|---------|--------|



|     |  |          |
|-----|--|----------|
| N/A | No non-compliance of this type was identified at this inspection               | N/A      |
| 16  | Personal plans have not been reviewed every three months                       | Achieved |
| 59  | Records have not been kept up to date  | Achieved |
| 73  | The Responsible individual has not visited this service at least three monthly | Achieved |

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