



Inspection Report on

Albert Edward Prince of Wales Court

**Albert Edward Prince Of Wales Court
Penylan Avenue
Porthcawl
CF36 3LY**

Date Inspection Completed

19/04/2023

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About Albert Edward Prince of Wales Court

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	The Royal Masonic Benevolent Institution Care Company
Registered places	76
Language of the service	English
Previous Care Inspectorate Wales inspection	2.11.2021
Does this service provide the Welsh Language active offer?	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 are happy and well supported to achieve positive outcomes whilst living at Albert Edward Prince of Wales Court. Personal plans are developed in conjunction with people and their representatives and on-going reviews ensure they reflect people's current needs. People are supported to make daily choices and participate in a variety of activities they enjoy. Care staff provide care and support in a dignified, respectful manner and there are adequate numbers of staff to ensure people receive care and support when they need it. There is a strong sense of teamwork amongst staff, who are led by a pro-active, well-respected manager. There is suitable governance in place and an enthusiasm from the team to provide a good service. People we spoke with are complimentary about the service. There are processes in place to safeguard people. The provider has a robust admissions process to support the suitability of the service. Nurses and care workers say they enjoy working at the home and feel supported and valued as employees. There is a rolling programme of training and development. Regular team meetings and supervision sessions keep staff up to date with changes and gives them the opportunity to share their ideas. The environment and facilities are of a high standard enabling a strong sense of community, and provision of choice as to where to spend time. People receive care and support in a warm, clean and comfortable environment which meets the needs of the people living at the service.

Well-being

People are supported to have control over their day-to-day life. People living in the home and their relatives tell us they are very happy with the care provided at the home. The statement of purpose and service users guide are available to individuals and their representatives. Individuals can access independent advocacy services. The service offers excellent opportunities to take part in a wide and regular programme of activities. Feedback and our observations show a consistently good approach to promoting well-being. We saw several examples whereby the service has gone “the extra mile” to ensure people have access to things which are important to them. We noted there is always something going on, even when the lead activity coordinators are off. People are encouraged to attend regular resident meetings where they can make suggestions for the improvement of the service. Whilst some people have expressed dissatisfaction with the meals which are provided by an external company, others are complimentary. The provider has listened and is reviewing the provision. Annual satisfaction surveys are given to people and of the responses returned for 2022, very satisfied 89.29% and satisfied 10.71% with the standard of the home.

The service helps protect people from harm and abuse. People are cared for by a safe, skilled workforce as the service recruits and trains staff appropriately. A rolling programme of training and development is provided so care workers possess the skills and knowledge to deliver quality care. Medication is stored and administered safely as prescribed. The home’s equipment and facilities are routinely serviced and inspected to ensure they remain safe for use. Thorough governance arrangements give the management oversight of incidents, accidents, and safeguarding matters.

People live in accommodation of a very high standard, which supports and encourages their well-being. Rooms contain personalised items of choice. They are suitably furnished and have facilities, which encourage independence whilst maintaining safety. The environment is safe, free from hazards and well maintained. Safety checks are completed when required and there is a fire risk assessment in place. Alarm testing and fire drills take place regularly and people have personal evacuation plans in place.

An experienced team of care staff treat people with dignity and respect. We saw positive interactions between people and care staff. People told us care staff are kind and respectful. Personal plans are person centred and detail people’s specific needs. They are written with people and their representatives whose input is valued. Positive feedback from people and their representatives suggests the service provides a high level of care and support.

Care and Support

There are consistent and appropriate staffing levels in place to meet the care and support needs of people living at the service. There are good staffing levels for each shift, with most staff having worked at the service for a significant period. This supports good continuity and enables staff to know people very well. Nurses and care workers respond quickly to call bells and any requests of help. People told us *“No problem they come quick”* and *“They come within seconds”*. Staff are supportive of each other and complimentary of the support peers and members of the management team provide. There are a number of staff who have been given long service certificates. A care worker has recently been recognised with an organisational ‘OSKAR’ for their dedication. People told us *“They go the extra mile”*, *“Staff are very good”* and *“they go beyond what they need to, 1st rate”*.

There are systems in place to keep people safe, such as doorbell entry and a sign in book for visitors on arrival. Staff have up to date safeguarding training, those we spoke with all confirmed they would raise any observed poor practice and knew how to raise a concern. People living at the home say they felt safe and well looked after. There are policies and procedures to help keep people safe, which are reviewed to ensure they remain current. A relative told us *“It doesn’t enter my head that he is not safe”*.

Secure and robust arrangements are in place for storing, ordering, and administering medication which is stored securely. The home has an electronic medication system. Medication administration record (MAR) charts contain all required information and are completed correctly with staff entries when medication is administered. We saw evidence staff receive training on the administration of medication to ensure they remain sufficiently skilled. There are good procedures in place for controlled medication and for returning and disposing of medication no longer required. We saw people at risk of skin breakdown or nutritional deficiencies have time specific interactions with care staff and supplementary nutrition in place to minimise this risk, these are logged in the electronic system. The system is monitored and audited by the manager regularly. A pain assessment is used to ensure people who are unable to express pain are well supported. PRN (when required) medication is well recorded and evidence the reason for and outcome of the medication administered.

Personal plans detail people’s care and support needs. We viewed a selection of electronic personal plans and found they clearly highlight people’s outcomes and provide information instructing staff on the best ways of supporting people to achieve their outcomes. We note daily recordings are written in a dignified way. The language used is respectful, factual and indicates a good understanding of people’s needs. Care staff we spoke with told us personal plans contain the information needed to support people well. We saw care and support is delivered in line with people’s personal plans with supplementary charts in place detailing when and what care and support has been provided. Routine reviews ensure

information recorded in personal plans remains relevant. People and their representatives are involved in the review process. We spoke with a visiting professional who told us they had no concerns regarding the care and support provided at Albert Edward Prince of Wales Court.

Environment

The accommodation is to a very high standard, which is pleasant and provides an enjoyable environment for people to live. The home has several areas, which can accommodate people with different care needs. Within the home there are numerous communal areas which include, a large foyer; shop; bar; observatory; activities area; hairdressers; chapel and a large communal lounge. We saw people's bedrooms are personalised with items of personal choice. People we spoke with told us they are very happy with their rooms. One person described their room as "*lovely, I have the sun coming in*". The layout of the home promotes accessibility and independence; we saw people can move freely within the area they live. The grounds are a high standard, there are many different areas which include a beach area and two with ponds. Laundry facilities are very good, with a clear 'in and out' system which minimises infection controls risks.

Confidentiality is maintained throughout the home. People are safe from unauthorised visitors entering the building, as all visitors must ring the front doorbell before gaining entry and are asked to record their visits in the visitor's book when entering and leaving. Care records are held electronically, and staff personnel records are securely stored in the administration office.

We saw evidence of an extensive rolling programme of maintenance, checks and servicing in place to ensure the home, its facilities and equipment are safe. We saw appropriate checks and safety certification in place for utilities, equipment, and fire safety features. Each person living at the service has a personal emergency evacuation plan in place. This document ensures care staff understand the level of support people require in the event of an emergency. Items hazardous to health such as cleaning products are securely stored and window restrictors are in place.

Leadership and Management

There is a well-established management team in place that monitor, review and improve the quality of care and support being provided. People tell us the manager is approachable and has an open-door policy. This was evident during the inspection; we saw people entering the office to have a chat. A relative told us “*She is always about*”. People can access written information to help them understand the care, support and opportunities available to them. The statement of purpose and information leaflet describes the service provided. This includes an accurate description of the service’s accommodation, referral and admission process and the type of care and support available. Information is also provided regarding the ways in which it is working towards providing a Welsh language service provision. The statement of purpose also includes details of the service’s supervision and training arrangements for care and nursing staff. Staff have regular 1:1 supervision and an extensive training programme provides staff with opportunities to further develop their knowledge and practice.

People are supported by staff who have completed a safe recruitment process. Care workers receive an induction in line with Social Care Wales’s requirements. Staff receive training relevant to their roles and this includes infection control and safeguarding training. The provider has introduced a new initiative called ‘EMBRACE’ which is a dementia accreditation pathway which aims to improve and standardise dementia care across the whole organisation. Staff say they feel valued, supported and that teamwork at the home is good. They also told us they can talk to management, who are all approachable. We saw there are robust company policies and procedures for staff to follow. We looked at a selection of policies: admissions, complaints, infection control, medication and safeguarding and found them to be up to date. Nurses and care workers have regular supervision and annual appraisals, and regular staff meetings are held to keep them up to date. Nurse pins are all valid which evidences their suitability for practice, verified on the Nursing and Midwifery Councils website. Care workers are registered with Social Care Wales and all staff have a valid disclosure and barring service check (DBS). Staff told us “*I love working here*” and “*It’s one of the nicest places I’ve worked*”.

Arrangements are in place for the effective oversight of the service through ongoing quality assurance processes. We viewed documents relating to the service’s quality assurance processes, which are completed in a timely manner. The RI six monthly quality assurance report covers a wide range of operational matters and identifies areas where improvements are required. We found family and professionals give positive feedback about the care provided. There is a complaint policy and procedure in place and complaints are appropriately investigated and outcomes recorded.

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
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Date Published 15/05/2023