



Inspection Report on

Pencynor House

Neath

Date Inspection Completed

09/02/2023

Welsh Government © Crown copyright 2023.

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.*

About Penscynor House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Care Without Compromise Limited
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	29 January 2020
Does this service provide the Welsh Language active offer?	The 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

People lead happy and fulfilling lives at Penscynor House. A relaxed atmosphere throughout the home helps people and visitors feel at ease. The enthusiastic and professional staff team want to make a positive difference to people's lives, where people they support are at the heart of the service. Employees demonstrate a thorough knowledge of the people they support. Keyworkers ensure people are invited to contribute to their care planning review process and the staff team overall treat people with respect, and support them to communicate effectively: this enables each person to have choice and a voice. The manager and staff team strive to develop people's care and support wherever possible. Good communication channels are evident, with robust monitoring of the quality of care people receive from the Responsible Individual (RI), who is relatively new to the service.

Care workers feel well supported by the senior staff and receive training relevant to their roles. The staff team ensure people are fully involved in all discussions about their care. People are encouraged to make daily choices in how they live their lives and do things that are important to them.

Well-being

Overall, people at Penscynor House have control over their day-to-day lives. Each person knows and understands what support and opportunities are available to them. Because people are actively involved, they know about any changes that occur to their support plans. Care workers know the people they support well. Keyworkers work with people to ensure they receive the support and information they need. Personal plans contain pen pictures, with personal preferences, background and family histories, and list people who are important to the person. People have many ways to raise issues they want to discuss with the staff team. For example, weekly meetings with the provider's psychologist, house meetings or individual chats with their keyworkers. The home's statement of purpose accurately describes what the service provides and is readily available to people and relatives. Each person using the service has a copy of the written guide: this provides details of what they may expect from the home as well as details of the complaints process should they need to use it. People have access to advocacy services where they want independent support in issues that affect them.

People are relaxed, comfortable, know what opportunities are available to them and do things that make them happy. Care workers encourage people to make choices and decisions about how they spend their time. Each person is as active in their local community as they wish to be. For example, one person attends college each week. People also have their preferred ways of organising their lives: we saw one person adding an event to their calendar to fully understand when that shopping trip was going to happen, and another person who records what they achieve every day in detail. People personalise their surroundings in line with their interests and hobbies. Care workers have a good rapport and relationship with people and interact in positive ways, with good-humoured conversations.

The home is working towards providing the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. There is some bilingual signage around the property, but currently there is no demand for Welsh speaking support. However, the RI and senior management team are discussing ways of introducing the Active Offer in the future.

Care and Support

There are up to date plans for how the staff team enable people to live their lives as they wish. Senior staff carry out assessments before people move into the home and consider a range of information to ensure they can meet people's needs: they take information from various sources, including previous placements and social worker reports. This is an ongoing process as people look to become more independent. The provider employs a clinical psychologist who talks with people weekly, to ascertain if anything in their support plans needs adapting or updating. In addition, keyworkers and senior staff review care records every month, or more frequently, wherever support needs change so they remain up to date. Each person has a pen picture to record what is important to them, and personal plans clearly describe the support they receive.

The provider has policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers refer to infection management policies where necessary. Cleaning products are stored securely in a locked cupboard.

People say they are happy in Pencynor House. They do things that matter to them and make them happy. Each person is very proud of their bedroom and clearly love the lifestyles they have developed. People get on with each other and help each other out throughout the day. One person excitedly said, *"I'm going shopping for games next week."* Another person beamed and said, *"I like it here. It's nice."*

People say they feel safe, and the staff team does all it can to protect their privacy and personal information. All employees receive support, guidance and training, and access policies and procedures to understand their responsibility to protect vulnerable people. Care workers are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach the manager or RI but would also contact external agencies such as the local safeguarding office if they thought they needed to.

Environment

Overall, people receive support in a suitable environment. The home has character: it is spacious, safe and secure, warm and clean. People say they feel comfortable and happy. One person told us, *“It’s a nice place. I have all my things in my room.”* The building is easy to move around in and people may choose any of three different lounges or the large kitchen to socialise in, as well as space outside where people can spend time. One of the lounges is currently festooned with numerous Welsh flags to watch the rugby! Bedrooms are spacious, well decorated and personalised to reflect the occupant's personal tastes, hobbies and interests, with items such as ornaments, soft furnishings, photos and items of furniture. Externally, there are plans to develop the current garden buildings into flats for people to move on to.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry and record their visits in the visitor’s book when entering and leaving. People’s personal care records are stored securely and only available to care workers and healthcare professionals authorised to view them.

Clear infection control procedures are in place. Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002. There are clear instructions displayed in the home on what to do in the event of a fire.

Leadership and Management

Overall, the provider has a clear vision of the support it provides, and a positive regard to each person receiving support. A number of monthly audits monitor all aspects of people’s

support, and any issues that arise are promptly resolved. Regular discussions take place with people and healthcare professionals involved in their care. People know how to make a complaint if they need to and are confident the provider would listen to them if they did. The RI is in regular contact with the home and regularly provides good, practical support to the manager and staff team.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work: these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to individual learning outcomes and the 'All Wales Induction Framework for Health and Social Care.' Care workers are generally up to date with their essential training. Care workers discuss their work, keep up with developments in the service and discuss any issues they wish to raise in three-monthly supervision meetings. The RI summarises all aspects of the service in regular visits and will produce their first six-monthly quality of care report in the near future: this will identify all planned improvements for the home.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Care records clearly state any risks to people's well-being, and detailed risk management plans help to keep people healthy, safe and as independent as possible. Care workers have been through the provider's rigorous recruitment process and are monitored to ensure they are meeting people's needs. There is good retention in the home and it is clear people know and trust the staff team very well.

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
------------	---------	--------

N/A	No non-compliance of this type was identified at this inspection	N/A
-----	--	-----

Date Published 28/02/2023