



## Inspection Report on

**Avalon**

**Cardiff**

## **Date Inspection Completed**

30/08/2023

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## About Avalon

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	PARKCARE HOMES (NO.2) LIMITED
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	28 October 2021
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People are happy living at Avalon and have positive relationships with the care staff who support them. Care staff have good knowledge of people's needs and treat them with kindness and respect. Care documentation outlines people's goals and details how people are best supported. People are treated as individuals and encouraged to be as independent as they can be. Care staff levels are good and ensure people get the right support without delay. Care staff are happy working at the service and receive training and formal supervision regularly. Care staff recruitment is safe and robust but Disclose and Barring Service (DBS) renewal certificates are not applied for in a timely manner. There are policies and procedures in place for the running of the service and quality assurance monitoring takes place regularly. People are given information about the service and have access to independent advocacy. The manager understands the legal requirements of caring for vulnerable people and complaints to the service are taken seriously. The environment is safe and suitable to meet people's needs but requires cosmetic redecoration throughout. People have their own personalised bedroom and sufficient communal space.

## Well-being

People are treated with dignity and respect. Care staff have positive relationships with the people they support and have the skills to care for people correctly. Care staff speak to people nicely and provide support with genuine care and patience. Care documentation focuses on what people can do and reflects on the positives in people's lives. People are given information about the service they can expect to receive, which includes details of how to complain if they are not happy with the service. People are encouraged to maintain relationships with friends and family and also have a voice through independent advocacy services. People live in a suitable environment and have their own bedroom which gives them personal space and privacy. Medication processes are safe and ensure that people receive their medication correctly.

People can be assured they have choice and control over their lives. Care planning is person centred and details people's personal goals and how and when they can be achieved. People are encouraged to participate in reviews of their personal plans and meet regularly with their multi-disciplinary care teams. People's views on the service they receive are sought via quality assurance monitoring and house meetings take place regularly. People are encouraged to take pride in the home and their personal space through a cleaning rota and people also choose to take it in turns to cook the evening meal. People have space to spend time communally and there are plans to decorate the home throughout as the space is looking tired. Care staff are always available to support people without delay and good care staffing levels ensure that people attend their community activities.

People are protected from harm and abuse. Avalon has a safeguarding policy in place and all staff attend training in safeguarding adults at risk of abuse. Safeguarding referrals are made to the Local Authority appropriately and monitored by senior management. Applications are made to the Deprivation of Liberty safeguarding team where required. This ensures that all placements at Avalon are lawful when people lack the mental capacity to make decisions around their care and accommodation needs. Safety checks of the building are completed as required and hazards are reduced where possible. Fire safety is taken very seriously and all staff receive fire safety training. Care staff recruitment is safe and robust with pre-employment checks completed correctly, but DBS renewal certificates are not applied for in a timely manner.

## Care and Support

People get the right care at the right time. Care staff have a good understanding of people's needs and provide support with kindness and patience. We saw people interacting positively with care staff by way of chatting, laughter and banter which indicates familiarity and good working relationships. Care documentation is focused on people's goals and what they want to achieve in their lives and outlines plans on how to achieve their goals. Personal plans of care have a heavy emphasis on what people can do and all the positive things about their lives. Documents contain detailed information to guide staff on how to care for people and are supported by additional information and risk assessments when required. Personal plans are reviewed regularly to ensure they are kept up to date and accurate. This is important as these documents guide staff on how to care for people correctly. Medication processes are safe and robust. Medication is stored safely and administered in line with prescription guidance. Medication Administration Record (MAR) charts contain required information and are completed correctly when medication is taken.

People are supported to have autonomy over their own lives. People are at the centre of care planning and are actively involved in the assessment of their needs and reviews of their personal plans. Personal plans of care include people's personal likes, dislikes and preferences as to how their care is delivered. People are encouraged to make choices about their lives and supported to be as independent as they can be. People have their own personal activity plans in place and do the things that matter to them. Care staffing levels are good and ensure that people attend scheduled activities within the home and the community. People we spoke with told us they like living at Avalon and like the staff. One person said, *"I don't have any complaints, I choose what I want to do and staff support me"*. Another person told us about a goal they had achieved with staff support which made them feel *"very proud"*. Referrals are made to health and social care professionals when required and people attend appointments as required. People meet with their internal professional support team regularly to discuss their ongoing care and treatment.

## Environment

People live in a suitable environment. Avalon is located in a residential area of Cardiff and benefits from local amenities and good transport links. The home is set over three floors and has a stair lift from the ground to first floor. There is ample communal space including a large lounge, dining area and safe outdoor space that has furniture for people to enjoy spending time outdoors comfortably. The home is warm and clean but a little tired in appearance and requires some cosmetic decoration throughout. We were told that a full renovation of the home is planned and will be completed in the near future. There are a sufficient number of bathrooms and toilets throughout the service which are all clean and in working order. People have their own bedrooms which offer personal space and privacy. People are encouraged to personalise their rooms with their belongings and have opportunity to decorate their room to their own taste. We saw staff respecting people's personal space by knocking bedrooms doors and waiting to be invited in. People told us they like their bedrooms.

People can be assured they live in a safe environment. On the arrival to the service, we found the main door open but a care staff member was in close proximity. We were asked for identification and to sign the visitor book before we were permitted entry and informed of the fire exit locations. We conducted a tour of the home and found that hazards have been reduced as far as practically possible. Harmful chemicals are locked away safely and window restrictors are in place. Safety checks of the building including gas and electricity safety testing are completed in line with legal requirements. Fire alarms and emergency lighting are tested regularly. There is a fire risk assessment in place which is reviewed annually and everyone living at the service has a Personal Emergency Evacuation Plan (PEEP) in place. PEEPs are important as they guide staff on how to evacuate people in the event of an emergency. All care staff receive training in fire safety and take part in regular fire drills.

## Leadership and Management

People benefit from the leadership and management in place. Avalon has a stable manager who is registered with Social Care Wales, the workforce regulator, but does not currently have a nominated responsible individual (RI). A suitable person has been recruited and proposed and their application to become the nominated RI is in progress with Care Inspectorate Wales. The proposed RI is completing visits to the service as per regulatory requirements and engages with service users and care staff during these visits. Quality assurance monitoring takes place regularly which indicates that the provider is committed to making improvements and providing a quality service. There are policies and procedures in place for the running of the service which are reviewed and updated when required. Complaints to the service are taken seriously and dealt with correctly. Safeguarding referrals are made to the Local Authority when required then stored centrally with outcomes recorded. This is good practice as it enables the provider to monitor referrals for themes, trends and patterns of abuse.

People are supported by care staff who are well trained and supported. Care staff receive appropriate training to the roles they undertake and feel well equipped to do their jobs. Care staff we spoke to told us that they are happy working at Avalon and feel valued. One staff member said, *"I love working here"* and another staff member said, *"it's a very calm atmosphere and nice place to work"*. All staff receive a formal supervision regularly and can access the manager in-between if they have any issues. Supervision is important as it is an opportunity to discuss practice issues or needs in a formal setting that is recorded. We examined a selection of staff personnel files and found that they mostly contain required information. Pre-employment checks are completed prior to employment commencing which is important as these checks determine a person's suitability to work with vulnerable people. There is a system in place for the renewal of DBS certificates but we found that some certificates had recently expired. We were assured that renewals have been applied for and risk assessments completed. The provider advised that going forward they will apply for renewals earlier to prevent this happening again.

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