

Inspection Report on

3 Woodside

Hengoed

Date Inspection Completed

22/08/2023



About 3 Woodside

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Planned Residential Support Services Limited
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	14 July 2022
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People living at 3 Woodside are supported to maintain their independence. People have choice and control over their lives and are supported by an experienced and consistent team. Care staff and the management team know people well, people are treated with dignity and respect. People's care needs and preferences are documented in their personal plans.

The property is well maintained inside and out and suitable to meet people's needs. The décor is homely, the furniture and fixings are in good condition. The required checks are carried out regularly to ensure the home is safe.

The day-to-day running of the home is overseen by the manager and deputy manager. People and their family members are involved in decisions made about the running of the home. Care staff are safely recruited and well supported to carry out their duties. Care staff enjoy working at the home and feel valued by the provider. The responsible individual (RI) visits the home regularly and has effective oversight of the management of the home.

Well-being

People have control over their day-to-day lives. People told us how they are supported to be as independent as they can be, to make their own choices and spend their time doing the things they want to do. People enjoy a range of activities and relationships with family members are supported by the home.

The home is well equipped to support people to achieve their wellbeing, whilst in the home people have a choice of spending time in the main lounge, or their own rooms. Bedrooms are personalised to each individuals tastes and preferences.

People are protected from the risk of harm and abuse. Care staff spoke about the people living in the home and have a good understanding of the person, their needs and how these should be met. Care workers interact and support people in a caring and respectful manner. Care workers complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the current guidance and is kept under regular review.

People receive the support they need to maintain their health and well-being. The service completes a range of risk assessments and personal plans, which identify each person's care and support needs and how these can be best met.

Care and Support

People receive personalised care and support as and when required. Care workers are kind, encouraging, and supportive to people. People are communicated to in the best way for them individually which is recorded in their personal plans. People are relaxed and comfortable around care staff.

Care staff work from personal plans which clearly inform them how best to support people. Care files are well organised. The level of detail in the plans is good and there is a positive focus on what people can do for themselves. Plans contain information on people's social history and relationships which are important to them. This allows the care workers to know the person and their background, as well as understanding their care needs.

Specialist advice, such as the support people need with modified diets or drinks, are referred to in personal plans. Where people are unable to keep themselves safe, the necessary procedures are followed. Appropriate arrangements are in place with the Local Authority to ensure decisions are made in people's best interests, when required.

Plans are reviewed regularly to ensure they are up to date and reflect people's current needs and aspirations. Care notes are kept, which provides evidence people are being supported as described in their personal plans. Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP). All appointment records and outcomes for review are kept within the daily notes. People are encouraged to maintain a healthy weight as part of a healthy lifestyle.

Systems are in place for the safe management of medication within the service. Care staff support people with their medication, which helps to maintain their health. Medication is stored safely, and overall records are completed accurately. Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance.

Environment

The home is maintained to a good standard, well organised, and kept clean and tidy. The environment is light and has homely decor throughout. Some areas of the home, including bedrooms, have recently been redecorated. The fitted kitchen is in good condition and has an area with a dining room table and chairs. The home has a five-star food standards agency rating which means that hygiene standards are very good.

People enjoy spending time in the main lounge, new furniture has been purchased, along with homely soft furnishings. People's bedrooms are personalised to their own taste. The communal bathroom and toilet are well maintained and suitable to meet the needs of people living at the home. Cleaning products are stored correctly and the cupboard where these are stored is kept locked when not in use. The garden area is well kept, with a level patio and lawned area.

People benefit from a safe environment; the front door is kept locked, and our ID was checked on entry. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms are completed, and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support them to leave the premises safely in the case of an emergency.

Leadership and Management

The manager oversees the day-to-day running of the home, supported by the deputy manager. The management team know the people living at the home very well and are supportive of care staff. There are effective governance arrangements in place. The RI visits the home frequently and completes quality reports that evidence where the service is doing well and which areas, they are working on to improve.

The statement of purpose for the service accurately describes how the service is delivered. The provider keeps the statement of purpose under review and submits any changes to the regulator in a timely manner.

The provider maintains sufficient staffing levels to meet the care needs of people living at the service. Care staff told us they have enough time to support people and are not rushed when providing support. People are supported by staff who are knowledgeable, competent and fit to care for people living in the service. Staff told us they enjoy their jobs, feel valued and well supported by the management team.

Care staff are safely recruited, files are well organised and include all of the required information, including Disclosure and Barring Service (DBS) checks, written references, and evidence of their registration with Social Care Wales, the workforce regulator. Care staff complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm.

Care workers receive regular supervision with their line manager. One to one, formal, supervisions provide the opportunity for staff to discuss any concerns or training needs they may have and allow their line manager to provide feedback on their work performance.

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
35	Staff records were not available at the service for inspection. Ensure staff records are kept at the service and are available for inspection without notice.	Achieved
80	The quality of care report is not specific to the service and does not contain all of the required information. Ensure that the quality of care report is specific to the service and contains all of the required information.	Achieved
36	Staff have not received regular supervision throughout the year. Ensure that all staff have one to one supervision with their line manager at least every three months.	Achieved

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