



Inspection Report on

Anwen Care Home

**Anwen Care Home
Heol Pant-yr-awel
Pantyrwel
Bridgend
CF32 7LA**

Date Inspection Completed

29/08/2023

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About Anwen Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Anwen Care Ltd
Registered places	60
Language of the service	English
Previous Care Inspectorate Wales inspection	14.9.2022
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

People receive a service where overall staff understand their needs. Staff are kind and caring and people speak positively of the support provided. Systems in place ensure medication is stored and administered safely. Personal plans and risk assessments are detailed and benefit from regular reviews. There are opportunities for people to take part in activities. Nutritional needs are understood and met. Nurse and care staff are appropriately recruited, trained and have supervision sessions to discuss any professional issues or development needs. New care workers receive an induction in line with Social Care Wales requirements and receive training relevant to their roles. Routine audits are carried out to ensure the smooth running of the service and regulatory reports are completed as required. There is a new manager in post who is currently focussing on stabilising the staff team. The Responsible Individual (RI) visits regularly to oversee management of the home. The views and opinions of people and relatives are gathered to help improve and develop the service. The environment is welcoming, bright and airy.

Well-being

Group activities are available in the home and individual activities are arranged for those who cannot join in with group sessions. Activities are person-centred and consider the health conditions and needs of individuals in the home. There is a monthly timetable to tell people what activities are happening and when. We saw artwork taking place on the day of inspection.

People live in an environment that supports them to meet their needs. The accommodation is provided over three floors. Bedrooms are comfortable and personalised, and communal areas are numerous and spacious. Suitable mobility aids are in place to help people where needed. Arrangements are in place to ensure the environment is clean, safe and well maintained. Fire safety systems are in place, regular checks are undertaken.

People are listened to and have influence over the care they receive. People can choose where and how to spend their day. People are provided with a choice of food options and meals can be eaten in the dining room, lounge, or people's own rooms as they choose. Visiting arrangements for family and friends are flexible. The management team and RI gather regular feedback to ensure the care provided meets expectations.

People are protected from harm and neglect. Staff have received training in safeguarding vulnerable people and there is a safeguarding policy in place to guide staff. People are supported to maintain and improve their health and well-being through access to specialist care and advice when they need it. Referrals are made to professionals in a timely way and there is evidence of healthcare professionals visiting residents.

Confidentiality is maintained throughout the home. People are safe from unauthorised visitors entering the building, as all visitors have to 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 stored safely and are only available to authorised care workers.

Care and Support

Some improvements are required to ensure people receive care and support that meets their individual needs. There is an electronic care planning system in place providing support plans for all aspects of the individuals' physical, mental and emotional well-being. Personal plans and risk assessments are mostly clear and provide staff with information to support and care for people in line with their identified needs. We did find a risk assessment had not been completed daily as required and a plan required updating to reflect the correct repositioning times. Regular reviews take place but work is needed to ensure that people or their advocates are involved in the review of the plans.. We advised the service these are areas for improvement, and we would expect them to take action in a timely manner.

Staff can identify when people may be at risk of harm or abuse, and appropriate safeguarding procedures are in place. Risk assessments are completed, which identify risk's to people's health and safety. The care staff we spoke to are aware of their personal responsibilities in keeping people safe and told us they would report any issues of concern. They are aware of the whistleblowing procedure, and said they felt confident approaching management if they needed to. When asked if they felt safe one person told us: "*Oh yes I do*".

People living at Anwen receive their medication as prescribed. The service checks medication is stored at correct temperatures, and therefore remains effective. Medication audits ensure staff maintain good practices and identify any areas of improvement. A sample of medication records we saw contained no gaps or errors; medication is stored safely in a locked facility and controlled drugs and stock checks are managed effectively. As required (PRN) medication is appropriately recorded with reasons for administration and the outcome..

Nutritional needs are considered and met well. People benefit from a balanced diet and varied menu. Kitchen staff have a good knowledge of people's dietary needs including any specialist requirements. We observed staff offering a choice of meals. We observed a pleasant and relaxed atmosphere during the lunchtime experience. We particularly noted that the pureed option was served in such a way that the meal was clearly identifiable and looked very appetising.

People experience warmth and kindness. People look relaxed and comfortable in the presence of staff. Staff speak in a friendly, caring and respectful way and people respond positively. People living at Anwen told us: "*Very nice people look after me*" and "*I've never had any complaints*". A relative told us: "*Her [loved one] care is excellent as far as I can see*". We witnessed positive interactions during the inspection and saw care staff supporting people in a dignified manner.

Environment

People live in a pleasant environment which supports their wellbeing. Bedrooms are individualised to people's tastes, containing photos and decorations which make the environment feel homely and familiar. The service has a range of lounge areas, where people can choose to spend their time and undertake activities. Several corridors include areas which display items of interest to encourage people to reminisce. People tell us they feel the environment is comfortable and pleasant to live in.

Ongoing checks and maintenance ensure the environment remains safe. A sufficient supply of personal protective equipment is in place. People's personal information, together with employee personnel records, are stored safely, and are only available to authorised members of the staff team. We saw records of routine utilities and equipment testing. Fire safety tests and drills are completed regularly. Personal emergency evacuation plans (PEEP's) provide guidance on how people should be safely evacuated in the event of an emergency. A maintenance worker is employed to carry out routine health and safety checks and general repairs. Substances hazardous to health are stored securely and there are no obvious trip hazards. Repairs to the property are completed in a timely manner. The kitchen maintains its 5 (very good rating) awarded by the Food Standard Agency.

Leadership and Management

People are supported by care staff who are employed safely. Recruitment checks ensure staff are of good character and hold the necessary skills and qualifications to undertake their role. Care staff are registered with Social Care Wales (SCW), the workforce regulator. We examined the staff rota and found that it reflected the staffing levels on the day of our inspection. Staff members we spoke to reported that although it was busy at times they had enough time to support people appropriately, provided there was no last minute sickness. The service have employed care and nursing staff following a recent recruitment drive.

Training records show overall staff have completed core training and benefit from supervision. Care staff confirm they receive regular supervision, and the manager is available to offer advice and discuss any areas of concern. The recording of formal supervision sessions needs strengthening to evidence the support provided. The provider has themselves identified a need to improve clinical training for nurses and has acted on this. Care staff say they feel confident in their role and have access to sufficient and ongoing training. Care practices we saw on the day were safe and in line with good practice.

People can access information to help them understand the care, support and opportunities available to them. The statement of purpose and information leaflet describes the current arrangements in place regarding the service's accommodation, referral and admission process, the type of care and support available and ways in which it is working towards providing a Welsh language service provision.

There is a new manager in post and whilst the service is in a period of transition the feedback was generally positive. Staff meetings are held regularly, which gives staff an opportunity to express their views. Some staff told us: *"I am happy in my job"*, *"I'm happy to work here, as a member of the care family"* and *"I love my job"*. Other staff told us that morale was low due to recent changes introduced in the home. The manager recognises this and is working to stabilise and support the team. Others told us: *"She is very approachable"*, *"Supportive"* and *"She's doing 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
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21	Staff are not providing care and support in a way that promotes peoples safety and wellbeing.	New
19	The Information leaflet has not been reviewed annually.	Achieved

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