



Inspection Report on

Awel Y Mor

Saundersfoot

Date Inspection Completed

29/01/2024

Welsh Government © Crown copyright 2024.

*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 Awel Y Mor

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pembrokeshire Resource Centre LTD
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	04 January 2023
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 are settled and content in their relaxed, comfortable home. They are cared for by a small team of qualified, committed care staff who know them well and want the best for them. An improvement in staffing levels means they are regularly getting out and doing things they enjoy in the community. The new manager has made a concerted effort to ensure people are identifying and achieving their personal goals such as taking a flight in a plane and going on a train ride. Their physical and emotional health needs are being met and they are effectively safeguarded.

Improvements in personal plans, risk assessments and other records means care staff have access to regularly reviewed, up to date information in order to meet people's care and support needs. Care staff receive relevant training, they feel supported by the new manager and they work well together. The responsible individual's (RI's) oversight of the service has improved and the seven areas for improvement identified at the previous inspection have been met.

The home is clean, safe, comfortable, and homely and has facilities which promote people's independence.

Well-being

People's rights are respected, and their views are central to their service provision. On a daily basis people make choices about how their day will look. They decide the time they get up and choose their clothes, meals and activities. They engage in regular house meetings where they participate in the planning of meals, activities, and the décor of their home. Familiar care staff understand people's methods of verbal and non-verbal communication to ascertain their mood and desires. As a result, people identify their personal goals and in a culture of positive risk taking, they enjoy activities such as a flight in a plane and a train ride.

People are protected and are safe. They are cared for by trained staff who know their safeguarding duties and who respond to people's anxieties in the least restrictive manner. The sharing of the service provider's concerns and complaints policies with people equips them with knowledge to keep themselves safe. People see their families regularly and some have advocates. People communicated to us they felt safe in their home and the regular consultation exercises carried out by the service provider also evidence this.

Care staff promote people's health and well-being. With care staff's support and patience, people attend regular appointments with primary health care professionals and they maintain healthy lifestyles. In emergencies, care staff take action to ensure people receive the right care and their consistent presence supports people's recovery and rehabilitation. Care staff know people well and are attuned and responsive to their emotional presentations, which in turn reduces people's anxiety.

People like their comfortable, clean, well-furnished home. They move around it with confidence and enjoy its relaxed ambience. They choose how they want their bedrooms and the lay out means they can safely practice independence skills. The rear garden provides a pleasant outdoor space, which is mainly used in the spring and summer.

Care and Support

People are assured care staff have the information they need to meet their care and support needs. People's files contain reviewed and updated provider assessments which log significant changes in people's needs and how these are being addressed. People's personal plans contain suitable, accurate information and guidance on people's particular needs, their routines and how best to respond to their anxieties. People and their representatives contribute by describing their "best day" and their likes and dislikes. Regularly reviewed personal plans are shared with people in a way they can understand. The manager has undertaken significant work in relation to people's outcomes, with clear evidence of people identifying and achieving them. We saw pictures of people planning, paying, preparing, taking part and enjoying activities such as a plane flight, dressing up, a train ride and a holiday.

Almost all care staff know people well and they have positive relationships with them. Care staff spoke fondly of the people they support and how committed they were to ensuring they have a good quality of life. Care staff were able to clearly describe people's needs to us and how best to support them. We saw people being patiently supported by care staff to engage in games on their iPad, take part in arts and crafts activities and to go out bowling. People were praised and encouraged to do things for themselves where possible, and they responded well to care staff's communication with them.

Care staff support people to maximise their health outcomes. People are registered with health professionals and are attending regular appointments with support. The manager is proactively responding to longer standing health issues and advocating for people when needed. Overall, meals are nutritious, and records show people are getting out doing things they enjoy such as walking, swimming and bowling. People have regular reviews of their medication and records show judicious administration of PRN (as needed) medication. Care staff are vigilant and responsive when they recognise people might be in pain. They are able to assess people's mood and they tailor their care accordingly, in order to reduce people's anxieties.

People are reassured the service provider has clear safeguarding and behaviour management policies and procedures which care staff follow. Care staff are regularly trained in safeguarding and they are clear about how to respond if they have any safeguarding concerns. Information about people's rights is regularly shared with them and care staff's familiarity with people's presentations means they would be alert to any significant changes of concern. Incident reports show care staff respond to people's anxieties in the least restrictive manner and the manager's oversight of these records is timely and promotes learning.

The service provider is making an effort to promote the Welsh language. Two care staff speak Welsh and people have a noticeboard in their bedrooms titled "Cwtch Cymraeg," where Welsh words are broken down phonetically for people to practice. A person told us the day of the week in Welsh and proudly sang a little of a Welsh song.

Environment

The home is meeting people's needs. It is a comfortable, clean and spacious environment. It has a relaxed presentation and atmosphere which mirrors that of any ordinary home in the community. The furnishings are of a good quality and soft furnishings and pictures and people's artwork on the wall promotes a homely feel. People personalise their large bedrooms; they contain family photographs and they are clean, tidy and well maintained. People tend to prefer to eat their meals in the living room, however, the dining room area provides a valuable space for quiet time, craft activities and board games.

The kitchen is clean, well- stocked and spacious and has suitable facilities to support people to practice skills such as preparing food and washing up. People's ensuite bathrooms are clean and have suitable facilities and products to promote good personal hygiene. A risk assessment is required in relation to the accessibility of razors and the scissors in the first aid kit kept in the kitchen. People bring their washing daily to the laundry room and an adapted kettle in the kitchen means people can safely participate in making themselves drinks throughout the day.

The home is safe. On arrival we were asked to show identification and to sign in the visitor's logbook. The service provider ensures regular fire safety and health and safety checks are carried out within their specified timescales. Care staff are trained in health and safety and fire safety and they undertake regular fire drills at different times of the day. The manager follows up on the annual checks on the gas boiler and the annual fire risk assessment. The home has high scores of compliance in relation to internal health and safety and medication audits.

The manager's office is down some external steps in the garden, accessed via the patio doors in the lounge. It is suitably furnished and has lockable cabinets for the storage of confidential records. Although the office is not integrated into the main building, the manager is visible in the home and spends time with people and care staff.

The rear garden provides a valued space. There is a raised decked section with chairs and a small, grassed area. A table tennis table and swing ball are available for use in the summer and care staff clear the leaves on the steps to the office, to reduce the hazard of slipping.

Leadership and Management

People have the information they need about the service. The statement of purpose is regularly reviewed, has accurate up to date information regarding the changes in staffing and the service we saw at inspection accurately reflected it. The manager is keen to raise people's awareness of their service and to involve them and their family members in its processes as far as is possible. We saw pictures of care staff sharing the complaints process with people, and this is due to happen with the suitably formatted guide to the service. People take part in their multi-disciplinary meetings and the important aspects of their personal plans are shared with them following these meetings.

People are assured they are cared for by sufficient numbers of qualified, experienced, skilled and trained care staff. All care staff are suitably qualified for their role, with one just about to complete their level three training course. Rotas show there are enough care staff to meet people's care and support needs and to ensure they are able to consistently pursue their personal outcomes. Care staff told us they pick up overtime to cover any shortfalls and occasionally the manager assists when needed. The service is actively recruiting in order to maintain stable numbers of care staff.

Quality assurance measures at the service have improved. The responsible individual visits the home every three months and carries out a thorough range of checks, highlighting areas for action, which the manager responds to in a timely manner. As required, the RI consults people living in the home, care staff and families during these visits. The quality of care reports are completed within timescales; they provide an overview of the service and evidence formal consultation with people, care staff and other representatives. The content tends to be repetitive from one six-month period to another and they would benefit from presenting a more balanced account of the challenges as well as the achievements of the service.

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
15	Personal plans are not clear and do not evidence people's involvement in identifying their personal outcomes.	Achieved
16	Personal plans not reviewed every three months.	Achieved
18	Provider assessments not revised.	Achieved
19	Guide to the service does not meet regulations	Achieved
29	Behaviour management policy not followed at all times.	Achieved
34	There are not at all times sufficient suitable care staff to meet the SOP, people's care and support needs and their ability to achieve their outcomes.	Achieved
66	The RI's oversight of the management of the service is not sufficiently robust.	Achieved

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 21/02/2024