



Inspection Report on

Churchstoke Short Stay

Montgomery

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

06/03/2024

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About Churchstoke Short Stay

| | |
|---|--|
| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | Cartrefi Cymru Co-operative Ltd |
| Registered places | 3 |
| Language of the service | Both |
| Previous Care Inspectorate Wales inspection | 25.11.22 |
| 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

Churchstoke Short Stay is a respite service where people have opportunities to do things they enjoy, both at the service and in the community. They are supported by a care staff team who are friendly, kind and genuinely want to support people to make the most out of their stay.

Personal plans are detailed and show people are consulted on how they want care staff to support them. Care and support is provided to people in line with their wishes and preferences. There are good opportunities for care staff to gain knowledge and develop their skills. Records show they have regular meetings with their line manager. They tell us they feel valued by the management team and have excellent support from them. The facilities at the service are well maintained and the environment is decorated to a good standard.

There is good oversight of the service. The responsible individual (RI) visits regularly to review the quality of care provided so any improvements identified can be addressed quickly.

Well-being

People are encouraged and supported to make choices during their stay at Churchstoke. Individuals staying during our visit told us they had a choice of what room they wanted to stay in and how they wanted to spend their time. We saw them choosing their meals and making plans for the following day. People are asked to give their views on the service and have access to information about what they can expect when they stay. There is a complaints policy for people should they need to use it.

People's well-being is promoted by a dedicated care staff team. Personal information including risk management plans are detailed so care staff know how to support people. Personal preferences are taken into consideration so people can do as little or as much as they want during their stay. The provider considers compatibility as well as the care and support needs of people before each stay. This is so staffing levels can be adjusted to ensure individual need is met. We experienced a lovely relaxed, friendly atmosphere, interactions with care staff were warm and kind.

There are processes in place to keep people safe. The electronic care system gives care staff up to date information when they need it. The manager and care staff know the process to follow if they have concerns about people's well-being. Policies and procedures relating to safeguarding are accessible and care staff have safeguarding training.

The environment helps to promote people's well-being. People can spend time together or on their own. The outside space is accessible and safe. Processes are in place to ensure all facilities and equipment are kept in good working order.

Care and Support

People are consulted about what they want to do during their visits. We heard the manager planning activities with the individual's staying at the service during our visit. This was based on their individual preferences. They had just got back from lunch out and shopping and were relaxing, watching TV, and sitting outside in the garden. They spoke enthusiastically about their stay. They clearly enjoy each other's company and the company of care staff. Comments include "*I love it here*", "*wish I could come more often*" and "*I enjoy it here.*" People are encouraged to maintain independence including preparing their meals and washing up. They have good relationships with care staff who clearly do all they can to help people achieve their goals during their stay. We saw a warm, relaxing, fun atmosphere during our visit with people clearly at ease, and happy doing what they enjoy.

Records show people are involved in planning and reviewing their care and support needs. The manager visits people in their own home prior to them accessing the service. Information is gathered from the person and people involved in their care so assessments can be completed to make sure the service can meet their needs. The individual and their family/representatives are contacted prior to each stay to see if there have been changes to their support needs. This information is passed on to care staff at the service. People are involved in reviewing their personal plans once they arrive for their stay. There is a new electronic record management system in place. We found information to be detailed including risk management plans. Care staff told us the new system works really well as it has all the up-to-date information about people and changes are updated and communicated quickly.

Processes are in place to protect people from abuse and neglect. Care staff are visible and responsive to people's needs. They tell us they are confident to approach the management team if they have any concerns and there is always someone they can contact day and night for support. Policies and procedures relating to safeguarding are in place to guide them, and training opportunities are good and relevant to the needs of the people they support. Medication practices make sure people have their medication as prescribed by care staff who are trained and their competency to administer medication is checked regularly.

Environment

People stay in accommodation which meets their needs. Equipment and adaptations support people with mobility needs. We saw people using the kitchen and dining area as well as the lounge. There is space for people to be together or for them to have time on their own. The outside space is accessible and safe to use. People were keen to show us the bedrooms they were using for their stay. They said they have all they need to be comfortable. The service is nicely decorated, clean and tidy. Systems are in place to make sure cleaning duties are carried out regularly and recorded. Personal Protective Equipment (PPE) is readily available.

Systems are in place to ensure people's health and safety within the environment. There are regular checks of equipment including hoists and beds. Care staff have training in the use of equipment to keep people safe. They told us any issues relating to maintenance are reported and action is taken quickly to address them. Fire safety is managed well. Care staff have training and regular fire drills. People using the service also have fire drills at the start of each stay.

Leadership and Management

There is an effective quality assurance system in place. The manager told us the new electronic care system has helped to ensure better oversight of the service. The RI visits the service regularly to speak to people during their stay and care staff to gain their views on the service. Six monthly quality of care reports show the RI identifies what is working well and what needs to improve. Regular internal audits of all aspects of the service take place as well as regular visits from the operations manager. The manager tells us they feel supported in their role and their ideas and comments are always considered by the RI.

People have access to information about the service, so they know what to expect if they choose to stay there. This includes the statement of purpose and guide to the service. These documents are available in an easy-to-read format. Policies and procedures are available for care staff to guide their practice. Key documents can be made available in Welsh if people request this.

People are supported by a dedicated care staff team who have training relevant to their role and feel supported by the management team. Comments from staff include “*communication between managers and staff is excellent*” and “*the team work really well together.*” When asked if care staff feel valued and supported in their role, they said the support was excellent. The management team are approachable and care staff tell us they have a good work life balance. Supervisions and appraisals are carried out regularly and we saw the opportunities for training to gain knowledge and develop skills is good. Staff confirm this and say training opportunities are excellent. Regular team meetings are held. These are also used as a way for continued training and development. Recruitment is ongoing. No new care staff have been recruited since our last inspection.

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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 |
| 36 | Staff do not receive supervision and appraisal within the required timescales. | Achieved |
| 80 | The Quality of Care report does not directly refer to or contain information specific to the registered service. | Achieved |
| 16 | We were unable to evidence that people or their representative had been involved in the review process. | Achieved |

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