



Inspection Report on

Peniel Green Care Home

**Peniel Green Care Home
216 Peniel Green Road
Peniel Green
Swansea
SA7 9BD**

Date Inspection Completed

22/09/2023

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About Peniel Green Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	HC One Limited
Registered places	34
Language of the service	English
Previous Care Inspectorate Wales inspection	20 July 2022
Does this service promote Welsh language and culture?	The 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

Peniel Green Care Home has a homely atmosphere that is valued by residents and staff. People have control over their daily lives and enjoy a range of stimulating activities. Care workers provide a good standard of care and support, although the number and skill mix of staff need to improve. Risk assessments and personal plans provide detailed information about people's care needs and preferences. Care workers actively promote people's health and well-being.

The home has a clear management structure and organised administration systems. The new manager is building relationships and settling into the team after being appointed in September 2023. The responsible individual (RI) oversees the running of the home effectively. Changes are influenced by people's views and experiences. Staff take pride in their work and are committed to providing the best possible care. They are rigorously recruited and provided with a good level of training and support.

The home and its facilities are well presented and maintained. People enjoy spending time with others in indoor and outdoor areas. Work is underway to enhance the presentation of private rooms, so they offer a personal touch and provide the right level of stimulation. Staff promote a good overall standard of hygiene and infection control.

Well-being

The service upholds people's rights. Care workers ensure people's voices are heard by giving them the time and support they need to express themselves. People are consulted about their daily activities and their decisions are respected. The necessary authorisations are in place to ensure people's freedom is only restricted in their best interests. Regular meetings allow people to influence decisions about home life. Care workers treat people in a dignified, respectful way. The RI sets actions to improve the service, taking into account people's views and experiences.

People live in homely accommodation that is adapted to meet their needs. There are pleasant communal lounges where people can relax, socialise, and enjoy entertainment and activities. There are systems in place to ensure the home and its facilities are properly maintained. We found the home to be generally clean, tidy and in a good state of repair. People are consulted about the design of their individual rooms, so they can be decorated and furnished according to their preference. Care workers support people to spend time outdoors and in the community.

The service actively encourages people to pursue their interests and lifelong goals. People enjoy a good social life and take comfort from their relationships with staff and other residents. Care workers have access to detailed personal plans that outline how people need and want to be cared for. People receive their prescribed medicines and have input from health professionals to support their well-being. They receive appropriate care and support from a core group of trained, experienced staff. However, the service relies heavily on agency workers to maintain safe staffing levels during the day and night. Agency workers do not always have the required knowledge and skills, which impacts on the workload of the team. This has affected staff morale and is likely to have contributed to frequent sickness. Therefore, the overall number and skill mix of staff need to improve to ensure the quality of care and support people receive is not compromised.

People feel safe and secure in their home. Staff are appropriately recruited, which ensures people are cared for by a suitable workforce. Practice is guided by clear, informative policies and procedures that reflect current legislation and guidance. Staff receive training in relation to safeguarding adults at risk and have a good understanding of safeguarding and whistleblowing procedures. Accidents and incidents are dealt with appropriately and monitored by the senior team, along with the outcomes of practice audits. There are appropriate management arrangements in place to ensure the home runs smoothly. This is monitored closely by the RI.

Care and Support

People have control over their day-to-day lives, choosing where and how to spend their time. Their preferred routines are respected by care workers and reflected in personal plans. The service follows Deprivation of Liberty Safeguards (DoLS) procedures to ensure any restrictions people face are lawful and in their best interests. People told us they are always offered a choice at mealtimes. One person said, *“You can have anything you want”*. Care workers have a good understanding of who people are and how to communicate with them effectively. We saw them helping people express themselves by using communication tools and responding to body language cues.

The home has a warm, friendly atmosphere that gives people a strong sense of belonging. Staff encourage people to share their dreams on a ‘wish tree’ so they can help them become a reality. Activities and events are organised by well-being coordinators who are currently available three days a week. Resources are made available to other team members to ensure people continue to be occupied and entertained on other days. We saw people enjoying a gym session, pottery class and chocolate fountain. Records show they have recently enjoyed a range of other group and individual activities, including pet therapy, sensory therapy, Bollywood dancing, a male voice choir and outings to Aberavon and nearby shops. The home has good links with the local school and church and there are plans to hold joint events with people living in one of the provider’s other homes. The well-being coordinators are exploring dementia-friendly activity ideas with an Occupational Therapist.

People receive good quality care and support from caring, attentive staff. Their individual needs are reflected in detailed risk assessments and personal plans that are reviewed regularly. People and their representatives are involved in planning and reviewing their care. Records confirm that people consistently receive timely and appropriate care. The manager is supporting care workers to improve their daily record-keeping, so it fully reflects the care they provide. The service plans to digitalise care records within the next year, which will further improve their quality and accuracy.

The service promotes people’s health and well-being. Medical and specialist services are involved in people’s care and staff make prompt and appropriate referrals when necessary. Guidance from professionals is incorporated into personal plans and kept within care records. People receive their prescribed medicines at the appropriate time. Medicines are stored securely and managed electronically. Stock levels are automatically tracked which helps ensure a timely supply of new medicines. Staff know how to report concerns about people’s welfare and are confident dealing with accidents and incidents. These are logged electronically so managers can view and monitor actions. A relative told us staff are *“very good at keeping an eye”* on their loved one. The home will be using a new database from November 2023, which will make information about significant incidents more accessible and easier to analyse.

Environment

The home and its facilities are well maintained. A maintenance officer carries out routine health and safety checks, which the manager oversees. Staff told us they can request repairs easily and these are dealt with quickly. Security procedures have been enhanced to ensure the building is secure throughout the day and night. We found window openings to be restricted, reducing the risk of people falling from a significant height. The home's fire risk assessment is kept under review and staff receive mandatory fire safety training and fire drills. People's emergency evacuation plans are reviewed every month. Fire safety equipment has been serviced within the last year. Care workers ensure people have access to the safety equipment they need, including a call bell. We saw care workers responding promptly when called for assistance.

People spend time relaxing or socialising with others within communal areas, which are appropriately furnished and decorated. People have access to a small front garden where there is a smoking area, potted plants, raised flower beds and various garden ornaments. The dining room is thoughtfully presented, allowing people to enjoy a sociable dining experience. We saw that private rooms suit people's needs and wishes. People are consulted about the design and layout of their rooms during environmental assessments. The aim of these assessments is to create a personalised environment that offers stimulation and comfort. The well-being coordinator has purchased memorabilia, ornaments, bird feeders and other items to support this. Scrap books have also been introduced to help people reminisce over activities and events they have been part of. These are available within people's rooms, along with family photos and other cherished possessions.

The home is generally clean and tidy. Housekeeping staff follow a general and deep cleaning rota to ensure rooms are regularly and thoroughly cleaned. Staff complete mandatory and refresher training in relation to infection control. They have access to Personal Protective Equipment (PPE), which they use correctly to minimise infection risks. There are suitable arrangements in place for staff to dispose of general and clinical waste. The manager observes environmental conditions during daily walkarounds. Likewise, the RI monitors standards during formal visits, ensuring equipment is clean and appropriately stored. We found the first-floor sluice room to be in need of renovation and were assured this is planned. The home has a current food hygiene rating of 5 (very good).

Leadership and Management

The new manager is keen to empower staff and ensure they feel valued. Staff told us the manager has been visible and supportive whilst building relationships with residents. The manager is supported by an experienced deputy, an area director and the RI. Staff are passionate about their jobs and proud of the home's family feel. People have bonded with their care workers and they each share a mutual fondness for one another. One person told us *"They're good as gold here"*. A relative said, *"It's always been a nice home... I can't fault the staff, they've been marvellous"*. Records show that staff are recruited and vetted appropriately. The home has a comprehensive staff training programme, as outlined in its statement of purpose; a key document that explains what the home sets out to provide and how. Staff told us they receive good quality training and frequent reminders to refresh their training. They can reflect on their performance and personal development through formal supervision and annual appraisals.

At a previous inspection, we identified that the provider needed to take action to address staffing shortfalls. This has not been addressed. Staffing rotas show there have been shortages in housekeeping staff, adding pressure to other team members. Staff vacancies and frequent sickness means the service relies heavily on agency workers to maintain adequate numbers of care staff. The additional support some agency workers need impacts on the team's workload, particularly if agency staff lack the required knowledge and skills. This is affecting staff morale. Staff told us they work hard to ensure people receive timely care and support, although often struggle due to the overall skill mix of staff; views we saw reflected within their individual supervision records and quality assurance reports. The overall number and skill mix of staff remains an area for improvement, and we expect the provider to take action. The service is actively recruiting new staff and the manager is directly involved in recruitment decisions. The manager told us several new staff have been appointed since the inspection.

People consistently reported to feel happy and safe at the home. There are systems in place to help drive improvement and the home has scored highly following recent online reviews. Daily 'flash meetings' allow team members to share important information and updates about people's well-being. Clinical audits are carried out every month and reviewed by the senior team. This ensures follow up actions are completed, and practice improvements made, as necessary. The service has up-to-date, accessible policies and procedures to inform and guide staff in their practice. People are encouraged to speak out about their experiences during monthly meetings, care reviews and formal visits from the RI. The RI completes six-monthly quality of care reviews that consider feedback from people living in and linked to the home plus an analysis of key data. Actions are set to address areas requiring improvement. The service is investing in new software to improve the accessibility and overall standard of record keeping.

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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N/A	No non-compliance of this type was identified at this inspection	N/A
34	The service has regularly operated with insufficient housekeeping staff due to staff shortages. It relies heavily on agency workers to maintain safe staffing levels during day and night shifts. Agency workers do not always have the required knowledge and skills, which impacts on the workload of the team. This has affected staff morale and is likely to have contributed to frequent sickness amongst the team.	Not Achieved

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