

## Care and Social Services Inspectorate Wales

Care Standards Act 2000

# Inspection Report

Wentworth Lodge  
9 Ty Draw Road  
Penylan  
Cardiff  
CF23 5HA

Type of Inspection – Focused  
Date(s) of inspection – Wednesday, 11 February 2015  
Date of publication – Monday, 30 March 2015

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## Summary

### About the service

Wentworth Lodge is a care home for older people located in Roath, Cardiff. It is within easy walking distance of Roath park and local shops and amenities. The home is registered to provide personal care for up to sixteen people, some of who may have a dementia diagnosis. At the time of inspection, two residents were in hospital. The acting manager is Debbie Lewis who is awaiting her registration interview with Care and Social Services Inspectorate for Wales (CSSIW). The registered provider is Ty Draw Lodge and Wentworth Lodge Limited and the Responsible Individual is Mary Cottrell.

### What type of inspection was carried out?

We (CSSIW) conducted a planned unannounced visit to the care home on the 11 February 201. Analysis of information held by CSSIW in respect of the care home, led us to plan a focussed inspection which focussed on the quality of life experienced by people living at the home.

The following methodology was used:

- Observations of daily life and care practice at the home.
- Observations of the care environment
- Observations of interactions between staff and residents of the service using the short observational framework for inspection (SOFI 2) tool. The SOFI 2 tool enables inspectors to observe and record life from the perspective of service user's who do not have the ability to communicate their experiences to others. It considers how they spend their time, activities, interactions with others and the type and quality of support received
- Conversations with people living at the care home.
- An examination of people's records.
- Discussions with two care staff, the acting manager, the responsible individual and the registered manager of Ty Draw Lodge, the sister home of Wentworth Lodge who provides support as and when needed
- Examination of four staff files.
- Consideration of the support and training provided to staff including supervision records.
- Examination of records kept at the home.
- Consideration of the home's statement of purpose.
- Consideration of the home's quality assurance processes.

### What does the service do well?

Staff were observed to be very attentive and caring towards residents of the home and we noted that interactions between the two were positive and very friendly, whilst respectful of dignity.

The acting manager has been in post since October 2014 and appears to be both very experienced and knowledgeable as well as committed to raising the standards at the

home. We felt she would prove to be a good leader and mentor to the care home staff.

### **What has improved since the last inspection?**

No significant areas of improvement were identified at this inspection although it was evident a programme of redecoration and refurbishment has taken place that has improved the look of the home.

### **What needs to be done to improve the service?**

No non-compliance notices have been issued as a result of this inspection. The following recommendations have been made and will be followed up at the next inspection:

- The providers should consider the use of an improved system to allow residents to call or alert staff when help and support is needed. The present system sounds an alert downstairs to indicate where staff should go to, meaning that staff who are on other floors have to go downstairs to the ground floor before being able to identify where the alert is coming from. The use of a mobile, wireless system or pager devices may alleviate this problem.
- The providers should ensure that care plan reviews are updated regularly, at least monthly, and that staff supervision is carried out at least every two months, both in line with National Minimum Standards
- The providers should ensure that cupboards that contain hazardous substances such as cleaning fluids, or sensitive and highly personal information such as care documentation, are always securely locked. We found two instances of both being open and unlocked during the course of the inspection.
- We found that one resident's room was unbearably hot and it was not possible to turn the radiator to a lower setting. We have asked that the provider address this as a matter of priority.
- We noted that some resident's bathrooms and sinks had health & safety signs displayed reminding people to "wash your hands." These detract from the homely feel the service is trying to promote and unless there is clear evidence that individual residents wish for such notices, they should be removed.
- The home would greatly benefit from the use of environmental adaptations such as clear signs to support people with dementia to navigate their way around the home. The use of 'memory boxes' or tactile boards would also serve to stimulate individualised recollection and discussion for residents who may otherwise struggle to communicate due to the effects of memory loss or other cognitive impairments.

## Quality Of Life

Overall, we found that people living in the home were happy with the care that received and generally felt able to exercise choice and control over their day to day lives. Drinks and snacks were available whenever residents wished to have them and lunch time was seen to be a happy occasion that residents greatly enjoyed. We noted that there were two choices of food available, with other options should a resident so wish. Food was freshly cooked, well presented and offered a well balanced and nutritious meal.

Throughout our visit we observed very warm and caring interactions between staff and the residents they care for. There was a genuine affection shown on both sides and we noted how residents revelled in the time and attention shown to them. Interactions were courteous and professional and we judged that people were being treated as individuals in their own right, not just as objects for whom tasks had to be done.

We saw residents being treated with warmth and respect and staff support was given with kindness, patience and sensitivity. A relaxed and friendly atmosphere was evident and those people that were able told us that they were very happy with the care they received and felt that they were very well treated.

We observed staff being respectful and providing support in a discreet and dignified manner and noted how they listened to resident's fears and concerns, providing them with sensible options and interventions to enable them to make choices.

We found that people remain healthy because their needs are anticipated and they are enabled to have access to specialist or medical support. We saw records of all the varied professionals that were involved in the individuals care needs and saw that the care staff followed up on any actions or recommendations through additional instructions on the care plans.

We analysed the care documentation and found that they were sufficiently detailed to ensure staff knew what their particular tasks were. We did note however that in some instances care plans had not been updated or reviewed in the previous month and there was no record of any changes that might have occurred. We have recommended that this be addressed as soon as possible and will follow this up at the next inspection.

For those residents with very particular needs, the home may wish to draw up written explanations of complex care conditions in care planning that will help increase staff understanding. These could break down difficult information into something that could be understood and acted upon by care staff whilst sign posting them to further advice and support as needed. Alongside this should be a consideration of the person's history, for example, their likes and strengths, in order to help understand how that may help them manage the condition. This will help staff have an increased understanding of the particular individual they are supporting.

We also found care plans to be rather task oriented, with little detail of the individual, their preferences as to how care should be given, their likes or dislikes or any consideration of their social history. This personalised understanding of the individual is very important in ensuring that any care provided is respectful of wishes and feelings and enables staff to develop a deeper understanding of the particular individual they are supporting. Having an understanding of social history – key achievements and milestones for example – is a key way to support staff to enable the person to take appropriate risks, stimulate conversation or encourage recollection and re-orientation to surroundings.

This recommendation goes hand-in-hand with our suggestion that the home consider the use of cues such as signs, clocks and calendars as well as memory boxes and so called 'fiddle boards' to help the individual navigate their way around the home, or to provide stimulant to discussion or recall of happy, meaningful experiences.

## **Quality Of Staffing**

This inspection focussed on the quality of life. CSSIW did not consider it necessary to look at the quality of staffing on this occasion because it was a focussed inspection as a result of a concern. However this theme will be considered during future inspections.

## **Quality Of Leadership and Management**

This inspection focussed on the quality of life. CSSIW did not consider it necessary to look at the quality of leadership and management on this occasion because it was a focussed inspection as a result of a concern. However this theme will be considered during future inspections.

## **Quality Of The Environment**

This inspection focussed on the quality of life. CSSIW did not consider it necessary to look at the quality of the environment on this occasion because it was a focussed inspection as a result of a concern. However this theme will be considered during future inspections.



## How we inspect and report on services

We conduct two types of inspection; baseline and focussed. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.