



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Inspection Report on

Wentworth Lodge

**9 Ty Draw Road
Penylan
Cardiff
CF23 5HA**

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Description of the service

Wentworth Lodge is a care home for older people located in Roath, Cardiff. The home is registered with Care Inspectorate Wales (CIW) to provide personal care for up to sixteen people aged over 65 years; and who may have a diagnosis of dementia. The accommodation is provided on three floors, with accessible stair lifts for the majority of the stairs. The home is close to Roath Park, local shops and amenities. The registered manager is Debbie Lewis. The registered provider is Ty Draw and Wentworth Lodge Limited and there is a nominated responsible individual on behalf of the company. At the time of this inspection, there were 13 people living at the home.

Summary of our findings

1. Overall assessment

Wentworth Lodge provides a good quality service where people are encouraged and supported to remain independent. Staff are dedicated and enthusiastic and understand the needs of the residents. The home is clean, well maintained and comfortable but improvements could be made to enable people with dementia to find their way around more easily. The home is well managed and staff receive relevant training and clear care plans to guide their work. There is good partnership work with health and social care professionals to meet the needs of residents.

2. Improvements

There was evidence of ongoing investment and improvements in the service.

The manager had addressed issues raised in the last inspection report including staff training in dementia care and developing an activities programme.

3. Requirements and recommendations

We notified the registered provider and the registered manager that they were not compliant with the regulation relating to providing a report on the quality of care. We did not issue a non-compliance notice because there was no adverse impact on people living at the home.

Section five of this report identifies our recommendations to further improve the service. We (CIW) made recommendations in relation to:

- monitoring activities to develop a more structured activities programme;
- ensuring sufficient detail to guide staff in behaviour and risk plans;
- 'Do Not Resuscitate' forms;
- the use of colour on doors; and
- the Statement of Purpose.

1. Well-being

Summary

People are mostly content and happy living at Wentworth Lodge; they receive personalised care and are safe. People have good relationships with the other people who live there and with staff. People are able to express their views and opinions and influence how their care is delivered. They have opportunities to do the things that matter to them.

Our findings

People are generally happy living at Wentworth Lodge and satisfied with the care they receive. Their comments included, *“It’s not home but it’s homely and the girls are very kind”* and *“I can’t grumble”*. Three people told us that they could no longer manage in their own homes and they were happy at the home and with the service and staff. Another person told us that they had been isolated in their flat after a number of falls and they had ‘missed people’. They said were *‘happy and settled here’* and they enjoyed the company. A relative told us, *“The first thing she said was ‘I like it here’. It has been such a gift. She looks like a different person and smiles a lot. The level of care she gets is fantastic”*. As in the last inspection, we saw that staff were very busy, however, they told us that they were able to meet the needs of the current residents as there were only 13 people accommodated. We observed that as staff went about their daily work, they made every effort to stop and chat to residents and to listen to their responses. Discussions indicated that only one person was not settling and this was confirmed by our observations. We saw that they appeared agitated, unhappy and confused at times and saw that staff reassured them, chatted about family, engaged them in an activity or helped them to find their way back to their room; and these actions soothed them. We found that the manager had carried out a ‘falls audit’ and had taken appropriate action where people were at risk. For example staff monitored people closely after falls and carried out 15 minute checks during the night; furniture was rearranged and advice from health/ occupational therapists was sought. People are mostly content and happy; they receive good care and are safe and protected.

People have good relationships with others living in the home and with staff; and maintain contact with significant people in their lives. We saw people chatting to each other in the lounge and greeting others and asking how they were that day. All the residents went to the dining room for lunch, we saw that this was a social event when people chatted and exchanged banter and there was a sense of community as a group. People told us that they had regular visits from their family and friends; and we saw that visitors were welcomed throughout the day. We also saw very positive, caring relationships with staff during our visit and the people we spoke to told us that the staff are *‘excellent’*, *‘lovely’* and *‘very caring’*. Staff had a good knowledge of people’s past histories, likes/ dislikes and care needs and we saw that people received personalised care. People are recognised as individuals by the staff supporting them. They are valued, experience a sense of warmth and belonging and maintain a sense of identity.

People have a voice; they have opportunities to choose and influence their care and daily routines in the home. We saw records that evidenced that before people are admitted to the home, staff ask them how they would like to be looked after and the support they need. If they are not able to do this, staff would ask relatives or health professionals for information.

We saw people moving around the home, choosing where they wanted to go and what to do. People asked for assistance from staff when they needed it and we saw that staff were aware of the non-

verbal signs or body language of people so that they anticipated their needs. Some people preferred to remain in their rooms and this was respected. People told us that they chose when to get up or go to bed and we saw that people came down to breakfast at different times, they had a choice of what they ate and they were not rushed. People told us the food was very good and they were asked what they liked. We saw that people had a choice at lunchtime of chicken with roast and mashed potatoes and a choice of four types of vegetables or an alternative of salad, quiche and sauté potatoes. We saw that one person needed a soft diet and was offered several options to encourage them to eat. People chose where they wanted to sit for lunch and in the lounge – and we saw that they did not always sit in the same places at different times through the day. We saw that people were supported to make choices and to know what was available through written menus as well as pictures. We saw that people's preferences were supported, for example '*very weak coffee*', '*not too full please*' and '*just a bit*'. The home does not currently provide an 'active offer' of the Welsh language as no staff speak Welsh and no information or documentation was available in Welsh. However, none of the people living at the home spoke Welsh. People are able to express their views and preferences in various ways and they are heard, when helps them feel valued.

People can participate in a variety of activities. Engaging people in meaningful activities to keep their minds and bodies as fit and active as possible remains a challenge for staff but we saw some improvements. Although people spent a lot of time in the lounge with the television on in the background, a few were watching television, whilst others were reading, doing crosswords, knitting or talking to each other. Staff offered activities such as throwing a soft ball, puzzles and colouring as well as sitting alongside people and chatting. Since the last inspection the manager had kept a record of all activities and photographs of people engaging in them. People told us that they particularly enjoyed it when staff brought in their pets, or when children visited. We saw that many people enjoyed a radio programme over the lunchtime period and joined in the singing and tapped their hands on the table or tapped their feet in time with the music. Some people enjoyed a game of bingo in the afternoon. We discussed how it would be helpful to record if activities had been successful so that activities people enjoy can be promoted and developed into a more structured activities programme that more people will engage in. People have opportunities to do things that matter to them.

2. Care and Support

Summary

People receive appropriate, responsive care and are supported to make decisions about the service they receive. People and their relatives have good relationships with staff. Staff understand people's individual needs and they work well as a team to support people to remain as independent and healthy as possible. Staff are trained appropriately and work with other professionals so that people receive the right care, at the right time and in the way they want it.

Our findings

People receive appropriate care that is monitored and updated as their needs change. Staff confirmed they were informed of people's assessed needs prior to admission and that they gained additional information through direct work with people and reviews. We looked at three care records and found they were all well organised. At the front of each file was a photograph of the resident, a brief personal history and a summary of care, to help guide staff to provide individualised care. There were detailed admission assessments and care plans that linked to risk assessments and health and care monthly reviews. We saw that one person had had several falls and appropriate changes had been made which resulted in a significant improvement. These included a move to a ground floor room, rearranging furniture and monitoring them at regular intervals. We noticed that one person's behaviour and communication was not recorded in the 'behaviour and risk' section of their care plan, although all staff were aware of it. We discussed this with the manager, as staff need guidance to ensure a consistent approach. Each file contained a hospital admission form with all relevant information for the person to take with them, if they were admitted to hospital. We noted that one file had a photocopy of a 'Do Not Resuscitate' form (DNR form). As emergency and hospital staff will only take notice of original colour coded forms, we brought this to the manager's attention and she said she would obtain another original form. We saw that each file contained information about the person's likes and dislikes and 'things that are important to me' and that the care plans were signed by the resident or their representative. People are involved in making decisions that affect their lives and are supported in the way they want.

People experience warmth and respect. People and their relatives spoke very positively about the staff. A relative said, "*Staff work jolly hard here and are very welcoming. The staff are lovely, very caring*". Another told us that they had been welcomed into the home when they first made an enquiry and they had been very reassured by what they saw and with all the information they were given. We saw that staff engaged easily and people approached them readily, chatted and laughed and appeared settled and content. Staff expressed a genuine desire to support people to retain as much independence and choice as possible. There were four care staff and the manager on duty when we visited, which reduced to two staff for the evening and the night shift. Staff told us that they were able to provide appropriate care with this level of staff for the current service users. People have good relationships with staff who know them well and the support they receive is personal and individualised. As a result, people have a sense of belonging, which helps them feel valued and to settle in.

People benefit from staff who receive relevant training to provide a service to older people and those in the early and middle stages of dementia. An overview record of staff training showed that 57% of staff held a relevant care qualification. All staff attended mandatory training such as health and safety, food hygiene, safeguarding and medication, and also

training specific to the needs of the people living there. Training in moving and handling, falls prevention, diet and nutrition, continence care, medication, preventing pressure ulcers and record keeping were included in the core training; and there were refreshers in key subjects. Since the last inspection, all care staff had undertaken on-line training in challenging behaviour in people with dementia and improving outcomes for people with dementia and some had attended a course relating to Deprivation of Liberty Safeguards DOLS in a care home setting. The manager told us that she was applying for staff to attend a course on dementia awareness and behaviour. Staff told us that training really supported them in their roles and that if training was on line, for example dementia awareness, they had opportunities to discuss training in team meetings or with their supervisors. Staff were able to tell us about their responsibilities in relation to safeguarding and that they should notify CIW of significant events. People are cared for by motivated staff who have relevant training opportunities.

People receive responsive care from staff. We saw that people have regular drinks and nutritious meals. Water and squash were available in the lounge and people were offered drinks regularly throughout the day. Breakfast and lunch were relaxed and leisurely with staff available to help as needed. People were helped to choose their meals from a pictorial menu. At lunchtime, most people were independent and staff encouraged and supported those people who needed help to walk, to sit safely or to eat. We saw that staff offered choices and were aware of peoples' needs and preferences for example soft diet, diabetic diet and size of meal. People enjoyed their food and appropriate, discreet support was given to those who needed it by staff who sat alongside and conversed with them and others at the table. People's needs are understood and anticipated by staff so they receive the right care at the right time.

People are supported to be healthy and as safe as they can be. People were registered with local healthcare services and we saw records of visits by mental health professionals, district nurses, chiropodists, dieticians and GPs. We talked to two district nurses who visit every day and they said that staff are in regular communication with them and alert them to any issues of concern. They described staff as 'very patient' and 'hardworking' and the care as 'very good' and 'great'. Staff worked closely with health and social care professionals to support people to manage risks associated with dementia and deteriorating mental capacity. We saw that referrals were made to GPs or the care home liaison team (for mental health), when people's needs changed. Meetings were held to review medication and the care plans and plan the best support for people. We saw that the DOLS have been considered for all residents. These are checks to make sure that any care that restricts a person's liberty is both appropriate and in their best interests. Some people at the home need protection under DOLS because of their vulnerabilities and the potential risks they face. We saw that there was a time limited authorised DOLS and mental capacity assessment on one of the files we checked, and the manager told us that she had applied for best interests' assessments for four of the current residents. Staff communicate and work well with other professionals to safeguard people and support their well-being. As a result, people receive good support and encouragement to keep independent and healthy.

3. Environment

Summary

People's wellbeing is promoted because they are cared for in an accessible, safe, clean and well maintained environment, with a welcoming and friendly atmosphere. However, people with dementia could be further supported by making doors to bedrooms and bathrooms easily recognisable. The home is near to a large park and all community facilities.

Our findings

People feel valued because they are cared for in a homely, accessible and welcoming environment. We saw that the home was light, well-furnished and decorated; and maintained to a good standard with a rolling programme of maintenance, servicing, and redecoration. There were weekly visits by the maintenance person, who was busy refreshing the paint on doors when we visited. People have a choice of where they spend their time and have equipment to support them. We saw people using mobility aids and handrails and using the stair lifts independently to access their bedrooms on the first and second floors. We saw that some people preferred to stay in their rooms and others moved freely between the lounge and the dining room, or were assisted by staff. There are bathrooms and toilets on each floor, with handrails and raised toilet seats to assist independence and hoists for those who need help to get in and out of the bath. There are 13 bedrooms; three of which have ensuite facilities and all the others have a wash basin. At the time of the inspection, there were 13 people at the home and one of the bedrooms was shared by two people who had chosen to share a room. All the bedrooms have lockable doors and the person's name and photograph on the door helps people to recognise their own private space. The bedrooms we saw were personalised with furniture, mementos and photographs of friends and family. One bedroom was organised so that the layout was almost exactly as the person had their room at home; and we saw that this helped them to settle; reduced anxiety of unfamiliar surroundings and also reduced falls caused because the person had been restless and exhausted. However, as found in the last inspection, the environment is not designed to support people with dementia. For example, all the walls, doors and paintwork in the hallways and on the landings were white, which does not assist people with dementia or older people with deteriorating sight to tell one room or area from another. As a result, we saw that some people became confused and frustrated and needed assistance from staff to guide them in the right direction. The garden has patio areas and seating and people told us that they enjoyed sitting outside in warm weather. The home is close to all community facilities; staff told us that a few people went to the park with their visitors and staff occasionally accompanied residents to a nearby shopping centre. People at Wentworth Lodge experience a comfortable, well maintained environment but improvements could be made to maximise their independence and well-being.

People live in a safe environment. We saw that the home was safe from unauthorised access with a secure front door and enclosed back garden. We were asked to sign in and out and staff asked to see evidence of our identity. Confidential records and personal information were safely stored in the office in locked cabinets or on computer. The home was very clean and since the last inspection, the food hygiene rating has risen from 4 to 5 (the highest score), as food storage and record keeping had improved. We saw risk assessments for the environment and activities to ensure that risks were eradicated or minimised and staff understood the risk management plans. For example we saw that staff ensured people wore suitable shoes, slippers or non-slip socks to avoid slips and falls. We saw that there were restrictors on all windows, covers on the radiators and hot pipes; and thermostatic

mixer valves on all hot taps. Records showed that staff carried out checks for water and fridge and freezer temperatures and the stair-lifts, hoists, electrical equipment, and the heating system had been serviced in the last year. There were weekly tests of the smoke alarms, emergency lighting and the fire alarm system. There had been regular fire drills at different times of the day and we saw that each person had a personal emergency evacuation plan (PEEP). The fire risk assessment was up to date and recommendations from the last fire officer visit had been addressed, including regular checks to ensure fire doors closed over new carpets. People can be confident that the premises and equipment are safe because of good maintenance and proper procedures to ensure the safety of people living in the home, their staff and visitors.

4. Leadership and Management

Summary

People receive clear information about the service to help them understand what is available. The day to day management of the service is well organised; staff receive regular supervision and appraisal to support their work and there are very effective partnerships with other agencies. People can be confident that any concerns they raise will be addressed. Although there was evidence of monitoring of the service, there was no annual report on the quality of care available for residents, representatives of residents, staff, stakeholders or CIW, as required to comply with regulation.

Our findings

People, their families, placing authorities and other agencies know and understand the care, support and opportunities which are available. The statement of purpose and the service user guides set out what Wentworth Lodge offers, including the overall aims of the service. The manager told us that statement of purpose is provided to anyone interested in the service and the service user guide is available to people before they visit the home. People also learned what was available through initial visits to the home and discussion with staff and other people living there. The documents were clearly written and discussion with people, relatives and staff confirmed that they knew about them and understood them. We noted that minor amendments and additions were required for the statement of purpose and there was no reference to the Active Offer for the Welsh language. We discussed this with the manager as all social care providers should now include information on their level of Welsh language provision in the statement of purpose. People, their families and professionals receive good information about the service, which helps them understand what is available and make informed decisions.

People are cared for in service where there is sound management and robust staff recruitment. The registered manager has relevant qualifications and experience and is supported by two senior carers. We saw that there was an open door policy and people and staff readily approached the manager and senior carer for advice and information. Since the last inspection, there have been improvements in staff training in dementia awareness, which staff said has supported their work. We saw that activities were improving and that the manager has requested the use of colour on doors and stimulating materials for discussion. The records we looked at were up to date and in good order. The manager monitored handover records, medication, daily recordings and any incident records. We saw that staff had thorough checks prior to appointment including disclosure and barring service (DBS) checks. The files we checked contained the required information to evidence that staff were suitable to work with vulnerable people. Appropriate references were sought for each applicant and each file contained an employment history, experience and qualifications. The manager was aware of her responsibility to ensure that there were sufficient, qualified and experienced staff on duty. Staff ratios were an issue in the last inspection but we found that there were sufficient staff to care for the current residents. There were also two waking night staff and regular relief staff to provide consistent cover. Staff told us that they were able to meet needs as there were fewer residents and all except one were settled and generally content. People are cared for in a home where the management well organised, and people are protected because staff are appointed following a rigorous recruitment procedure.

Staff are well led and supported and have access to specialist support and advice. Staff told us that they had good support from the manager and that they worked well together as a team. We saw that staff received regular supervision, which included personal development, training needs and goals, the care of individual people and personal issues. Staff appraisals were completed annually and they were all up to date. The manager and the staff team kept in regular contact with health and social care professionals. We saw records of meetings with social care and health care professionals and staff told us that they were supported by district nurses and the care home liaison team in their work with individuals. The well-being of staff is important in this service.

People are able to express concerns and know they will be listened to. We saw that people are given information on their rights to complain when they first visit and the complaints procedure is clear and included in the service user guide. There had been no complaints in the last year. The people we spoke to told us that they were happy at the home and that they had no complaints and we saw that they had no hesitation in expressing their views and opinions to staff or the manager. A relative said, *"It is all good and positive. Trust me, if I wanted to complain I would"*. We saw that the provider was very responsive to any issues raised as a result of routine monitoring, or following incidents. For example positive action was taken to address falls resulting in a marked reduction. We were told that staff had been retrained in medication and audits were carried out monthly because there had been some gaps in records and this resulted in 100% improvement. People can be confident that if things are not right the manager will respond and take positive action to improve things.

We saw that the manager assessed the quality of the service in a variety of ways. For example, monitoring staff performance and paperwork; feedback from people during reviews; feedback from staff during meetings or supervision; letters and cards of thanks from relatives; questionnaires completed by relatives and three monthly monitoring reports by an independent visitor on behalf of the provider. We saw that the monitoring reports included residents' opinions of the service and discussions with staff. We also noted that questionnaires had been sent to relatives. There was however no annual quality assurance report available for residents/representatives of residents, staff, stakeholders or CIW. This is necessary to comply with regulation.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

The registered persons were informed that they were not compliant with the following regulations. We did not issue non compliance notices as we did not note any negative impact on the care of residents.

Regulation 16(2)(n)

The registered person shall consult people about the programme of activities and provide facilities for recreation, based on individual's pre-assessment information and current needs and interests. A more structured engaging activities programme would benefit people living in the home. **We found some improvement in this area. People had been consulted and an activities programme had been developed.**

Regulation 18 (1) (c) (i)

We found that the registered persons were not fully compliant with this regulation as there was lack of evidence to indicate that all staff had received appropriate training for the work they are to perform. This relates particularly to training in caring for people with dementia. **We found that the registered persons were compliant as all care staff had undertaken relevant training in relation to dementia.**

5.2 Areas of non compliance identified at this inspection

Regulation 25(3)

We notified the registered persons that they were not compliant with the regulation relating to the review of quality of care as there was no report on the quality of care available for 2017. We have not issued a non compliance notice on this occasion as there was no significant impact or risk to people living at the home. We expect the registered persons to take action to rectify this and it will be followed up at the next inspection.

5.3 Recommendations for improvement

- Monitor activities to ensure that activities people enjoy can be promoted and developed into a more structured activities programme that more people will engage in.
- Review the 'behaviour and risk' sections of care plans to ensure they include sufficient detail to guide staff particularly where there may be anxiety, frustration or requests for physical contact.
- Ensure that original DNR forms are on files and not copies.
- Consider the use of colour on doors to assist people with dementia or failing sight.
- In the Statement of Purpose:
 - amend the age from 65+ to 60+, update CRB to DBS, update CSSIW to CIW and remove duplication from item 25 – 35;
 - include information on capacity and best interests assessments and the service's status regarding the Active Offer for the Welsh language; and
 - consider changing the words such as 'the elderly' and 'impaired'.

6. How we undertook this inspection

A routine, unannounced inspection was carried out on 12 January 2018.

We based our findings on:

- information about the service held by CIW which included previous inspection reports, self-assessment information completed by the responsible individual and notifications received from the home;
- discussion with to eight people who live there;
- discussion with the manager, a senior carer, and three care staff;
- discussions with two district nurses and three relatives who were visiting a person during the inspection;
- observing daily life, routines and activities;
- observing how staff worked with people and with each other;
- observing two people using the Short Observational Framework for Inspection (SOFI 2) tool, which enables inspectors to observe and record life from a service user's perspective; how they spend their time, their activities, quality of interactions with others and the type of support received;
- checking records for three people;
- checking records for three staff;
- looking around the premises and the garden; and
- checking other records including the statement of purpose, service user guide, samples of policies and procedures, questionnaires for relatives, minutes of team meetings, health and safety records for the premises, reports of monitoring visits, incident reports and complaints records.

We gave formal feedback to the manager by telephone following the inspection.

Further information about what we do can be found on our website www.CIW.org.uk

About the service

Type of care provided	Adult Care Home - Older
Registered Person	Ty Draw And Wentworth Lodges Ltd
Registered Manager(s)	Debra Lewis
Registered maximum number of places	16
Date of previous CIW inspection	7/3/2017
Dates of this Inspection visit(s)	12/01/2018
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No

Additional Information:

This is a service that does not provide an 'Active Offer' of the Welsh language.

We recommend that the service provider considers Welsh Government's 'More Than Just Words. Follow-on strategic guidance for Welsh language in social care'.