



## Inspection Report on

**Shire Hall Care Home**

**Shire Hall Care Home  
Overstone Court  
Cardiff  
CF10 5NT**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

15/09/2023

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## About Shire Hall Care Home

|                                                       |                                                                                                                                                                                 |
|-------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Type of care provided                                 | Care Home Service<br>Adults With Nursing                                                                                                                                        |
| Registered Provider                                   | Hallmark Care Homes (Bute Town) Limited                                                                                                                                         |
| Registered places                                     | 99                                                                                                                                                                              |
| Language of the service                               | English                                                                                                                                                                         |
| Previous Care Inspectorate Wales inspection           | <a href="#">24<sup>th</sup> October 2022</a>                                                                                                                                    |
| 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 and their relatives consistently describe the home as excellent. People receive care in a dignified and respectful way. Nurses and care staff are proactive, responsive and compassionate. Staff know people well and understand how to support them. The dining experience is relaxed, calm and offers a range of choices throughout the week. Food is extremely well presented, there is a knowledgeable, passionate chef and kitchen team in place. People enjoy a service which includes a range of facilities, and activities are available on a day-to-day basis. Extra consideration is given to social isolation, and we saw a commitment to personal and meaningful events and activities for individuals. Dedicated teams within each area ensure the smooth and efficient running of the service. The whole staff team including carers, nurses, housekeeping, activities, maintenance and management hold the same strong values and ethos. We found robust oversight of the service from different levels of seniority. Timely action is taken to address any concerns. There is a real commitment to improvement and we saw the smallest detail be identified and clearly addressed.

## Well-being

People and their relatives have a lot of opportunity to feedback to the service, whether verbally, through meetings or via surveys. Dignity and respect is embedded within the home. People are regularly involved in the reviews of their care and can make changes where and when they need to. People who cannot do this independently receive support from family members and professionals. People are offered choice on a regular basis. We saw a variety of choice offered at mealtimes and with activities.

People have a range of activities to engage in. These can provide a sense of belonging, ownership, control and emotional well-being. People told us they enjoy going to events with their friends to watch singing and dancing. Peoples individual needs are considered and special consideration is applied to meaningful and personal activities and events for people. People are supported to practice their faith. People can engage in activities in the community. The service also encourages volunteers and events which involve and include the local community. Peoples health is monitored and any action required is taken in a timely manner. The dining experience is a relaxed one, where people are offered choice and an excellent level of support from care staff. Food is presented extremley well.

People feel safe and are protected from abuse. Care staff receive a thorough recruitment vetting process and the manager ensures that skills, knowledge and staffs fitness remains current. Care staff have a good level of understanding in how to report concerns. People told us they feel safe and felt confident reporting concerns to the care staff or to management. Relatives told us there is excellent communication between them and the service and felt confident in the management team.

People live in a warm and well presented home. The service is extremely clean and includes a range of spaces and facilities for people to use and enjoy. Personalised bedrooms include an ensuite bathroom. The service ensures the home is safe and well equipped with the appropriate equipment for people to aid in their mobility. There is a good level of oversight from a maintenance person and the management team.

## Care and Support

People told us they are very happy at the home and get along with all of the care staff. People and their relatives describe the service as excellent. One person said, *“If I had to be anywhere, this is where I would choose”*. We saw regular conversations and laughter between people and care staff. Staff treat people with kindness and respect. Staff knock on doors before entering, greet people using their name and use a soft touch to approach, to encourage and to support. People and their representatives are involved in regular reviews of their care. Care plans are detailed, personal and reflective of people’s needs and the life they want to live. Regular surveys, questionnaires and direct feedback opportunities are available to people. Regular resident and relative meetings are facilitated. Online platforms are used to enable people to attend meetings even if they are physically unable or for relatives who may live far away. The service encourages as many attendees as possible so people can have their say.

A dedicated lifestyle team are in place and ensure that regular and diverse activities are available to people. We saw a dedication to supporting people to meet their emotional, social and spiritual needs. People are encouraged to practice and engage in their faith and people are supported to physically attend church. Where people’s mobility may prevent them from doing this social media platforms are used to ensure people can continue with their usual practice and beliefs. Relatives told us that the activities available give their loved one a sense of purpose and enable social interaction. We found some activities are run and facilitated by people living in the home. One person told us there is *“always something different morning and afternoon”*. The team are mindful of engagement and interaction levels and are quick to identify where someone may become socially isolated.

People can enjoy their meals in well laid out dining rooms and receive excellent levels of support from care staff. The dining experience is relaxed and calm. Food is served hot and is extremely well presented. Food is also served on ‘show plates’ so care staff can physically show people what the menu is referring to and provide choice. People told us they enjoy the food and one person said the *‘menu is excellent’*. The chef is passionate about sourcing local and fresh produce. The kitchen team have a good level of knowledge regarding the people they cater for. Food is plentiful and additional snacks are always available.

Food and drink is monitored when required to identify any health concerns. Staff have good oversight of records and regularly monitor people’s health. There are good systems in place to ensure staff know what records are required. An alert system is used to identify when someone may be at additional risk from health issues such as weight loss and skin integrity. Medication is administered in the correct way. There is an electronic Medication Administration Record (MAR) chart in place which is clear and provides excellent oversight regarding the administration of medication. Records include important details such as allergies, to minimise the risk to people. Nurses and care staff appear extremely competent and knowledgeable in their roles.

## Environment

The service has a range of spaces and facilities for people to use. There is an extremely well-presented garden which is accessible to people. We saw people enjoying the garden with care staff or relatives. A cinema room, activities room, pub and café are also available. We saw people regularly use the café with their relatives. People and their relatives told us the fresh, homemade cakes are delicious. People's bedrooms are personalised with their own belongings, these also include their own ensuite bathroom. The housekeeping team in place greet people with kindness and ensure they check in with people before cleaning or hoovering so not to disturb them. There are good infection control systems in place. Care staff wear appropriate personal protective equipment, use of colour coded systems and the laundry is well managed. The service is extremely clean, a relative told us that '*cleaners are here all the time*' and another said, '*bedrooms are always nice and clean*'. One person described the service as '*absolutely wonderful*'.

The service is safe and secure. Doors are secure with use of a keypad lock. People who can safely access facilities alone have the codes needed, enabling them to access areas of the home independently if they choose. People are appropriately risk assessed to use equipment to aid in their mobility. Care staff go through a Moving and Handling knowledge check during their induction. We saw care staff appropriately support people using the correct mobility aid. Care staff do this in a calm, clear and dignified way. Equipment is regularly serviced by professionals. Risk Assessments are in place to ensure that risks are identified and reduced. There is a maintenance person who works at the service to maintain oversight and carry out any work required. On the day of inspection we found some minor wear and tear, such as small marks on walls and some damage to the doors. We saw that action was being taken by the maintenance person to rectify this. Management and the RI also maintain oversight of the environment through observations, visits and audits. People have a personal emergency evacuation plan in place and there is firefighting equipment available throughout the building. During inspection we found some storage doors open which should have been closed however, these did not include any dangerous products at the time and management were quick to act to rectify this.

## Leadership and Management

There are thorough and robust systems in place to maintain oversight. We found detailed records to show that any concerns are quickly acted on. The service goes above and beyond to put measures in place to enable communication with people and their relatives. People and their relatives told us that communication is excellent and they are regularly updated if there are any changes. We saw detailed and thorough reviews in place which involve the person, their relative and/or professionals. People are encouraged to feedback to the service on any areas they feel could be improved and to provide positive feedback also. Picture cards and talking mats are also used to enable people to communicate their feedback in different ways. A 'You said We did' document is produced which responds to any concerns raised and provides reassurance and clarity on action taken by the service to make improvements.

The RI completes regular visits to the service and gains direct feedback from people and from care staff. A Quality of care review is carried out every six months. This document is extremely analytical and clearly identifies areas of improvement, progress and achievement. Regular and transparent audits are carried out to maintain oversight and enable improvement. Trends and patterns are identified and action is taken. We found these records consistently identify the smallest of details to enhance improvements within the service.

People, their relatives and staff feel confident reporting concerns to the manager. Records show that Care Inspectorate Wales are informed in a timely manner of any notifiable incidents and actions taken by the service to prevent any further risk. Staff know how to report concerns internally and externally. The manager has excellent oversight and knowledge of the service.

Care staff are extremely friendly, approachable and kind. Care staff and Nurses know the people they support very well. One relative told us '*The way they look after Mum is great*'. Care staff go through a thorough recruitment procedure. Face to face training during induction is completed as well as online training. Specific training around oral care and competency assessments such as assisting people to eat and drink are also carried out. The manager ensures that regular checks are carried out on staff's Disclosure and Barring Services checks as well as Nursing registrations to ensure they remain compliant. Care staff receive regular supervision and an annual appraisal. Team meetings show open communication between the team and seniors. Team members are recognised for their achievement and we saw care staff and Nurses are recognised through an awards process. One person told us that '*staff are amazing*'.

### Summary of Non-Compliance

| Status              | What each means                                                                                                                                         |
|---------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>New</b>          | This non-compliance was identified at this inspection.                                                                                                  |
| <b>Reviewed</b>     | 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. |
| <b>Not Achieved</b> | Compliance was tested at this inspection and was not achieved.                                                                                          |
| <b>Achieved</b>     | 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    |



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