

Inspection Report on

Pips Lodge

Milford Haven

Date Inspection Completed

01/02/2023



About Pips Lodge

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Silver Springs Support Ltd
Registered places	5
Language of the service	Both
Previous Care Inspectorate Wales inspection	16 July 2021
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People receive consistent support from a knowledgeable and experienced care team. Pip's Lodge is a well managed service which is supported by good governance arrangements. Communication is strong and care workers are supported by their manager and receive regular structured supervision. Staff recruitment supports safe practice and care staff have good access to training to ensure they are sufficiently skilled to carry out their roles.

People receive support and encouragement to lead active lives and make daily choices. Staff treat people with dignity, respect and kindness and relatives feel assured care provided is of a good standard. Personal plans provide clear information and direct care workers on how to best support individuals. The management of medication is effective and health needs are addressed promptly.

The service provides sufficient staff to meet people's individual needs and support them to lead fulfilling everyday lives. Care staff receive a good level of training that gives them the knowledge and skills to provide the best possible care. Information about the service is available and accessible to people. There are clear quality assurance systems in place to promote the safe running of the home and maintain a good standard of care.

Well-being

People are supported to have as much control over their day-to-day lives as possible. The service uses difference communication techniques to help people understand information and assist them to make choices. We saw care workers supporting people to be active and to do things they enjoy. The service consults with people, or their representatives, about how they want to be supported. We saw people's preferred routines are set out within their personal plans. Care records include details about people's backgrounds, which care workers are very familiar with. The Responsible Individual (RI) and managers ask people about their experiences during quality audits, to make sure the service is meeting their needs and expectations.

The service promotes people's physical and emotional wellbeing. Personal plans are detailed, person centred and contain information on current needs. Reviews consider changes in the provision of people's care and evidence that people and/or their representatives are involved. Prompt referrals to healthcare professionals and good medication management support people to remain as healthy as they can be. Daily routines are mindful of promoting healthy lifestyles and diets. Care workers ensure people occupy their day be participating in a range of activities they enjoy. People are supported to maintain contact with relatives and key individuals as often as they would like.

People live in accommodation that suits their particular needs. The environment is homely and comfortable. Mobility aids are in place where needed and rooms are sufficiently spacious to allow their safe use. People are able to access indoor and outdoor communal areas. Care workers support people to have regular outings from the home. All rooms seen, both communal and private, were clean, well maintained and appropriately furnished. Regular environmental and safety checks are carried out.

Measures are in place to protect people from harm and abuse. Appropriate preemployment checks are carried out to make sure any new staff are suitable for care work. Records show that staff are required to complete safeguarding training during their induction programme. The service has a safeguarding policy in place. People are cared for by appropriate numbers of staff who have received a wide range of training. The service follows Deprivation of Liberty Safeguards (DoLS) procedures, which ensures any restrictions people are subject to are lawful.

Effective governance arrangements are in place to ensure people receive a consistently good service. Staff experience good communication and support from senior members of the team when required. There are good arrangements in place to support staff through regular formal and informal supervision. Staff feel well trained and supported. Quality assurance processes are in place. The Responsible Individual

(RI) maintains regular communication with the home and has effective quality monitoring arrangements in place.		

Care and Support

People living in Pip's Lodge are treated with dignity and respect by staff who know them well. We saw sufficient numbers of care staff working in the home and the staff rota reflects this. Care staff are very familiar with people's needs and understand their likes, dislikes and preferences. This is supported by documentation, including personal profiles and background information. We saw care workers engaging well with people through conversation and participation in daily activities. We could see that stimulation and occupying people's time in a meaningful way for each individual was a priority. Care workers are able to distract or reduce anxieties through sensitive techniques gained from knowing people well.

People experience a good standard of care and support. Personal plans are person centred, detailed and give a real sense of the person. Initial assessments and personal plans include input from professionals, people and/or their representatives. Personal plans are reviewed frequently to ensure they remain current and people and their representatives are clearly involved. People's individual outcomes and goals are clearly identified and the service places emphasis on maximising people's strengths and achieving positive outcomes. Any identified hazards are identified together with the means of minimising these risks to self or others. We saw strong evidence of input from specialist health and social care professionals. Any health changes are addressed promptly.

Policies, procedures and application of hygienic practices that reduce the risk of infection are in place. Staff demonstrate a clear understanding of infection control and the use of personal protective equipment (PPE). Care workers wear appropriate PPE and follow correct procedures. They maintain appropriate standards of hygiene and cleaning schedules are in place with oversight from the manager. The home has sufficient stocks of PPE which is readily accessible to all care workers.

The service has systems in place for the safe management of medication. There is an appropriate medication policy and procedure and regular audits are carried out. Medication is stored safely. Care workers are trained in medication administration and staff competency checks ensure people receive the correct medication and practice remains safe.

Environment

The home is welcoming, clean and comfortable. We found the layout and furnishings within private and communal rooms to be appropriate for people's individual needs. People are able to access the spacious garden, which is private, level and enclosed. The kitchen and dining areas are homely in nature, well equipped and provide a natural area for people to meet and socialise if they want to. There is sufficient space within the home for people with mobility issues to move around safely. Bedrooms are large, light and airy and reflect the personality of the occupant.

The home environment is safe and secure. Health and safety arrangements are good and the service is well maintained. Visiting arrangements are robust and authorised visitors are actively encouraged. All visitors must ring the doorbell before being admitted into the home and are asked to sign a visitor's book. There are good maintenance arrangements in place. Cleaning schedules are in maintained and all areas of the home were clean, free from unnecessary clutter and odour free.

People have personal emergency evacuation plans (PEEP's) in the event of the need to evacuate the building. Care workers have ongoing fire safety training. Cleaning substances hazardous to health are stored appropriately. The service provider ensures supplies are of a sufficient level. Health and safety checks are carried out by the manager and the responsible individual.

Leadership and Management

People are cared for and supported by sufficient numbers of care staff. We saw staff had time to spend talking to people in a calm and unhurried manner. All care staff spoken to said that they felt they had sufficient time to spend with people and did not feel that they had to rush the provision of care. People value their relationships with care workers. We saw care workers actively listening to people; they acknowledged what was important to them and discussed how they could achieve their daily goals. People consistently told us they are happy with the support they receive.

Care workers are safely recruited to the service. All staff files looked at contained evidence that appropriate references had been sought and Disclosure and Barring Service (DBS) checks had been carried out prior to employment commencing. Care workers receive appropriate training and support to enable them to carry out their roles effectively. Training records show, and discussion with care workers confirmed, that staff complete mandatory and specialist training relevant to their roles and the needs of the people living in the home. This includes safeguarding, infection control, mental health awareness, autism awareness, positive behavioural support and epilepsy awareness. Staff receive regular formal supervision which is well documented and allows staff to reflect on their personal achievements, aims and aspirations, training needs and the experiences of the people they support. Annual appraisals also take place and care workers are encouraged to participate fully in these. Care workers told us that they always have access to informal support at any time, from colleagues, the managers and the RI. Care workers told us that they feel sufficiently trained and supported to carry out their work effectively. Staff morale within the home appears to be good with care staff consistently told us that they enjoy their work.

Information about the service can be accessed easily. The service has up to date policies and procedures. Care workers are required to read these and are informed of any changes or updates. We found that the service is being provided in line with its statement of purpose.

Good governance arrangement are in place and standards at the service are closely monitored by the management team and the RI. Records show that the RI assesses service standards and considers feedback from people using the service during quarterly visits and six monthly quality of care reviews. The RI is very present within the home and knows people and care workers well.

Summary of Non-Compliance		
Status	atus 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	N/A
	inspection	

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