



## Inspection Report on

**Honeyhome**

**Honeyhome  
Milford Haven  
SA73 3UF**

## **Date Inspection Completed**

24 January 2022

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## About Honeyhome

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Sharon Davies
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

### Summary

People who have made Honey Home their home are cared for in a clean, comfortable and well-maintained property. They are safe and the environment is calm and homely.

The Responsible Individual (RI) is also the manager and they are both professional and experienced. They have a very good knowledge of the people living in the home and those caring for them.

The care team are friendly, respectful and motivated. Care workers describe their work as “*like being at home*” and say the care workers are a “*good team*”. People are cared for in a person centred way and are able to make some choices about aspects of their care.

People are able to things that are important to them to help make their days meaningful.

## Well-being

People are safe and protected from abuse and harm. Each member of staff knows the action they must take if they suspect a person is at risk. They have confidence their manager will take the appropriate measures to report any concerns and take the steps necessary to safeguard people. One relative was wholly complimentary about the staff and told us *“they would never put X at risk... they are on the ball”*.

Access to, and exit from the home is controlled by staff, which ensures only those with a legitimate reason for being in the home are allowed in. People and their relatives are satisfied with the measures the home is taking to maintain people’s safety throughout the pandemic. All staff wear the appropriate PPE (personal protective equipment) and visitors are required to show evidence of a current negative lateral flow test (LFT).

People enjoy very good relationships with those who care for them. We saw some relaxed and friendly interactions, which demonstrates a rapport had been built. One person was enjoying a joke and banter with care workers. One relative described the staff as *“very good”* and people told us staff are *“my best friend”*. Another relative told us *“I can’t speak highly enough”* when talking about the staff and all the relatives are confident people living in the home are in good hands with those employed to work there.

Care workers are motivated by the people they care for, with one telling us *“it’s lovely... like being at home”* and the manager described the people they support as *“part of my family”*.

Staff have a good knowledge of people; their backgrounds; their likes and dislikes as well as their current needs.

People have control over their day-to-day lives. They choose when to go to bed and when to get up. There is a choice of meals and people are encouraged to take part in activities. Visitors told us they are kept informed about any changes to people’s needs and feel involved in their care and support.

## Care and Support

Care plans are held electronically and reviewed annually unless there are any changes to people's needs. Care plans set out the signs to look for which show people may be distressed or becoming unwell. They provide information about the support people need in respect of their personal care and daily routines. Relatives think care workers know people very well and our observations of interactions corroborated this.

Daily entries are written in individualised diaries and they are mostly person centred.

Details of what people ate and how they spent their time is recorded.

Care workers have time to read records and find them helpful. The manager also told us people's needs do not change greatly and because they are such a small team who have worked in the home for some time, they know people; their needs and what is important to them.

People living in the home describe each other as their friends. Two people told us how they enjoyed a recent holiday, and how they enjoyed being with each other and the staff. Each person also describes the staff as their "*friends*" and cards written by one person states how fond the person is of those caring for them. One person described staff as "*lovely*" and another told us a staff member is their "*best friend*" and we saw one person having a joke with the staff.

There is an understanding of the importance of good nutrition. People's weight is monitored and people are able to exercise some choice about the meals they have. We saw the lunchtime meal was individualised depending on the wishes of each person. We have asked the provider to consider ways to reduce the reliance of processed food to ensure the meals are as healthy as possible.

Some activities have been limited due to the pandemic but people have still been able to do some of the things they enjoy. These include picnics at local parks and beaches as well as activities in the home. We saw photos of one person enjoying some baking and one person was proud to show us their knitting. One person told us they enjoy karaoke and time is also spent watching films; playing games and colouring. Relatives we spoke with feel people do have things to do and appreciate the photographs sent by staff of people's participation in activities.

People's physical health needs are met. Moving & handling, and pressure relieving equipment is available and appears in good condition. One person is attending an appointment for a new bespoke wheelchair.

Referrals are sent to other health professionals and we saw one person has recently been reviewed by the Speech and Language Team and advice given to the care workers.

Optician and dental appointments are attended and people have had their annual health check with their GP.

## Environment

People live in a home which is suitable for their needs. It is clean, comfortable and well maintained. Bedrooms are on the ground and first floor. There is a large lounge and people are able to comfortably spend time in their bedrooms if they choose to do so.

Furnishings are in good condition and the home is well decorated. One person's bedroom has recently been decorated in their chosen colour. Other furnishings and ornaments personalise people's bedrooms.

A new garden room has been built, which, we were told, is regularly used by people.

Care workers are responsible for keeping the home clean and people and their relatives are satisfied with the standards of cleanliness throughout the home.

People are safe from anyone unauthorised from entering the home as visitors are required to be allowed entry by a member of staff. Visitors are also required to provide evidence of a current lateral flow test (LFT) to reduce the risk of Covid 19 being taken into the home.

Medication is stored in a locked cupboard under the stairs. While small, the area is secure and do not have any difficulties administering medication from the area. The temperature of the room is checked daily.

## Leadership and Management

The RI/manager is visible in the home. They have a good knowledge and understanding of the people living and working there, as well as what is happening on a day-to-day basis. The manager has strong values which are shared by the staff team about providing person centred care, emphasising comments made by care workers about the people in the home being like “*family*”.

People, their relatives and care workers find the manager supportive and responsive. One relative described a worker as “*brilliant*”, and considers the measures the home has taken to keep people safe during the pandemic to be excellent.

One care worker told us they have a lot of confidence in the manager and feels able to raise any ideas or concerns they have.

There are some governance arrangements to monitor quality. The manager completes a report on a regular basis which considers people’s views of their care as well as feedback from other professionals.

Care workers say there are enough staff on duty. The team is small and there are always two workers on duty during the day and one sleep-in worker at night. Some care workers do additional shifts to cover any shortfalls and the manager covers any shifts if needed.

Relatives consider staff to be appropriately skilled. We saw training records which confirm most training is up to date. Some workers have requested, and received training in areas to meet people’s emerging or future needs, such as dementia care.

Staff are appointed following a safe recruitment process. Staff files would benefit from some house-keeping, as they contain old and out of date information. Not all files contain photographic identification. The manager provided an assurance the one outstanding DBS check would be applied for immediately following the inspection.

The manager has agreed to review the files to ensure they contain only current and relevant information. Care workers get feedback on their work as part of supervision and informally.

### 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	N/A



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