



# Inspection Report on

**Safe Haven Care and Lodges Ltd**

**Newport**

## **Date Inspection Completed**

10/05/2023

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## About Safe Haven Care and Lodges Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Safe Haven Care Home and Lodges Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">[5 February 2020]</a>
Does this service provide the Welsh Language active offer?	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

Ty Hafod Tudor is a small service which focuses on providing person-centred care and support. The service has a small but stable staff team who know people well.

People are happy in the service and have positive relationships with the staff. There is consistent presence in the service from the responsible individual (RI) and manager, who have positive relationships with the people living in the service. Staff are happy and well supported in the service and feel positively about working there. There are good opportunities for training and development within the service, and links with a local collage and schemes to support staff into employment.

The service is working towards the Active Offer, and currently has three staff who can speak Welsh, and has added Welsh language signage around the home. There is a Welsh version of the statement of purpose available.

## Well-being

People are happy in the service. People told us they like living in the service, we saw people chatting, joking, and enjoying time with their care workers. People's communication is responded to positively, with warmth and affection. People have good rapport with their care workers. There is good continuity of care in the service, with a small team of care workers who know people well. The manager and the care workers have built meaningful relationships with people over time.

Care workers are polite and respectful to people, protecting their dignity in all aspects of care and support. We saw people supported at lunch to eat with one another at the large dining table, adjustments were made to enable people to sit together and have their meal in a relaxed and friendly atmosphere.

People's wellbeing outcomes are being met in the service. People choose how to spend their time and focus on what matters to them. However, there is room for the service to develop more robust systems for setting and monitoring wellbeing outcomes with people. People have activity plans in place and these are developed with people, and in a format that meets their needs. We saw a mixture of written plans and a planner made with symbols.

The service is laid out with plenty of space for people to engage in group or individual activities to suit their preferences. We saw people spending time with staff preparing the shopping list and using the lounge for sensory activities. However, some of the environment needs updating, the RI told us about their plans for these updates, and we look forward to seeing these at the next inspection.

People enjoy activities which are chosen and led by them. Care workers check with people how they want to spend their time and support them to try different activities. People and their care workers told us about their recent coronation party, and the games they played, people told us "*I liked the bingo with the pictures,*" referring to a coronation themed bingo game organised by the manager.

People feel safe and looked after within the service. We saw feedback and compliments provided to the service from families and visiting professionals. Families can visit the service when people want.

## Care and Support

Personal plans are clear and provide details on people's preferences. They contain social histories which give a sense of who the person is. Personal plans reflect needs identified prior to admission, as well as ongoing risk assessment and planning. People contribute to their personal plans through meetings and reviews, and families are included. The personal plans help care workers to support people's wellbeing outcomes, however there is room for service to develop more robust systems for setting and monitoring people's personal wellbeing outcomes. Plans and assessments are reviewed and updated, however there are minor inconsistencies in the frequency of reviews, and the recording of changes and updates. The manager has assured us that this is something that will be addressed.

People have good access to health care services and support. Where additional or specialist needs are identified, the service is proactive in collaborating with external professionals as well as families. We saw specialist communication systems and specific guidance for exercises and movement. Care workers and the manager were knowledgeable on how use these specialist approaches.

People are supported safely with their medication, which is stored appropriately and safely. There is daily oversight and management of the medication and medication administrative records (MAR) charts are completed accurately, and recording is clear.

People receive care as and when they require it, and there enough staff present within the home to ensure needs are met and people are happy. There is one call bell in the home and this is answered swiftly. People told us they felt good knowing staff come when they call.

Care workers and management have good working relationships with people. Staff are kind, caring and promote independence. We saw people interacting happily and playfully in different areas of the service. Management are familiar with people's preferences and have built positive relationships, enabling them to provide direct care and support when needed.

There is an orientation board on display in the dining area which provides information on all aspects of the day, including who is working, what activities or appointments are scheduled. People told us they like to be able to see this and refer to it during the day. Activities are chosen and led by people.

There are no set menus for people. People are actively involved in the planning and shopping and decide at each mealtime what they would like to cook and eat. People are actively supported to take part in this aspect of the running of the service. People told us "*I like doing the shopping list.*" We saw that food choices are recorded each day to support oversight and ensure people are eating well.

## Environment

The environment is safe and appropriate to the setting, visitors are asked to sign in on entry, and ID is checked. The service is set in woodland and offers a quiet and private location for people to enjoy both inside and outside the home.

People's bedrooms represent their personalities and interests. People can decorate bedrooms as they please and most have ensuite facilities. Some work is being undertaken on renovating one of the bathrooms and the empty bedrooms ready for two new residents. The kitchen is clean and tidy and we saw pictorial prompts for a daily routine in one person's bedroom to help encourage their personal care. There are lots of sensory items around the house and two lounges providing people space to socialise or spend time on their own. Lots of arts and crafts activities are available in the conservatory.

The service is accessible for the use of a wheelchair; however, some corridors and doors are narrow. There is a ramp and path into the garden for people to come and go from the service and spend time outdoors. The manager explained there is a plan to extend the patio to make it easier to navigate in a wheelchair, and to provide more seating if the service is at full occupancy.

There is a "*past and present*" table featuring pictures of current residents and the two residents who recently passed away. Staff and people feel positively about having this space in the environment.

Some communal areas look a bit tired with scuffed walls and marked paint work. The responsible individual explained the plan for updating the environment, and work is underway in some areas of the service.

There is good oversight and management of the health and safety systems within the environment. The service's safety certificates are in date and there is a process and plan for maintenance, however, there is room to embed a clearer system for auditing and oversight of systems. Moving and handling equipment is stored safely in the service. The service carries out fire drills and has evacuation packs in place to ensure people are evacuated safely in case of an emergency. The manager has recently undergone training to support them to manage health and safety risks in relation to fire, and this is evident in the recording of processes and procedures undertaken in the service.

## Leadership and Management

People benefit from leadership and management systems in place. People and care workers have positive relationships with the manager and the RI. There is management presence within the service each day. Care workers told us they feel confident there is someone there if they ever need support.

The service has a positive and welcoming culture. Care workers told us they feel supported and that *“it doesn't feel like you are in work.”* Care workers are complimentary of the manager, and the support they are given to fulfil their roles and learn new skills. One care worker told us they struggle at times with understanding written elements of training, but the manager always finds a way to support them to understand and will find ways of demonstrating things in practice to help them.

Care workers receive induction training in line with social care Wales, and care workers told us the *“training is great,”* especially the shadow shifts they completed when first starting in the service. Care workers are happy in their roles and receive daily support and frequent informal supervisions. Formal supervision takes place in the service, however the process of recording and structuring the supervisions could be improved to maximise support to the care workers.

There are adequate governance arrangements in place to support the smooth running of the service. The RI visits the service daily; however, they record their visits quarterly in line with regulations. The RI carries out audits and analyses trends in the service to support them to improve the delivery of care and support, as well as provisions for staff and the environment. We saw evidence that the RI had identified areas for improvement and they explained their plans for addressing these. The quality assurance process in place covers a range of service areas and provides clear structure for the governance and oversight of the service.

There are enough staff on duty to support people effectively and staff suitably recruited, trained, and supported to carry out their duties. However, the service links with local colleges to provide opportunities for care workers new to the sector and must ensure that the same recruitment processes are followed for all care workers in line with the Regulations.

### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
73	There was no evidence to show the responsible individual had visited the service on a three monthly basis.	Achieved

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