

Inspection Report on

Hermitage House Care Home Limited

The Hermitage Salop Road Welshpool SY21 7EP

Date Inspection Completed

09/12/2022

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About Hermitage House Care Home Limited

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Hermitage House Care Home Limited
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	12 th and 28 th July 2022
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

This was a focussed inspection to check the progress made by the provider with regards to the outstanding non compliance around care records and recruitment processes.

People are generally happy living at The Hermitage, they feel that they are being listened to and because of this there is more going on. Staff support people with respect and engage in conversation. People have access to papers, magazines, games, and puzzles.

Improvements have been made to assessments and support plans with people or their representatives able to contribute and be included in the review process. Documents contain information about the person, what is important to them and how they would like to be supported.

Risk assessments ensure staff know how to support people safely and help to identify changes or concerns which are addressed in a timely manner.

Recruitment checks are in place to ensure that staff recruited are suitable to support people in the service safely.

Well-being

People benefit from being supported by staff who know them well. This is because the information in care files is person centred with residents, their family or representative involved in the process. Records inform care staff how the person wants to be supported and what is important to them.

People are kept safe as records identify potential risks and how to support people in managing the risk. Risk assessment tools are reviewed and updated monthly and if required additional support is sought from other professionals. Staff ensure people's health and wellbeing needs are met by communicating with external professionals and following treatment plans or guidance.

People can spend their time how they want to with organised activities and staff supporting people to access the community. People told us they like to read papers, magazines and play dominoes. The service has been decorated for Christmas and people were looking forward to some seasonal activities.

Recruitment processes ensure people are supported by suitable care staff.

Care and Support

As this was a focussed inspection, we have not considered this theme in full. This will be examined fully at the next inspection.

At the last inspection we issued a priority action notice because we found records were not reviewed or reflective of people's current needs. We had found people were not included in the development or reviewing of support plans and their personal outcomes were not considered. Risk assessments were not reviewed when changes occurred and so staff did not have accurate information to work from which put people at risk.

During this inspection records show people and where appropriate their representatives, are involved in the assessment, care planning and review process. People are asked about their history, what was important to them and what is important now. People can say how they like to spend their time and how they want their independence to be supported. Records show people and their representatives are offered copies of documentation and are asked to sign records where possible. Support plans detail risks to people and how they should be managed to keep people safe. Risk management tools monitor falls, nutrition, and skin care, they are reviewed monthly and updated when changes occur. We saw where a concern was identified, medical advice was sought in a timely manner and advice acted on to ensure people's health needs are met.

People can engage in activities as there is now an activity coordinator three days per week. People tell us they do quizzes, play bingo and have crafting sessions. People's hobbies are encouraged, and one person has an area where they hand make home furnishings. On the day of our inspection someone had been Christmas shopping in the morning, and another was going into town to the bank in the afternoon. The provider has created an activity planner which is available in Welsh and English. People tell us there are papers and magazines to read. One person said, *"They are starting to get organised with what we want, what we like to do, things are happening regularly."*

Environment

As this was a focussed inspection, we have not considered the environment in full. We will examine this theme fully at the next inspection.

At this inspection we found the service to be a comfortable temperature, people were dressed appropriately, and blankets were available if needed. The provider has invested in two new commercial boilers to replace the existing ones, however adverse weather conditions have caused a delay with installation. The service has a working boiler in place which the provider assures us is supplying the home with heating and hot water at a reduced capacity. We have been assured that additional measures are in place to keep the service and people warm until the new boilers can be installed.

Leadership and Management

As this was a focussed inspection, we have not considered this theme in full. This will be examined fully at the next inspection.

At the last inspection we issued a priority action notice as we found adequate checks were not being completed as part of the recruitment process to ensure staff were suitable and people were safe. The provider has since put measures in place to ensure that satisfactory references and a Disclosure and Barring Service (DBS) check are received prior to people's appointment in the service. Recruitment files contain appropriate records of staff employed within the service which are stored securely for confidentiality.

Summary of Non-Compliance			
Status	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		
35	The provider does not complete checks as required before staff start working at the home.	Achieved		
15	The provider does not ensure people are involved in care planning and assessment. Records are not reviewed and are not an accurate reflection of people's needs.	Achieved		

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	
36	The provider does not ensure staff are provided with regular supervision, an annual appraisal or necessary training.	Reviewed	
60	The RI does not notify CIW of significant events in the home as required, including changes in the management arrangements.	Reviewed	
19	The provider has not produced an up to date guide to the service for people who live or are considering living at the home.	Reviewed	
44	Further improvements to the environment are needed to provide an adequate standard of living.	Reviewed	
80	Measures are not in place to regularly check the quality of the service.	Reviewed	
21	Activities and opportunities for social stimulation, including going out of the home are not provided.	Achieved	

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