



Inspection Report on

The Rookery

**The Rookery
School Hill
Newcastle Emlyn
SA38 9LL**

Date Inspection Completed

20/12/2022

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About The Rookery

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Bramble Bay Ltd
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	[Manual Insert] 6th 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 living at the Rookery can be assured that the care and support they receive is person centred and holistic.

People and their representatives are respected, and their opinions are valued. They are consulted on matters that may impact on them.

Personal Care and support plans and Risk assessments are up to date and reviewed regularly to reflect the needs of individuals and are in line with regulations.

Care staff have a good understanding of their roles and responsibilities and receive relevant training for their job. They feel supported by managers and there is an open-door policy where care staff feel confident that any concerns raised will be taken seriously and addressed appropriately.

Managers and the Responsible Individual (RI) have good oversight of the service and are committed to achieving the best outcomes for people living at The Rookery. Managers are open to new ideas and continually seek to improve and develop the service.

There is a programme of refurbishment and redecoration to improve the physical environment and some work has been completed.

Well-being

People's wellbeing and happiness is of fundamental importance to all staff and is at the heart of the care that is provided. People and/or their representatives told us that they are happy, and this was reflected during the inspection. We saw positive interactions between care staff and those they support. A staff member told us, *"People's well-being and happiness is put first."*

Independence is valued and care staff encourage people to do as much as they can for themselves whilst up to date risk assessments keep them as safe as possible. We saw people being supported to choose and prepare their own lunch. Healthy eating is promoted however the staff allow people to make their own choices whilst providing them with the information and guidance required to make an informed choice. A relative told us *"He has been very reliant and solitary in the past but now he will go into the kitchen and make a cup of tea"*.

People's voices and opinion's matter and are taken into consideration when making decisions regarding the way the service is run and how care and support is to be provided to individuals. We saw people discussing with staff members who their new key worker would be. One person told us *"I'm happy here, I talk to staff if I'm not happy"*.

People are respected as individuals and enabled to do what matters to them. One person undertakes volunteering in a local shop and has a cleaning job in a local establishment in the busier season. Being a part of the local community is encouraged and people are able to access the local town to go shopping, have their hair done or go for lunch, independently or with a support worker. There is a sense of belonging, within the home and the local community. A representative told us, *"It is their home, not a Care facility"*.

Care and Support

Thorough assessments are undertaken prior to a person moving into the service to ensure that their individual needs can be met and that they will fit in with other people's needs and personalities at the service. People also have the opportunity for 'Trial Visits'.

Management feel it is important to gain as much background knowledge as possible and will go the person's home environment to undertake a full assessment with the person and their representative if this is appropriate. We saw evidence that Health and social care professionals involved in the person's care and support also contribute to the initial assessment and ongoing reviews.

We saw very detailed individual care plans and risk assessments. All aspects of care and support are assessed with details of a person's likes, dislikes and how the person wants to be supported and how privacy, dignity and choice will be met. Personal plans we saw had detailed behaviour plans with strategies on how to manage more challenging behaviour.

The Care plans we saw were up to date with evidence that people are involved in the review process. Pictures and diagrams are used to aid understanding and enable people to contribute to their individual plans. Care and support is very person centred and people have outcomes/goals that they are empowered to achieve. These are reviewed with the individual on a monthly basis. One care staff member told us, *"They get to do lots here"*.

People's representatives are welcomed by the staff and management encourage them to be involved in the person's care planning and reviewing where appropriate. One relative has been working collaboratively with management to create training videos for staff to ensure they understand the best way to support the person's individual and unique needs. They told us, *"They (management) are very receptive to new ideas and there is a two-way communication"*. Another family member told us, *"Communication is extremely good and they are very good at noticing changes in behaviour and if he is out of sorts and will inform me"*.

Environment

There are ongoing refurbishments and redecoration within the home. Some reorganisation of rooms is also ongoing with the main office moving up into the attic space. This has freed up additional space and there are plans to develop a Sensory room and an additional bedroom that will be available to people for respite breaks.

People are being encouraged to choose how they would like their bedroom decorated and some new furniture has been purchased with plans to purchase additional items chosen by individuals. We saw people's rooms personalised with their belongings and chosen soft furnishings. A relative described the environment as "*Homely and cosy*".

Work has commenced to tarmac the front drive area and there are plans to put a new fence to enclose the garden. A trampoline is planned for the garden to enable people to take part in 'Rebound therapy' sessions which will provide many benefits for people with Autism and other health conditions.

There is refurbishment ongoing in the kitchen. We saw art and craftwork that people had created on display in the kitchen.

Safety certificates and Audits are in place for the building, the services and equipment to ensure it is safe and fit for purpose.

Medication is stored correctly, and we saw evidence that temperature checks are undertaken regularly. COSHH materials are also stored safely and securely.

Leadership and Management

The RI has good oversight of the service and the manager and RI have systems in place to ensure that they have effective oversight of the service. We saw evidence that policies/guidance have been reviewed following the previous inspection and people have the correct information available to them. Records seen evidence that Audits are being undertaken to ensure people's safety and well-being is promoted. Updating of records and policies/guidance is ongoing.

Training records show that care staff are on the whole up to date with the required training and staff spoken to confirmed that they have received induction and ongoing training and were clear on their roles and responsibilities. There is a robust recruitment system in place and the necessary checks and references are obtained prior to staff commencing employment. These include Identification documents and Disclosure and Barring Service (DBS) checks. People using the service are involved when recruiting care staff and their opinions are valued.

Staff feel supported by management and are encouraged to discuss any concerns they have. A 'Record and report' system has been introduced and this has improved relationships between staff and there is open communication throughout. One staff member told us, *"The culture has changed dramatically and is much better now, it is resident focused. I like to have someone I can approach and be honest with and I've got that"*. Other comments included, *"They are the most caring managers I've ever had. I can be open and honest with them, I can bring up anything, it's the best place I've worked"*, *"The managers are really helpful, I can chat with them about anything"*. Staff have regular one to one supervision sessions in line with legislation. Managers are also available as and when required for staff, people living at the service and their representatives.

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

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
36	Service provider does not maintain a clear record of core training or specialist training required to support people in the service	Achieved
16	The RI does not ensure personal plan are reviewed as and when required but at least every three months.	Achieved
12	The service provider does not ensure that the content of the policies and procedures which are required to be in place are kept up to date with the correct information and are clear.	Achieved
74	The responsible individual does not ensures that systems and processes are in place which enable them to collate information about the service and any areas that may need closer observation/consideration and/or improvement.	Achieved

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