



Inspection Report on

Pembroke Haven

**Pembroke Haven Residential Home
Essex Road
Pembroke Dock
SA72 6ED**

Date Inspection Completed

12/07/2023

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About Pembroke Haven

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pembroke Haven (Residential Homes) Ltd
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	
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

People are happy with the care and support provided at Pembroke Haven and speak highly of care staff. Care staff treat people with dignity and respect and have a good understanding of the needs of the people they care for and support. Care documentation is accurate and up to date, helping care staff deliver good quality care. Care staff feel supported in their roles and receive training so they remain sufficiently knowledgeable and skilled. A safe recruitment process ensures care staff have the necessary skills and qualities needed for working in the care sector. Governance and quality assurance is overseen by the Responsible Individual (RI) who visits the service regularly to discuss provision with people and staff. Written information such as policies and procedures are kept under review and guide staff to ensure best practice is followed. The environment is maintained to a good standard and promotes the independence and well-being of people living at the home.

Well-being

People are protected from harm and abuse, as far as is possible. People have risk assessments and management plans in place, helping to keep them healthy and safe. Care staff receive safeguarding training and there is a safeguarding policy which is aligned with current national statutory guidance. Care staff we spoke to said they are aware of their safeguarding responsibilities and the process for reporting concerns.

People are supported with their health and well-being and their independence is promoted whenever possible. Care staff know the people they care for well and can recognise any changes to their health and well-being quickly. We saw evidence that advice is sought from relevant professionals to promote people's physical and mental health. Medication management systems are in place, ensuring people's medication is stored and administered safely.

People are encouraged to voice their opinions and are treated with dignity and respect. People we spoke to gave an informed account of the care and support they receive at the home. People and their relatives or representatives are involved in their care planning and contribute to reviews of their care documentation. The personal plans we viewed were up to date and reflected people's needs. We received positive feedback from people and family members regarding care staff, indicating they are kind, considerate and respectful.

People are encouraged to be as active as possible and are supported to participate in activities which take place within the home. An activities organiser has recently been appointed and it is anticipated that trips out of the home will be arranged to complement the activities already taking place within Pembroke Haven. We saw a very well attended bingo session on the afternoon of our inspection. A large interactive iPad is available for people and has been used by people to enhance existing interests and encourage new ones, both on a collective and individual basis.

People live in a home which supports their well-being. There is a welcoming atmosphere within Pembroke Haven and it is comfortable and clean throughout. People are encouraged to personalise their rooms and we saw that bedrooms contained a variety of items such as ornaments, photographs, pictures and small items of furniture. The home is maintained to a good standard. An ongoing programme of maintenance, checks and servicing promotes environmental safety.

Care and Support

People living at the service have personal care plans in place. These set out the best ways of supporting people to achieve their individual outcomes. Care plans are person centred, meaning they are specifically tailored to each individual. Risk assessments are also included. These highlight potential risks and strategies for keeping people safe. Care staff we spoke to told us that care plans contain the right level of information for them to provide effective care and support. Personal plans are reviewed to ensure they remain relevant. We saw evidence people and/or their relatives or representatives participate in care planning and reviews, where they discuss the effectiveness of the plan and any changes which might be necessary.

On the day of inspection there appeared to be sufficient care staff on duty to meet the current assessed needs of people living in the home. Care staff told us however that there are occasions when they feel short staffed, particularly if a number of staff call in sick at the same time and at short notice. It was noted that there are two staff on duty during the night-time. The RI gave assurance that consideration is being given to additional staff being on duty during the night-time to ensure the continued safety of people at night.

People have good relationships with care staff. We observed very positive interactions between people and care staff throughout our inspection. It was evident care staff know the people they support well and are familiar with their needs and daily routines. We saw care staff engaging with people in meaningful conversations, speaking in a friendly, informed and respectful manner. People and relatives provided complimentary feedback regarding care staff.

Medication management systems are effective, ensuring medication is stored and administered safely. Medication is stored securely and temperatures are recorded. People have medication support plans detailing how and when they take their medication. They also contain information about their medication and any risks associated with it. There is a medication policy and care staff receive training to help them administer medication in line with best practice guidance.

Written information is available for people to view. The statement of purpose sets out the service's aims and objectives and evidences how it can meet the range of needs which are catered for. People are informed about the ways in which any concerns or complaints can be reported.

Environment

Pembroke Haven can accommodate up to 33 people. People benefit from living in an environment suited to their individual circumstances. The home is purpose built and access throughout the building is good. A number of communal areas are available for people to use, enabling them to socialise or spend quiet time if they so wish. People who enjoy socialising were seen enjoying the company of others and interacting with them and with care workers. Care workers know people well and are able to assist them to areas or activities which they enjoy. Wide corridors enable people living with dementia to walk around freely and they can be easily observed by care staff. Bedrooms are personalised with familiar items and family photographs to put people at ease in their surroundings. The home was clean, clear of clutter throughout and there were no malodours. We spoke to members of the domestic staff who were enthusiastic about their work and had a good understanding of the importance of their role within the staff team.

There is an ongoing programme of checks and maintenance which is overseen by the RI and ensures the environment, its facilities and equipment are safe. Utilities such as gas and electricity are regularly inspected by appropriately qualified people and have the necessary safety certification in place. There is a fire risk assessment and fire safety features such as alarms and fire fighting equipment are regularly serviced. People have personal emergency evacuation plans (PEEP's) in the event of the need to evacuate the building. Staff have ongoing fire safety training. There is sufficient storage space available and substances hazardous to health are securely stored. The home is secure from unauthorised access with visitors having to sign in on arrival and out on departure.

Leadership and Management

Care staff are subject to a thorough recruitment process. This is to ensure they are suitable to work with vulnerable people. Pre-employment checks include references from previous employers and Disclosure and Barring Service (DBS) checks. On commencement of employment, new employees must complete a structured induction which is aligned with the All-Wales Induction Framework. Care staff are required to register with Social Care Wales, the workforce regulator. This is to ensure they are suitably qualified.

Care staff are trained to meet the needs of people living at the service and feel valued and supported. Care staff receive core and specialist training. Core training covers generic topics such as health & safety and safeguarding. Specialist training is specific to the needs of the people living at the service. We looked at records relating to training and found that overall the service is compliant with its training requirements. We also looked at records relating to supervision and appraisal and found that generally care staff are receiving the required levels of formal support. Care staff we spoke to said they feel well supported in their roles by their manager and deputy manager, who they can approach at any time, by their colleagues and by the RI. They reported a positive sense of team morale and said the home is a good place to work in.

Governance and quality assurance measures help the service run smoothly. The Responsible Individual (RI) has good oversight of service provision. They visit the home regularly and meet with people and staff to discuss their experiences and gather their views to inform improvements. During these visits the RI also analyses records relating to staffing, care and support and the environment and produces quality assurance and monitoring reports within the specified timescales.

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
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