

# Inspection Report on

**Claremont Court Care Home Ltd** 

Claremont Court Care Home 56 Pillmawr Road Newport NP20 6WG

**Date Inspection Completed** 

28/08/2022



## About Claremont Court Care Home Ltd

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Claremont Court Care Home Ltd
Registered places	36
Language of the service	English
Previous Care Inspectorate Wales inspection	Manual Insert 24/03/2022
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

# **Summary**

People receive the support they need to be comfortable, settled and to remain as healthy as possible. Care workers present as knowledgeable, respectful and caring. The environment is homely and provides people with suitable accommodation. Infection prevention and control procedures are in place throughout the home.

The service provider took action to address the issues we raised at our last inspection. They have updated their policies and processes for them to meet the current legal requirements. The provider improved the way it assesses people's care needs, how care plans are written and are reviewed. They also strengthened their processes to safely recruit, train and support staff. Finally, they reviewed all of their policies and procedures. The service provider oversees the whole service and they have nominated a new responsible individual (RI).

#### Well-being

People appear comfortable and content. They have choices about doing the things they like. Care staff are available to cater for people's preferences. We saw people can choose where to spend their time, what to do and what to eat and drink. People are encouraged by care workers to interact with those around them and to get involved in activities. We observed natural discussions and banter taking place in the communal areas.

People are supported to be as healthy as they can be. We observed care staff supporting and encouraging people throughout our inspection visit. At lunchtime we saw care workers giving people the support they required. For some people this consisted of full assistance to eat and drink, for others it was giving people verbal encouragement. Records show nurses make referrals to health professionals when necesarry. We noted visits from families are encouraged.

Measures are in place to protect people from abuse and neglect. The service provider updated its safeguarding policy to ensure it refers to current legislation and guidance. It also took action to ensure people's needs assessments and their care plans are fully completed, detailed and reviewed in a timely manner. The service provider works in partnership with other agencies when potential safeguarding issues are raised. The home provides people with suitable accommodation. Infection control measures are in place throughout the home.

# **Care and Support**

People receive the support they require when they need it. We observed care workers supporting people and noted a natural familiarity between them. They are encouraging and reassuring, and demonstrate a good understanding of people's needs. We observed people are settled and appear content. People access services from external professionals on a regular basis.

The provider has electronic and paper based care records in place for each person who lives in the home. The records include the information collated before people are admitted, care plans which outline the care and support they need and risk assessments which show areas where people may be at risk and what staff need to do to minimise those risks. At the last inspection we advised the service provider they needed to take immediate action to ensure all care plans and risk assessments are completed within the required timescales and are sufficently detailed. We also advised them they need to ensure these records are reviewed when required. We noted the service provider took action to make the necessary improvements. At this inspection, we found all required assessments are carried out in a timely manner, people's care documentation contains more detail and is reviewed when necessary.

The service provider keeps people safe. It has improved the quality of the care documentation in place for each person who uses the service. How people want and need to be supported is recorded in a timely manner and any changes are also recorded. This means care workers and nurses have access to detailed and up to date information at all times when they deliver care and support to people. The manager liaises with relevant agencies to ensure any restrictions placed on a person's liberty are only in their best interests. The manager works with a range of external agencies to ensure people get the care and support they require.

#### **Environment**

People live in an environment which meets their needs and promotes their well-being. The home is welcoming and clean. There are communal areas throughout the home including lounges and dining areas. They feel homely, with many decorative and informative displays. People's bedrooms reflect their needs and interests. In addition, people have access to outdoor patio areas. We observed people spending time in their own rooms and in the communal areas. There is a visitor pod situated in the home's car park.

There are systems in place to identify and deal with risks to people's health and safety. The service provider carries out regular health and safety checks. External contractors carry out specialist checks. Records show these are up to date. The home has a food hygiene rating of three which means 'generally satisfactory'.

Infection control arrangements are in place. Staff are following Public Health Wales (PHW) current guidelines, and we observed staff using appropriate personal protective equipment (PPE) during our inspection visit. PPE and hand sanitizer are readily available throughout the home. The standard of cleanliness in the home is good. There are notices throughout the home which remind staff of procedures to follow, for example good hand hygiene.

### **Leadership and Management**

The service provider has arrangements in place for the oversight and governance of the service. The nominated RI visits the service on a weekly basis, reviews the monitoring activities undertaken by the manager and by other senior members of staff. They take part in regular meetings with the manager. Records show the service provider seeks feedback from staff, relatives and external professionals. The service provider took action following the last inspection to ensure the service is provided in accordance with Regulations. We noted the service provider worked intensively with external agencies in order to make the necessary improvements. The service provider always works colloboratively with others, however, we reminded them of their own duty to keep themselves up to date with the latest regulations and guidance applicable to care homes.

At the last inspection, we saw policies and procedures were in place and these were reviewed annually. However, we found these did not always refer to current legislation and requirements. At this inspection, we found the service provider has reviewed its policies and procedures and made the necessary updates.

There are arrangements in place to recruit, train and support staff. We examined recruitment records. At the last inspection, we advised the service proivder they needed to strengthen the checks they carry out before a person can start working at the home. At this inspection we found the service provider checks full employment histories, the reasons why people left previous employment involving working with vulnerable adults and/or children and secures the necessary references.

Supervision and training records show processes are in place for supporting and developing staff. Staff are supervised and receive training. They are also supported to complete recognised qualifications. At the last inspection, we advised the service provider that staff who were tasked with completing and reviewing care plans and risk assessments, and staff who carry out recruitment activities, had not got sufficient knoweldge to complete these activities in accordance with the requirements of the regulations. At this inspection we found the service provider took action to give additional training and support to staff. We also noted they took action to improve the induction given to new starters. Staff induction is now in line with the all Wales induction framework requirements.

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	

N/A	No non-compliance of this type was identified at this	N/A
	inspection	

#### **Date Published** 30/09/2022