



## Inspection Report on

**Pontcanna House**

**Pontcanna House Residential Care Home  
128-132 Llandaff Road  
Cardiff  
CF11 9PW**

## **Date Inspection Completed**

25/05/2023

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## About Pontcanna House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pontcanna House Limited
Registered places	28
Language of the service	English
Previous Care Inspectorate Wales inspection	07 April 2021
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

Nasik Al-Mufti is the Responsible Individual (RI) and Manager who has overall accountability for the service. She is registered with Social Care Wales (SCW) the workforce regulator and oversees the day-to-day running of the home.

People are very positive about the care they receive. People look relaxed in the company of care staff and we saw lovely interactions. The service offers varied activities throughout the week which people told us they enjoy. Personal plans are in place and kept up to date for staff to follow. People are given regular opportunities to contribute their views and preferences. There is good management of medication to keep people healthy as possible. The service values the importance of maintaining regular contact with family and friends and they are encouraged to visit at any time.

People live in a safe environment which is clean and welcoming. People are encouraged to personalise their bedrooms with items that are important.

Staff are well trained and encouraged to develop in their profession. Staff told us they feel supported to carry out their role. There are effective staff recruitment arrangements in place to help keep people safe.

There is an approachable RI which provides consistently good oversight of the service.

## Well-being

People have a voice and are listened to. People are given the opportunity to develop and review their personal plans, that focus on things that matter. People we spoke with told us they can choose how they spend their day. People told us they have confidence in care staff and feel comfortable to discuss any issues. The responsible individual (RI) actively seeks people's views which informs the future shaping of the service. There is a stable staff team in place, with some having worked in the service for a long period. Staff support people with compassion and good humour. During the visit, we saw positive engagement with people and engagement to join in with activities.

People's physical health and emotional wellbeing is consistently supported by staff who are kind, friendly and respectful. We saw people are comfortable in the presence of staff who know them well. Visitors are welcome throughout the day. We saw them spending time in the privacy of people's bedrooms, cottage, or garden. Referrals to health professionals are made in a timely way. Medication is consistently well managed in the service to keep people as healthy as possible.

People are protected from abuse and harm. Staff receive training and are aware of their responsibilities to report any concerns about people they support. There is a suitable safeguarding policy which is up to date. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns and feel this would be acted upon. Each person has a personal emergency evacuation plan (PEEP) in place which is an important document to inform staff of the assistance people require to safely evacuate. The communal and private areas are clean, free from clutter and nicely decorated. There are robust infection control measures in place. There is servicing arrangements in place to ensure the equipment and facilities are safe for people to use.

People are protected because recruitment processes and training ensure they get the right care and support. Care workers receive induction and ongoing development for their role. People benefit from staff that feel well valued and supported. The staff told us that the RI is approachable and the team works well together.

## Care and Support

People are supported by care staff who have good knowledge of people's care and support needs. Generally, the service retains staff well which provides people with consistency and continuity of care, which they liked. They have built up good relationships with people and understand their circumstances and individual need. We saw care staff being attentive and friendly and people responded well to this. People felt comfortable and relaxed at Pontcanna. Staffing levels are consistently sufficient to meet people's care and support needs and staff told us they do not feel rushed. Call bells are answered promptly when people require assistance. Adequate numbers of staff meet people's needs.

There are varied activities to meet people's interests and preferences. On the day of our visit, we saw people enjoying arts and crafts, singing, skittles and a visit to the hairdressers. There are lots of pictures of past events and activities which are available on social media which relatives can enjoy. We observed lots of positive interactions and laughter.

Assessments are completed prior to people moving into the home to make sure they are able to meet people's individual care needs. Personal plans and risk assessments are developed to give care staff good information about how the person wants to be supported, including their likes and dislikes. People and their representatives are given regular opportunities to contribute to their review to keep information up to date and make their preferences known. Daily care notes are informative and reflect the support people receive and how they have spent the day from the person's perspective. The service values the importance of maintaining regular contact with family and friends. A relative told us that they are always welcome and can visit any time.

Records and practice show good management of medication. People receive medication at the right time. Staff are adequately trained and competent to administer medication. There are regular audits in place to monitor the management of medication and action any issues. There are good links with the local General Practitioner who visits regularly to monitor people's health and well-being. We noted appropriate referrals are made when needed to seek health and social care advice and intervention.

There is a varied menu in place that provides people with an alternative option depending on their preference. The kitchen staff are knowledgeable of people's dietary requirements which are catered for. We saw people being encouraged to socialise together during mealtimes but others chose to eat in the lounge or bedroom which was respected. We noted that people received the assistance they need at the right time to promote good nutritional intake. Care records show that there is effective monitoring of people's weight in line with their personal plan. Appropriate referrals are made to the relevant professionals when there are dietary needs or swallowing difficulties. Staff are appropriately trained to understand the needs of people and recognise key indicators for prompt action to be taken.

## Environment

People can be assured that they live in an environment that meets their needs and promotes their well-being. The grounds are accessible and we saw people independently accessing the garden area. Communal areas are homely and spacious. People's bedrooms are warm, clean, and personalised to each individual's tastes. We saw most rooms have sufficient storage for people's belongings which they have on display. Bathrooms and toileting facilities provide privacy. People are provided with appropriate equipment when required, such as bath hoists. Mobility equipment is serviced regularly to ensure they are suitable for their intended use. The service provider informed us that they are redecorating some areas in the next few months.

There are effective systems in place to promote good hygienic practices and manage the risks of infection. There is a cleaning regime in place which staff follow. Appropriate cleaning materials are used. There are regular collections of clinical waste. There is sufficient Personal Protective Equipment (PPE) throughout the building to ensure staff have a constant supply. There are bins available to dispose of clinical waste and promote positive infection control practices.

People benefit from a safe and secure environment. External doors are securely locked to protect people from harm and visitors are required to sign the visitors book to ensure the visit is safe to go ahead. All items that would pose a risk are safely stored. There is regular servicing in the home to ensure equipment and facilities are safe for use to protect people. We saw that each person living in the home has a personal emergency evacuation plan (PEEP) which is important as it guides staff on how to evacuate people in an emergency. Staff receive regular training in health and safety and fire safety.

## Leadership and Management

The Responsible Individual (RI) is also the Manager for the service and maintains the oversight of the service on a day-to-day basis.

There are consistently good arrangements in place for monitoring, reviewing, and improving the quality of the service. Quality of care reports evidence the reviewing of the relevant documentation and obtaining feedback from the people who use the service and their representatives. We found these reports to be comprehensive and clearly identified the service areas to be improved as well as celebrating their successes. Although, the RI maintains oversight on a day-to-day basis they produce formal monitoring visit reports every three months. These visit reports evidence people, their representatives and staff are consulted with and valuable. The provider ensures policies and procedures are reviewed regularly and in line with current guidance and legislation.

Staff receive regular supervisions as well as attending staff team meetings. This is important for staff to receive support and share information collectively. Staff told us that they feel valued and well supported in their duties. Staff told us that they are encouraged to develop their skills and experience to progress professionally. Staff are well inducted to the service and receive shadowing opportunities to fully understand the role and the needs of people they support. The training records show that staff are well trained and receive regular refresher training to maintain their knowledge and competency. Staff tell us that the team works well together and communication is good. The RI is always approachable and supportive.

Staff have a good understanding of the safeguarding process. There is a clear Safeguarding policy and procedure in place which is accessible to staff. All staff complete safeguarding training as part of their induction and follow-up training is also arranged. Staff feel they have the skills and knowledge to report issues and felt confident to raise any concerns as they will be acted upon.

### 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
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