



Inspection Report on

Aspen House Care Home

**Aspen House Care Home
37 Coedpenmaen Road
Pontypridd
CF37 4LP**

Date Inspection Completed

10/11/2022

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About Aspen House Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Cwmdare Homes 2 Limited
Registered places	38
Language of the service	English
Previous Care Inspectorate Wales inspection	19/05/2022
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 and their relatives told us they are happy with the care they receive at Aspen House Care Home. Personal plans detail people's strengths and care needs. Reviews are completed monthly however they do not evidence consultation with people and their relatives. Potential risks to well-being are considered and risk assessments are in place. The service does not currently have an activities coordinator to support people to occupy their day. People receive support to maintain contact with family and friends.

The service has policies in place to support good practice. The environment appears homely, and repairs are completed in a timely manner. Ongoing maintenance and fire checks ensure the home environment remains safe. The responsible individual (RI) completes three monthly visits and quality assurance reports to maintain oversight of the needs of the service. Infection control measures are understood and followed by staff. The Statement of Purpose (SoP) reflects the service provided. Recruitment checks are robust and staffing levels are as described. Staff supervision is not offered on a regular basis and training requires strengthening. Medication storage and administration is well managed. Overall, staff feel supported.

Well-being

People have a voice and are supported to make decisions about their day. Personal plans document people's routines and interests and staff consider these when offering care and support. People can choose where and how they spend their day, and dietary preferences are catered for. The home environment is pleasant and well maintained and bedrooms are personalised to reflect individual tastes. People and relatives, we spoke with report feeling listened to however we noted their feedback is not always sought during formal reviews. At present there are limited opportunities to engage in activities however, the service is currently recruiting to fill this vacancy.

Personal plans and staff support is of a good standard. We found plans set out people's current needs and the support they require. The service makes referrals in a timely manner and professional recommendations are followed. Risk assessments are completed and updated. Sufficient equipment is in place to support people's care needs. Repositioning charts are completed in line with personal plans. People's nutritional needs are considered, and meals appear of a good standard. Plans are reviewed regularly to ensure they remain accurate. Medication records show people receive their medication as prescribed. People we spoke with report being happy with the standard of care they receive and have positive relationships with staff.

There are measures in place to protect people from harm. Although we found a secure entry door system in place visitor checks need improvement. Maintenance tasks and fire tests and drills are completed. Staff understand their safeguarding responsibilities and sufficient policies are in place. Recruitment checks are completed prior to employment and overall, rota's evidence sufficient staff to meet people's needs in a timely manner. Supervision sessions are not offered on a regular basis and requires improvement, and we noted some areas of training require strengthening to ensure staff remain sufficiently skilled.

Care and Support

People are happy with the support they receive, and menus are varied and of a good standard. We saw care workers engage with people in a kind and patient manner and observed several friendly interactions throughout the visit. We saw staff asking people what they would like for lunch and offering them choice. We were informed by staff menus are updated seasonally. We viewed the lunch time menu and observed staff arranging an off-menu meal for one individual who did not like the options available.

People's comments include:

"I like it here"

"They (staff) made me a cake for my birthday and sang happy birthday to me it was lovely"

"I really enjoyed my birthday".

"They are excellent they really look after me"

"The food is good"

A visiting relative commented she was happy with the care provided, staff were very welcoming when she visited and kept her up to date of any changes.

Personal plans contain clear information on daily routines, preferences, and people's backgrounds. Plans feel person centred, documenting important aspects of people's lives, individual strengths, and skills. Risk assessments support in minimising any physical or emotional risks to people or others. The service records all contact or recommendations made by visiting professionals. Daily notes contain a good level of detail and monitoring charts are completed. Repositioning tasks are undertaken in line with people's plans. Reviews are completed monthly however these do not evidence consultation with people or their relatives. While no immediate action is required, this is an area that requires improvement, and we expect the provider to take action.

Medication is stored and administered safely. We examined records around medication administration and controlled drug logs and found these to be completed correctly with no gaps or errors. The completion of daily room temperature checks also ensure medication remains effective.

Activities within the service is limited. The service does not currently have an activities co-ordinator in place and care staff report they do not always have time to provide support in this area. Many people told us they have regular opportunities to visit with family while others commented they like to spend time in their room reading, completing crossword puzzles, or watching television. The service confirmed they are in the process of recruiting a new activities co-ordinator and aim to offer people increased opportunities to engage in activities they enjoy.

Environment

The environment is safe however security checks require some improvement. On arrival, we found the main entrance secure however, checks to ensure only those authorised to enter the building need strengthening. Substances hazardous to health are locked away safely and equipment is serviced and well maintained. Discussions with the home manager confirm their handyman remains absent however, the service has managed to maintain routine maintenance checks and repairs. Fire safety checks are up to date, and people benefit from detailed personal evacuation plans in the event of an emergency.

The service provides a pleasant comfortable environment and maintain good standards of cleanliness. All areas of the home appear clean, well maintained, and decorated to a good standard. The furnishings and decor are in good condition and bathrooms and bedrooms are clean and in good order. People's rooms contain photographs and personal items important to them. Kitchen and domestic staff report the service has a sufficient supply of materials and equipment to enable them to undertake their roles.

Medication and confidential information are stored safely. We found treatment rooms and medication trolleys locked to ensure safe storage. Confidential files including staff records and personal plans are locked securely to ensure they are only accessed by authorised individuals.

Leadership and Management

The service recruits staff safely however, the completion of training and supervision requires improvement. Robust recruitment checks ensure staff are of good character and hold the necessary skills to undertake their role. Overall, staff have a good understanding of key policies and told us they feel skilled in carrying out their duties. Records show staff attend team meetings however one to one supervision sessions are not always undertaken on a regular basis. The training matrix we viewed shows qualified staff do not always complete medication training within scheduled timeframes. These are important tools which support skills and development and provide staff with an opportunity to discuss practice issues. While no immediate action is required, these are areas that require improvement, and we expect the provider to take action.

There are arrangements in place to support the management of the service. The manager completes routine checks to support and encourage good care practices. We found the statement of purpose is accurate and up to date, containing the correct management structure and the correct information on staffing levels. We saw evidence of the completion of three-monthly visits by the RI. We noted six-monthly quality of care reviews consider aspects of good practice and identify areas requiring improvement. Staff rotas are well managed, and the service strives to cover any shortfalls in staff numbers. Notable occurrences and safeguarding concerns are reported to the correct departments.

Overall, care workers feel supported in their role and people can be confident of sufficient staffing levels. On the day of inspection, we found adequate staff on duty. The manager provided assurances the service has an ongoing recruitment drive to fill current vacancies. Many of the care staff we spoke with told us they receive support from the management team and staffing levels are sufficient when shifts are fully staffed. However, qualified night staff report feeling very busy due to the range of duties they complete, and the needs of people becoming "*more complex*". One person living at the service also commented "*they (staff) are nice, but they are busy in the evening and night*". We discussed this feedback with the RI for their further consideration.

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
34	The provider must ensure there are sufficient staff on duty at all times.	Achieved
57	The provider must undertake all required fire checks and maintenance.	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 service does not provide regular supervision or training opportunities	New
16	The service does not consult with people or relatives when completing reviews.	New
7	Updated SOP not submitted to CIW	Achieved
80	The content of the quality report did not meet the requirements of regulation 80(3)	Achieved

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