



Inspection Report on

Parkside House Residential Home

Parkside House Residential Home

1-2

Park Road

Penarth

CF64 3BD

Date Inspection Completed

29/09/2023

Welsh Government © Crown copyright 2023.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Parkside House Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Llangoedmor Properties Ltd
Registered places	38
Language of the service	English
Previous Care Inspectorate Wales inspection	10 June 2021
Does this service promote Welsh language and culture?	This 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

Parkside House Residential Home can accommodate 38 residents with residential and personal care needs. This inspection was unannounced. There is a manager in place who is registered with Social Care Wales, the workforce regulator, in accordance with legal requirement. Balwinder Brainch is the responsible individual (RI) for the service.

People receive good care and support from a friendly staff team. There are sufficient staff to provide care and assist with suitable arrangements in place to cover any staffing shortfalls. People live in an environment which is homely and suitable for their needs. Activities and support in accordance with people's interests and wishes are carried out daily.

The manager and RI are visible and engaged in the day-to-day running of the service. Systems are in place to ensure the quality of care and support are provided. Care documentation reflects the care and health needs of people living at the home.

The home environment is secure. People are consulted about the care and support they receive. Infection prevention and control processes are in place to reduce the risk of infectious diseases being spread throughout the home.

Well-being

People feel safe and protected from harm. The entrance to the home is secure. Arrangements for fire safety and general maintenance are in place. The home is clean and well-furnished throughout and suitable for the needs of the residents and management ensure it is a safe place for people to live, work and visit. People can move freely in accordance with their abilities and assessed risks. There are three floors to the home each accessible via a passenger lift. We saw the large garden areas are well maintained and pleasant. People told us they enjoyed spending time outside in the warmer weather and told us about all the vegetables successfully grown throughout the year.

People have a good choice of meals and drinks to suit their nutritional needs and preferences. We saw people enjoying the meals provided and observed a calm social time for people to enjoy. The chef discussed each person's dietary requirements and had an extremely good understanding of people's likes and dislikes. The home has achieved a 5-star (very good) food hygiene rating. Staff ensure drinks are available throughout the day and night as required. We spoke to people who were complimentary about the choice and quality of food.

Measures are in place to promote good standards of practice throughout the home, with infection prevention and control measures robust and in line with Public Health Guidance. Management shows good oversight of incidents, accidents, complaints, and safeguarding matters. A statement of purpose is present which is up to date and reflective of the home.

People are safe and receive appropriate care and support. Their wishes and aspirations are considered, and staff demonstrate a friendly approach. During our visit, we saw staff interacting positively and people told us they had good working relationships that were respectful. Care documentation supports the delivery of care and support. People are encouraged to have visitors to the home and relatives we spoke with told us *"I couldn't ask for more, this is a home from home, staff are amazing"*.

Management oversee the training and supervision needs of the staff. Team meetings take place specific to each worker's role. There is a robust recruitment process in place. The RI demonstrates appropriate oversight of the home to ensure it operates safely and in accordance with its statement of purpose. The home shows a commitment to improving and developing.

Care and Support

People have access to health and other services to maintain their ongoing health and well-being. Information within people's care files showed referrals and contact with various health professionals. We saw these referrals were made in a timely manner and whenever people's needs changed. The service has a safe system for medication management. People receive their medication as prescribed, and we saw medication is securely stored and audits carried out to make sure medication is stored and administered safely and to identify any areas for improvement.

Personal plans reflect people's current needs and are well organised, although we discussed some matters with management that would benefit from review which include more detailed information relating to personal preferences and what matters to them to be captured within the plan. The manager told us this would be addressed immediately.

Care staff know the people they support well and some staff told us they had worked at the home for many years. People's choices are promoted, for example regarding meal and snack options. We saw care staff interact with residents in a friendly and respectful manner and show good knowledge of people's wishes, needs and how to respond to them. People are supported to spend time doing meaningful activities which are available six days a week and people choose and get involved in the activities they like. For example, trips to the coffee shops, afternoon tea, painting, and singers attend weekly which we observed people enjoying and singing along.

Systems are in place to protect people who use the service. We saw people's body language and expressions indicated they felt safe and secure around the care staff who support them. People told us they feel safe and secure living at the service. Records we saw evidenced staff had received safeguarding training. A safeguarding policy is available which informs staff of their roles and responsibilities in relation to protecting adults at risk from harm, abuse, and neglect. The staff team told us they understood the importance of reporting concerns and that they feel able to approach the manager with any issues or concerns and feel extremely well supported. Care staff are visible, and we found there to be appropriate oversight of staffing arrangements.

The service promotes hygienic practices and manages risk of infection, such as cleaning schedules. The service has an infection control policy and procedures in place. Discussions with care staff confirmed they are aware of the infection control procedures, and we saw them wearing appropriate personal protective equipment (PPE) when appropriate.

Environment

People are safe, the home is secure with a keypad system in place and visitors must ring to gain entry. There are three floors to the home each accessible via a passenger lift. The home offers suitable accommodation for the residents and the management has shown a commitment to developing and improving it for their benefit.

People have a sense of belonging. The home offers several small communal areas for people to sit and enjoy with others or spend time alone. Bedrooms are personalised with items of people's choice and personal belongings. There is a pleasant dining area with good access and egress for people with mobility needs. We saw the gardens were well maintained and pleasant and people told us they enjoyed spending time outside in the warmer weather. People are cared for in a clean and homely environment. However, we observed communal items inappropriately stored in bathrooms which we requested be removed. The manager agreed with the findings and told us the matter would be dealt with immediately.

Management oversees the home's health and safety requirements. From our walk-around we noted window openings that may pose a risk to residents are secure. Staff carry out regular safety checks and we saw each person had an up-to-date personal emergency evacuation plan (PEEP) in place. There is a fire risk assessment and care staff have training in fire safety and manual handling with all current training up to date. Environmental audits to ensure areas are clean and safe are carried out daily/weekly and any shortfalls addressed immediately.

The service provider identifies and mitigates any risks to health and safety. We considered various records relating to health and safety, which evidenced the provider maintained effective oversight to ensure the environment was safe. The home has a visitor book in accordance with fire safety arrangements and visitor identity checks are undertaken. We saw all safety checks in relation to gas installation, electricity and safety records were satisfactory and up to date. All confidential files including care and staff files were stored securely in lockable areas.

People can be confident that there are effective arrangements at the home that will protect public safety and minimise cross infection. There is oversight to ensure staff follow the correct infection guidance.

Leadership and Management

People can be confident management monitors the quality of the service they receive. Systems and processes help promote the smooth running of the home. Management oversees incidents, accidents, and complaints. The home carries out internal audits to monitor standards and practice. We looked at some key policies and saw they are up to date and reviewed. Policies and procedures are accessible to staff and provide guidance and information to support them in their roles.

People can be assured that staff are safely recruited, supported and trained for the roles they undertake. We looked at staff recruitment files and saw they contained all the pre-employment checks required in respect of any person working in regulated services. Staff receive formal one-to-one supervision in accordance with regulatory requirements. Supervision provides each staff member with opportunities to discuss their performance, development and/or any concerns they may have. We were told that staff training was up-to-date and mostly carried out online, which included safeguarding of vulnerable adults and infection control but face-to-face training had now recommenced which included manual handling. We spoke with staff during our visit who told us, *“The manager is very supportive,” “the training is always ongoing”, “I really enjoy working here and wouldn’t be anywhere else”, “I have been here many years and love my job”*. Daily handovers ensure pertinent information is shared between staff at shift handover. We found that regular auditing ensured residents’ health, or any deterioration had been recognised and acted upon.

People have access to information. A statement of purpose (SOP) is available which accurately reflects the service’s vision. People have opportunities to express their views and lodge complaints. The home has a complaints policy in place informing people how to raise any concerns formally. Residents can be confident that the home is operated with their best interests at the forefront of care provision.

Staff meetings take place on a regular basis for management and care staff. The manager is visible and described by staff as *“supportive”* and *“approachable”*. The RI visits the service as required and we viewed the recent three-monthly quality monitoring report dated 1 August 2023 which contained all the required information.

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 inspection	N/A
58	The service provider is not ensuring that medication administration is carried out in line with guidance and the home's policy. Senior carer workers are not always observing individuals taking medication but are signing documentation to say taken. The task of giving medication to a person has been delegated, which is poor practice as this increases risk of errors and places people at risk of harm. This was raised with the manager and senior lead.	Achieved

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 13/11/2023