



Inspection Report on

Ocean Living Residential Care Home

**Ocean Living
734 Mumbles Road Mumbles
Swansea
SA3 4EL**

Date Inspection Completed

24/02/2022

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About Ocean Living Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Hawthorn Court Care Ltd
Registered places	15
Language of the service	English
Previous Care Inspectorate Wales inspection	25/09/2019
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer'.

Summary

Ocean Living provides care and support for up to 15 adults. The service is in the heart of Mumbles overlooking Swansea Bay. The service is nicely decorated throughout with all bedrooms having en-suite facilities. There is an experienced manager in post.

People receive a good service from a team of care staff who are well trained and supported. The management team are approachable and highly visible in the running of the home. There are systems in place to ensure there is good oversight of the service being delivered. The Responsible Individual (RI) is actively involved and carries out regular quality assurance audits. Staff feel well supported and told us communication with managers and each other is good.

Well-being

There are systems in place to safeguard people and reduce risks. The service provider has clear safeguarding policies and procedures. Staff demonstrate a sufficient understanding of their role and responsibilities in safeguarding people. Access to the service is restricted to authorised individuals. Visitors do so in line with Public Health Wales guidance. There are consistently good infection control arrangements in place. Care workers are clear on their responsibilities around protecting people from infection. Care workers have a good understanding of people's support needs and any potential risks. Environmental checks ensure the property and equipment is safe for use. People living at the home tell us they feel safe and secure.

People are happy and receive support from professional staff who know them well. Ocean Living is a well maintained welcoming environment where people feel part of a real community. People enjoy the company of each other and are well respected by staff. Care planning documentation is adequate, but is under review in developing a more outcome focussed approach. People have a good dining experience and the management of medication ensures people remain as healthy as they can be. Care workers know people well and are respectful of their wishes.

There are good governance arrangements in place. There is an experienced manager ably supported by an assistant manager. Both are approachable maintaining good relationships with people living at the service, their representatives and staff. Care workers are well supported through regular communication, supervision and annual appraisals. Staff experience a good induction and regular training is being provided. The RI has clear oversight, visiting the service regularly. Both three monthly and six-monthly reporting procedures are in place and the reports made available.

Care and Support

The service has effective mechanisms in place to safeguard vulnerable individuals. Safeguarding and whistleblowing policies are available to all staff and require some minor changes. All staff undertake safeguarding as part of their mandatory training and those we spoke with were aware of their safeguarding responsibilities. There are individual and service wide risk assessments in place to safeguard both people living at the home and staff.

Overall care, support and risk management measures are well documented within personal plans and associated documentation. There is good information on the person's history, background and any health conditions, including how they can be best supported. Personal plans are detailed and informative providing good guidance to staff. Although more work is needed to clearly show what goals/ outcomes staff are assisting people to achieve. Individual risk assessments are in place but further work is needed in ensuring these are clearly documented. People are included in day-to-day decision-making. In discussion with staff and people living at the service, it is clear the lives of individuals are improving. However, these outcomes are not recorded in sufficient detail in files. Accidents and incidents are referenced in daily notes, as well as extended details and any actions taken in the form of reports. Referrals are made to external health and social care professionals when needed.

People have a positive dining experience where they enjoy the company of others. Meal times are a real social event of which people enjoy. People sat in small groups over breakfast and lunch chatting to each other and enjoying the freshly cooked food on offer. People told us "*the food is wonderful*" and "*the menu is varied*". The chef knows people's preferences well. People are generally independent in relation to eating. Care workers were on hand to assist people safely to the dining area.

The service has safe systems for medicines management. Overall, medication administration records (MAR) are accurate although we identified missing signatures for one person. This was followed up and addressed during the inspection. Trained, experienced staff administer medication. Medication is held in trolleys in a locked area and fridge temperatures consistently completed. As and when required medication (PRN) is appropriately administered in line with instructions. Although reasons when administered was not always being recorded.

Environment

The service provider ensures measures are in place to manage risks to people's health

and safety. We checked a range of building maintenance records, as well as equipment used by people. Records evidence appropriate checks are being carried out and are up to date. Materials that have the potential to cause harm are well organised and stored securely. Window restrictors are in place to ensure people's safety. Emergency call alarm bells are in place and the ones tested were working correctly. These are checked by staff on a regular basis.

The home is safe and secure. The service follows current guidelines with clear and well managed visiting arrangements in place. Visitors are requested to show evidence of a recent negative lateral flow test or undertake a test before entering. Visitors also sign in on arrival and required to follow the home's infection control procedures in relation to COVID-19. They are able to visit their relatives in bedroom areas or outside the building in warmer months. People under Deprivation of Liberty Safeguards (DoLs) have the relevant safeguards in place. Confidential information such as care documentation is treated sensitively and stored in locked cabinets in the office.

The service provider ensures the environment supports people's wellbeing. The home is informal, relaxed and gives a sense of community. People are comfortable with each other sitting in groups in the communal lounge and dining area. Others liked to spend quiet time in their personalised bedrooms. People said *"it's a lovely place to live"*, *"what's not to like living by the sea"* and *"I am very comfortable here"*. The accommodation is clean and comfortable and benefits from good quality decor and furnishings. Bathrooms and other communal areas are clean and uncluttered.

Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service. There is good oversight including quality monitoring and systems for assessment. The service is provided in line with the objectives of the Statement of Purpose'. Policies and procedures support staff in delivering a good service, with only minor updates needed. We discussed with the RI the need to redevelop the written guide for residents to ensure it is available to people in an easy read format. People and families gave us positive feedback about the care being provided, and the quality of staff working supporting their relatives.

People can be confident the RI and management of the home monitor the quality of the service they receive. The RI visits the home regularly and meets with residents and staff. We viewed the latest quality of care report. This evidenced people's feedback and recommendations for improvements. We saw evidence the RI has good oversight of the service. We looked at documentation confirming the RI conducts quarterly visits for quality assurance monitoring.

There are suitable numbers of care workers on duty to safely support and care for people. There has been some recent turnover of staff due to various reasons. This has now stabilised with a mixture of experienced and new staff available. We saw sufficient numbers of staff at the service who knew people well and were kind and respectful at all times. There are two staff members who speak fluent Welsh using their language skills in the home. People told us "*staff are very helpful and kind*" and "*they really look after me*". A relative said "*it's a lovely home*" and "*staff have become like friends*".

Care workers are well supported and have access to good training to enable them to carry out their roles. New staff go through a period of induction using the Social Care Wales framework. They also shadow and are supported by experienced colleagues. There are good systems in place ensuring three-monthly supervision meetings and annual appraisals are completed. Care workers said they feel "*well supported*" and enjoy working at the service. We were shown a training matrix, which includes mandatory courses as well as other courses in line with people's care needs. Training at this time is mainly e-learning but based on the needs of people living at the service. Training records evidenced training is up to date

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

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