

Inspection Report on

Hafod - short term care

Mold

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

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23 June 2022

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About Hafod - short term care

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Flintshire County Council
Registered places	3
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the care and support they receive at Hafod. People engage in activities and interests and can continue with their routines during their stay. Personal plans and risk assessments are in place to provide staff with information to support and care for people in line with their identified needs.

The manager supports staff. A recruitment process is in place including all the necessary checks. Staff receive training and are skilled in their roles. Staff development in relation to supervision and appraisals and training have continued during the COVID pandemic. Staff receive relevant information regarding people's well-being. Improvements are needed in the recording of regulatory visits made by the responsible individual (RI).

The premises are in their own grounds and in close proximately to local community facilities. Attention is given to ensuring the home is clean and tidy with infection prevention health and safety measures in place. Fire safety measures need attention to reduce the risk of health and safety to people and staff.

Well-being

People stay in an environment that is supportive and provides appropriate care for them. Care staff are kind, polite and aware of the individual needs of the people they care for. A friendly atmosphere was apparent between people and staff. People said they liked the staff and their choice to stay in a particular bedroom. We observed staff talk to people in a friendly and respectful manner.

People are supported to have control over their day-to-day life. People can choose how and where they spend their day. The pre assessment plan includes a summary of daily routines to continue during the persons stay. One person had returned home following a short stay whilst another was preparing to go out for lunch with family and friends. Evidence in photographs and records show activities are offered. One person told us *"I like coming here and stay in the same bedroom every time I come."* One relative told us Hafod is a *"happy environment and staff are second to none."*

Management is approachable and has an open-door policy. Communication with people, staff, and relatives, is good. The manager is supportive, and the RI has good oversight of the service. Up-to-date written information about the service is available. Policies and procedures are in place to help protect people from harm or abuse. Risk assessments are in place to safeguard people and staff.

Staff follow a recruitment process including all the necessary checks and receive the training to be skilled in their roles.

The Active Offer of the Welsh language is provided. Welsh speaking staff support people whose first language is Welsh.

Care and Support

People receive care and support that meets their individual needs. People and their relatives are involved with developing personal plans and include personal outcomes in relation to people's health and well-being. Personal plans and risk assessments are clear and provide staff with information to support and care for people in line with their identified needs. Prior to each visit a phone review is conducted with the persons next of kin to check the risk assessments and personal plans are still relevant. Daily notes and charts show people receive the care they need when it is required.

People remain as healthy as they can be due to care provided and effective administration of prescribed medication. People receive the medication they require safely. Staff competency is checked before they can administer medication. People's dietary needs are considered, and healthy, nutritional meals ensure people remain healthy. Staff support people to access health appointments as and when required during their stay.

People receive good support from friendly, respectful, and caring staff. People have choice about how they spend the day, and their individual wishes are respected. People receiving support told us staff were *"kind and friendly."* Regular, appropriate activities and opportunities for people to pursue interests or hobbies are provided with photographs to evidence this. People are also supported to continue with their regular daily routines whilst staying at Hafod.

People's safety is well maintained. There are processes in place to safeguard people. Individual risk assessments are in place and staff are aware of the importance of making the relevant referral to the local authority if they have any concerns about the people they work with. Care workers told us they are aware of the safeguarding procedures and staff receive up -to- date safeguarding training. Infection control measures are in place to ensure people are safe from COVID 19. Staff wear appropriate personal protective equipment (PPE) when providing personal care.

Environment

The respite service provides people with care and support in a well-maintained environment. The bungalow has three bedrooms and two bathrooms. One bathroom is fitted with aids and adaptations to aid independence. Areas are decorated to a good standard and people can take small items of memorabilia to personalise their bedroom during their stay.

Overall, the maintenance of the building is to a good standard. Outside areas provide additional space for people to take part in outside activities during fine weather. One person showed us a range of outdoor activity equipment.

Health and safety of the home is well managed. Records show that utilities, equipment, and fire safety features have regular checks and servicing. All residents have a personal emergency evacuation plan specific to their individual support needs. Requirements made by the fire safety officer have not received attention. There are gaps under doors and the door seals require replacing. This is placing people's health and well-being at risk and we have, therefore, issued a priority action notice. The provider must take immediate action to address these issues.

Leadership and Management

There are arrangements to maintain oversight of the service, and processes to monitor the quality of the service. Evidence seen demonstrates the RI conducts visits to the service and produces a detailed report. These visits should take place every three months and the report shared with the manager to ensure action is taken against any areas of development identified. Improvements are needed in relation to regulatory visits to fully meet the legal requirements. This is an area for improvement, and we expect the provider to take action. It will be followed up at the next inspection.

Overall, trained staff support people living in the home. Staff receive training to gain the knowledge, competency, and skills to meet people's needs. Care workers told us the manager is easy to approach and provides support on both personal and professional levels with staff supervision and annual appraisals taking place. Staff meetings are arranged to share operational matters such as training and health and safety and provide opportunities for staff to share ideas and any concerns regarding the service delivery.

Records show required checks are conducted prior to commencing employment. The providers have a selection and vetting process, including obtaining references. Limited face-to-face training has taken place since the pandemic due to government restrictions. Staff are provided with alternative learning opportunities, including mandatory and specific training. Training includes first aid, moving and handling and safeguarding. Staff told us they have received the relevant training to undertake their roles and responsibilities. Staff administering medication have received medication training and passed a medication administration competency test. Staffing levels are arranged dependent on the assessed needs of people receiving respite care.

The service has a statement of purpose, which clearly describes who the service is for and how it will be delivered. People are given information that describes the service and how to make a complaint.

The 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 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	
57	The service providers do not ensure that any risks to the health and safety of individuals are identified and reduced so far as reasonably practicable.	New	

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	
73	The responsible individual does not visit the service at least every three months.	New	

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