



# Inspection Report on

**Kingsland House Care Home**

**Barry**

## **Date Inspection Completed**

04/01/2024

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## About Kingsland House Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Forward (Wales) Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">04 April 2022</a>
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and culture. Currently there are no people living in the home that communicate in the Welsh language.

### Summary

The service provider is also the responsible individual (RI) and manager of Kingsland House. They are based at the home and there are deputy arrangements in place when needed. During the inspection, an additional deputy manager was appointed and suitably registered with Social Care Wales (SCW), the workforce regulator. The RI continues to remain well informed and visible at the service. Since last inspection, there has been increased support around administrative tasks to ensure all systems and processes are now in place and up to date. The provider has secured improvements and is now meeting regulatory compliance and quality of care standards.

We found good outcomes for people living in the service. People are fully involved in the care planning process and are happy with the support they receive. Care and support is provided by a small team of consistent care staff, who understand people's needs and preferences very well. The management team ensure staff are supported, developed, and safely recruited for the roles they undertake. The home environment enables people to live as independently as possible. People's rooms are personalised, and all areas of the home are kept to a high standard of cleanliness. The home takes effective measures to identify and mitigate the risk to people's safety and well-being. People have access to technology to keep in touch with friends and relatives. People live a fulfilled life and have choice and control with daily opportunities to access the community and to do the things that matter to them.

### Well-being

People are happy with the care and support they receive. People speak positively about their relationships with care staff. Care staff treat people with dignity and respect and people receive appropriate, kind, and caring support from care staff who are familiar with their needs. Staff told us they are happy and motivated in their work and spoke about people they support in a warm and respectful manner.

People have choice and control over their daily lives and are happy living in Kingsland. One person said, *"It's a happy place here"* and used the following words to describe the atmosphere at the home, *"it's a haven", "it's a quiet solace...but at the same time we take part as much as possible in opportunities"*. Another person said, *"We do go out on most days"*. A personalised approach is taken by the service. People are supported to engage in meaningful activities and to do the things which matter to them. People are involved in the planning of the care they receive and how they wish their support to be provided is clearly documented. People's risk assessments with consideration of mental capacity to make specific decisions needs to be managed formally, robustly and kept under review.

People achieve their individual identified outcomes. When people identify new goals to promote their well-being, the service helps them to understand the steps they can take to achieve this. The RI and deputy manager have a hands-on approach with improving individual outcomes for people. They regularly review and consult with individuals, their representatives, professionals, and community services when required. We found evidence the RI and management team advocate for people using the service and demonstrate a commitment to helping people to be as independent as possible.

There is good governance and oversight arrangements at the service and robust due diligence checks. Policies and procedures have been updated, are effectual and ensure a smooth running of the service. The home environment is enabling and meets the needs of people living in the home. There are safe medication arrangements for people and infection control procedures. The management team oversee safe staff recruitment checks, training, and supervision needs.

## Care and Support

People can be confident they get the right care and support as early as possible by care workers who know how best to support them. Personal plans and risk assessments are live documents and are regularly reviewed and updated. Each personal plan is well organised and individualised, with care taken to record important things that make a big difference to people. We read examples of review reports which capture detailed information with managerial analysis of patterns and trends for people. Care staff know what is expected of them and most have worked at the service for many years and have got to know people's needs and preferences very well. Continuity of care for people is excellent. People are supported by a small team of care staff and the home is managed through a family run service.

People are a part of the local community and receive support to maintain their hobbies and interests. People benefit from keeping in contact with family and friends through regular visits by using the latest technology. There is a vehicle available at the service which is used to support people to access the community and attend events. Some individuals are supported to access work opportunities.

People's health and well-being is promoted, and people are safeguarded from harm and abuse. There are safeguarding policies and procedures in place and all staff have received a higher level of safeguarding training. Medications are managed robustly and consistently to keep people safe and well. Medication recordings are clear and accurately completed. We saw good medication systems and organised arrangements in place to ensure people receive the correct medication and at the right time. Care must be taken to ensure practices and decision making is guided by specific mental capacity assessments in collaboration with professionals and appropriate referrals are made to the Deprivation of Liberty Standards (DOLs) team at the earliest opportunity.

## Environment

The home is modern, clean, and suitable to meet the needs of people. People are actively involved in the running care of the home including shared household duties and tasks, which promotes their independence and daily living skills.

Significant improvements have been made to the home environment, with many areas receiving refurbishment. The RI demonstrates a continued commitment to modernise and renew the home interior to suit the needs of those living in the home. The RI ensures good financial investment in the service and environment.

We found that there are safe recording and monitoring arrangements in place to manage the health and safety of people. People have a personal emergency evacuation plan specific to their individual support needs in case of an emergency. Fire safety equipment and checks are completed. There are clear recordings for temperature checks and food safety. Health and safety audits have now been revised since the last inspection, they identify and resolve key issues. There is now a fire assessment, legionella, and asbestos in accordance with current guidance. There were some building materials still present at the time of the inspection, which is being immediately addressed by the service provider. Actions the provider has taken in response to an assessment from the fire safety service will be reviewed by the next fire officer visit.

The infection control policy and covid-19 information are now up to date to reflect current guidance. All care staff receive appropriate infection control training. Personal Protective equipment (PPE) is available to staff. Infection control policies and procedures give information to care staff on how to undertake tasks appropriately to reduce risk.

## Leadership and Management

People are being supported by staff that are supervised, well trained, and vetted through robust recruitment checks. Support staff are happy working at the service, they feel well supported and valued by the management team.

There is good governance and oversight arrangements at the service with robust policies and procedures in place for keeping people safe and well. Quality assurance checks and audits are now completed. Quality of care reviews have improved and are completed regularly with sufficient detail. The RI needs to ensure there is a record in place for documenting quarterly discussions with staff and people to obtain their views on service delivery and how these can be used to inform improvements.

There is a digital system in place which enables the manager to analyse patterns and trends for people. It provides the ability, when used correctly by care staff, to enable people to receive the earliest intervention when their health and well-being starts to decline. The newly appointed deputy manager demonstrates a commitment to use and develop the electronic system further, to monitor people's health and well-being closely.

The management team work closely with people's professionals and community health services, to provide the most appropriate support to people. A health professional who visits the service was complimentary about management and their insight and approaches to promote people's health and well-being, they informed us management are, "*very aware and always getting in touch to seek very appropriate advice*". An effectual partnership arrangement has been established with relevant health professionals and the provider has implemented diabetes management policies and procedures. Diabetes management plans need to include consideration of people's abilities and support needs, mental capacity and any restrictions and authorisation from DOLs. This will aid staff understanding regarding how best to support people with risks. We asked the service provider to ensure access to a variety of appropriate, appealing, and alternative snacks for diabetics, to increase people's engagement in making the right choices.

### 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
12	The service provider must ensure that policies and procedures are kept up to date for staff to follow	Achieved
16	People to have the opportunity to contribute to their review meetings to influence how they like to be supported and their personal aspirations for the future	Achieved
36	Staff to receive meaningful supervision and an annual appraisal to help them reflect on their practice and identify areas for development. The service provider must have up to date training information available to identify when refresher training is required for care staff to fulfil their role and requirements	Achieved
57	Service provider must ensure that the premises complies with current guidance to mitigate risk to people	Achieved
59	Information must be secure and kept in the home at all times	Achieved
80	Service provider to ensure the quality care report is detailed enough to assess, monitor and improve the quality and safety of the service	Achieved

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