



Inspection Report on

Pinehurst Rest Home Limited

**Pinehurst Rest Home
22-24
Esplanade Avenue
Porthcawl
CF36 3YU**

Date Inspection Completed

13/10/2022

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About Pinehurst Rest Home Limited

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pinehurst Rest Home Limited
Registered places	11
Language of the service	English
Previous Care Inspectorate Wales inspection	12 October 2021
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 receive person-centred care and support at Pinehurst Rest Home. People told us they enjoy living there, and relatives told us they are happy with the support people receive. Care staff are compassionate and respectful and enjoy working at the home. The service has systems to ensure care and support is of a good standard. People benefit from individualised and current personal plans. People are consulted and involved in their care. Management is visible and engaged in the day-to-day running of the service, with policies and procedures in place help to protect people from harm or abuse. The service has auditing systems and meets the legal requirements in relation to Responsible Individual (RI) visits and quality of care reviews. The environment is clean, homely, and well-located to access the community. Infection control measures are of a good standard. Care staff are recruited following robust recruitment checks, receive regular supervision, and feel supported in their work. Care staff receive ongoing training.

Well-being

People are supported to have control over their day-to-day lives and do the things that matter to them at Pinehurst Rest Home. People tell us they lead lives of their choosing, with their wishes and views sought and respected. Care and support is person-centred, and people are treated with dignity and respect. People can raise issues or make requests, and these are generally responded to. The home has good relationships and lines of communication with relatives, who told us staff keep them informed and updated.

People are supported to be as healthy as they can by getting the right care at the right time. They are supported to keep appropriately active, being encouraged to take part in activities where they can. The home employs an activities coordinator who arranges and runs a variety of activities. The home liaises with external health professionals to refer any concerns and follows appropriate guidance. We saw evidence of correspondence with professionals, with personal plans reflecting direction given. Personal plans are detailed, and person-centred information about people's histories forms part of the care file. Personal plans are reviewed monthly. The meals provided are of a good standard with appropriate portions and choice. The home has a sufficient supply of personal protective equipment (PPE). We saw the management of medication is safe and in line with the medication policy.

People live in an environment that supports them to achieve their well-being. Pinehurst Rest Home is an older town house that caters for older people and their associated needs. Bedrooms are comfortable and personalised. Suitable mobility aids are in place to help people where needed. The home is in the town centre, meaning local facilities and amenities are within close distance. We saw people were relaxed and comfortable in their environment, and people told us they like living there. The home appeared clean and well-maintained.

There are systems in place to protect people from abuse and harm. Access to the home is restricted to authorised individuals. Ongoing training ensures care staff are sufficiently skilled. Up-to-date policies support good practice and can assist staff to report a safeguarding concern and whistleblowing, should they be needed. Staff are up to date with safeguarding training and report they feel confident that if they raised an issue with the manager, it would be responded to. Recruitment is robust, and regular supervision supports continued development. Incidents and accidents are logged, and appropriate actions taken by the service.

Care and Support

We saw positive care and interactions between staff and people. Care and support is provided in a person-centred and dignified manner, with people appearing well cared for and appropriately dressed. We spoke to people who told us the home was “great”, they “love it there”, the staff are “fabulous”, and they “without a doubt” feel safe. People’s families told us they “would trust staff with their loved one’s life”, that “it’s not like what you’d expect a care home to be”, and were “really happy” with the home. People were able to lead lives of their choosing, telling us their wishes and views were respected. We viewed evidence of appropriate and timely referrals to health and other professionals, with recommendations and direction acted upon by the home. Medication is stored safely and appropriately, being administered and managed by trained care staff, and appropriately audited by management. The home has an up-to-date medication policy in place.

Care staff have up-to-date knowledge of people’s needs and personal goals. Personal plans are individualised, detailed, and outcome focused. Additional person-centred ‘This Is Me’ booklets are used. We saw evidence plans had been produced in partnership with people and their representatives, with relevant risk assessments in place. We saw plans are reviewed monthly and updated accordingly where necessary. Daily recordings and supplementary monitoring charts are in place, giving important information about people’s progress and identifying changes in care needs.

People benefit from a balanced diet. On the day of inspection, we viewed a variety of options on the menu, and people offered alternatives if needed. We saw evidence of people having drinks to help keep them hydrated and observed them being supported at mealtimes. People told us the food was “lovely” and “brilliant”. Dietary preferences are understood and available to kitchen staff.

People have regular opportunities to engage in activities. The home has an activity coordinator in place. We saw people taking part in a quiz. We viewed an abundance of evidence of people taking part in activities recently, where lots of creative ideas and resources were used to aid this. Entertainers visit the home, which people told us they enjoy. People told us “I can do what I want”, and “I’m having the time of my life”.

There are infection control measures in place to help keep people safe from the transmission of COVID-19 and other potential sources of infection. Staff have access to a large supply of appropriate PPE. There is an infection control policy in place. Cleaning staff have daily cleaning schedules, which we observed during the inspection.

Environment

People are supported in a town house-style building on two levels, located in the centre of Porthcawl near to the promenade. A stairlift is in place for access between levels. The home is secure from unauthorised visitors, with visitors required to sign in before entry. The home is clean, tidy, and free from malodours. Rooms we viewed are of a good size and comfortable. They are individualised to people's tastes and contain photos, decorations, and keepsakes, which promote a feeling of belonging. We spoke with people who told us they liked living at Pinehurst Rest Home. Progress and investment in the home has been made since the last inspection, including redecorating, and new carpeting and lighting throughout the home. The downstairs bathroom walls have recently been painted and bath hoist serviced. The RI told us she plans further refurbishment works. The service has two homely and comfortable lounge areas, where people can choose to spend their time. There were sufficient toilet and bathing facilities available at the home. A dining area is located to the rear of the kitchen, where people have meals. Communal areas are tidy and uncluttered. The kitchen facilities are appropriate for the home and achieved a Food Hygiene Rating of 4. There is a small garden area to the rear which has been patioed and decorated which people can make use of. The front of the building and the garden are decorated with flowers, which people at the service help the manager and housekeeper to maintain.

The service takes measures to ensure the home environment is safe. Substances hazardous to health are stored in cupboards, in line with Control of Substances Hazardous to Health (COSHH) regulations. We saw fire exits were clear of clutter and obstructions. There were no obvious trip hazards. Daily cleaning and laundry duties were being maintained. There is a maintenance person in place. Maintenance records confirm the routine testing of utilities. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal evacuation plans are in place, so staff understand the level of support people require in the event of an emergency.

Leadership and Management

People are supported by a team of care staff who are recruited safely. Staff files show appropriate recruitment arrangements and contain all legally required information. Care staff start work once pre-employment checks are complete. New staff have access to an induction programme, with on-going training in place for all staff. Care staff told us they feel they get the right amount of training. Training records show staff have up to date training in core areas of care.

Care staff feel supported in their role. They told us working at the service is “*amazing*”, there is a “*nice*” staff team, and morale is “*brilliant*”. Some care staff have worked for the service for many years, which helps facilitate continuity of care. Staff have regular supervision and yearly appraisals to reflect on their performance, identify support they might require, and discuss any issues. The manager told us staffing levels are worked out based on people’s level of need, with staffing levels able to be changed if any people experience a change in need. The rota showed target staffing levels were being met and was reflective of staffing on the day.

Appropriate governance, auditing and quality assurance arrangements are in place. Policies and procedures, such as for complaints, infection control, medication, and safeguarding, are in place. These systems help the service to self-evaluate and identify where improvements are required. The RI, who also undertakes the manager role, is central to all aspects of the operational and day-to-day running of the service, and has comprehensive knowledge and oversight of the service. We saw evidence of the RI undertaking the legally required three-monthly service visits and six-monthly quality of care reviews.

The service provides good information to the public. The Statement of Purpose sets out the service’s aims, values, and support provided. A written guide is available for people who use the service and their representatives. This contains practical information such as the complaints procedure.

We were told the home did not provide a service to people in Welsh at the time of the inspection, although could arrange written information if needed, and had staff who could speak Welsh.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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