



# Inspection Report on

**Florence Justice Christian Home**

**Florence Justice Residential Home  
19 Stow Park Circle  
Newport  
NP20 4HF**

## **Date Inspection Completed**

13/07/2023

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## About Florence Justice Christian Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Martin Phelps
Registered places	27
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">14 March 2023</a>
Does this service promote Welsh language and culture?	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 are happy with the care and support they receive. Staff present as respectful and kind. There are opportunities for people to take part in activities daily. Each person has a set of documentation in place. It covers all the areas in which they need care and support, and instructions for staff on how to support the person. Senior staff keep the documentation under review. Care workers are supported in their roles and receive good training to ensure they have the necessary skills to carry out their roles successfully.

The responsible individual (RI) maintains oversight of the service and they visit on a regular basis. Since our last inspection, they reviewed the leadership and management arrangements at the home. They have appointed an experienced manager who is registered with Social Care Wales and reinforced the leadership team with a manager dedicated to training and development activities.

The home provides people with suitable accommodation which feels homely and reflects individuals' needs and interests. Work to upgrade the main communal areas of the home has been completed in the last six months.

## Well-being

People receive the care and support they need and want. We observed warm and positive interactions between them and the care staff. We also saw care workers give additional support when people needed it. One person told us about their life in the home. They told the staff are friendly, there is good entertainment on certain days, and they get to choose the food they have. Visitors told us staff are respectful and kind. There was documentation in place for each person, this includes a description of their needs and how staff can best support them. The RI visits the service on a regular basis and speaks to people who use it and to visitors to seek people's views.

People are supported to remain as healthy as possible both physically and mentally. This includes supporting people with their medication and to eat and drink well when this is needed. Care workers and senior staff monitor people's health, and referrals and appointments with health professionals are arranged when necessary. Care workers assist people with their personal care and with taking care of their appearance. They also encourage people to take part in activities and to maintain meaningful relationships. This promotes their emotional well-being.

Measures are in place to protect people from abuse and neglect. Care staff receive training in safeguarding and have policies and procedures to guide them. There are risk management plans in place, and staff keep these up to date to keep people as safe as possible. The manager works with relevant agencies to ensure any restrictions placed on a person's liberty are only in their best interests. The home provides people with suitable accommodation which feels homely, reflects individuals' needs and interests and where there are good standards of hygiene.

## Care and Support

People receive the support they require when they need it. We observed care workers supporting people and noted a natural rapport between them. Care staff are encouraging and reassuring, and demonstrate a good understanding of people's needs. People told us they are happy with the support they receive from staff. We observed people are settled and content. The atmosphere is calm. People also access services from external professionals on a regular basis. Records show this includes GPs and district nurses. The manager told us they reviewed their staffing levels and an additional care worker is now on shift every morning.

There is documentation in place for each person. We saw the manager conducts a pre-assessment before people come to the home. They gather information from people and significant others including health care professionals. They also give a document called '*this is me*' to people and to their families if they wish to contribute. The document includes information about person's life history, their likes, dislikes and their interests. This information is used to set up people's personal plans. These cover all the areas in which they need care and support. They consist of a summary of their needs and instructions for staff on how to support the person.

Staff record the care and support delivered to each person. These daily records and people's plans are reviewed when there is any change and at least every three months. The manager and the RI told us about improvements to these systems. Going forward, people's plans will be reviewed at least every month. In addition the service provider has sourced hand-held devices for staff to record the care and support delivered in real-time. They said this will give staff more time to provide direct care and support to people. In addition to the regular personal plan reviews, the management operates a '*resident of the day*' system. Every day they check all of documentation relating to one person who lives at the service.

There are systems in place to ensure staff store and administer medication safely. These include the use of the system to dispense medication, regular audits, training for staff and assessment of their competencies.

## Environment

People live in an environment that meets their needs and promotes their well-being. The environment is homely and welcoming. There are communal areas including a dining room and three lounges. People can choose where to spend time and can spend time privately with relatives, friends, or external professionals in one of the smaller lounges. Bedrooms are personalised and reflect people's needs and interests. People have access to outdoor areas. We noted the main lounge and dining area have been re-decorated. There is new carpet in corridors. The RI told us maintenance is ongoing and when something needs to be done, they get it done.

There are systems in place to identify and deal with risks to people's health and safety. Maintenance staff at the home conduct regular health and safety checks. External contractors complete specialist checks such as electrical checks. Overall, the service provider ensures all necessary risk assessments, audits and checks are conducted. We discussed the records kept in relation to health and safety matters with the RI. They told us systems in place will be reviewed to ensure the latest risk assessments, checks and audits are easily accessible when monitoring activities take place. Each person who uses the service has a personal emergency evacuation plan in place. The manager told us these will be checked each month at the same time as people's other personal care plans are reviewed. The home has a food hygiene rating of five which means standards are very good.

## Leadership and Management

The RI maintains oversight of the service and they visit on a regular basis. Since our last inspection, the service provider has reviewed the arrangements in place to support the running of the service. They told us about their assessment of the service and about the changes they want to see implemented to improve the service people receive. They have strengthened the leadership and management team. An experienced manager who is registered with Social Care Wales has started; they are being fully inducted to the service. A deputy manager and a manager in charge of training and development assist them. They each have a defined area of responsibility which is recorded. The RI told us the current arrangements will be reviewed once people settle into their respective roles. They also told us they have asked the team to streamline the systems in place so that care staff and the deputy manager spend as much time as possible providing hands-on care and support to people.

There are arrangements in place to recruit, train, and support staff. We examined recruitment records. These show the service provider carries out checks before a person can start working at the home. We discussed the checks with the manager and RI. They told us they are continuing to strengthen these to ensure the relevant references are sought and they have staff's full employment histories on file.

Supervision and training records evidence processes are in place for supporting and developing staff. Staff said they receive supervision, training and are supported by senior staff and colleagues. They spoke to us about the transition to the new leadership and management structure, wanting to know who is responsible for which area of work and what their own responsibilities are. Records and discussions with the RI and manager show work is currently taking place to embed the new structure and to offer improved training opportunities to all staff. These opportunities include the training manager spending one-to-one time with staff and taking into account each person's learning styles. They told us this will ensure each member of staff can achieve the best possible learning outcomes and in turn provide better care and support to people who use the service.

The RI maintains close oversight of financial arrangements and investment in the service. There is evidence of continuous investment by the provider to maintain the service effectively. This includes investment to maintain and improve the environment, and sufficient staffing levels which are appropriate to give people the support they need and want.

### 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
59	The service provider must ensure that records relating to individuals are accurate and up to date.	Achieved
66	The lines of accountability, delegation and responsibilities between the RI and the manager are not set out in writing.	Achieved
35	The service provider must obtain a full employment history from each member of staff and must check all reasons why staff left previous employment with vulnerable adults and/or children.	Achieved
7	The service provider must keep the statement of purpose under review.	Achieved

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