

Inspection Report on

Victoria House Care Home

Church Street Llangadog SA19 9AA

Date Inspection Completed

13/10/2023

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About Victoria House Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Elidyr Communities Trust
Registered places	10
Language of the service	English
Previous Care Inspectorate Wales inspection	27/10/2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Care staff understand people's physical and emotional well-being needs and deliver person-centred care. People have access to health and social care services, and they participate in activities, are encouraged to lead a healthy lifestyle, and have opportunities to develop their independence. Personal plans and risk assessments focus on people achieving positive outcomes. The area for improvement in relation to the review of personal plans has been achieved.

The accommodation is suitable and provides sufficient space to meet the needs of people who live in the home. They have access to facilities to develop their independent living skills and they have access to a well-maintained garden area.

The service is operating in line with the statement of purpose and the provider has ensured a manager is appointed, these areas for improvement have been achieved. The responsible individual (RI) has oversight of the service through effective quality assurance processes. Recruitment practices and supporting care staff have improved and these areas for improvement have been achieved.

Well-being

The service has good systems in place to ensure people have a voice and they are listened to. House meetings take place regularly and most people in the home participate, those who choose not to are spoken to separately. People can share their views about different things going on in the home and have opportunities to contribute to decision making. There is a guide to the service in place which is up to date and in an appropriate format for people living in the home. The service is working towards being able to provide the 'Active Offer' of the Welsh language. Key documentation is completed bilingually, and the provider is striving to improve in this area.

Good arrangements are in place to meet people's health needs. People access various health and social care services. Care staff support people to attend appointments and access services which address their individual needs. Care staff encourage people to lead a healthy lifestyle through physical activity and healthy eating.

People can do things that matter to them. The service provider encourages and supports people to participate in community activities, work experience and social events. The service operates a weaver workshop and craft shop in the village where people gain work experience. Many people in the home attend the weaver workshop a day or two a week with items being sold in a craft shop. People told us they enjoy attending the weavery and spending time with their friends.

Family visits and socialising with friends is promoted, when safe to do so. Care staff promote people's relationships with their families and welcome relatives to the home. Some people do not have family who can visit regularly, and the service ensures everyone has opportunities to celebrate special occasions with people who are important to them. Care staff will make these arrangements and plan celebrations for people when needed. People enjoy holidays supported by care staff or family members.

Care staff know people's likes and dislikes and identify activities people enjoy. Care staff complete daily records which show people participate in activities in the home and in the community. People and care staff enjoy spending time together and relationships between them are positive. We saw warm and respectful interactions throughout our visit.

The home is clean and tidy and contains facilities which enable people to develop their independent living skills. Relevant health and safety checks are undertaken as required and repairs are identified and carried out in a timely way.

Safeguarding arrangements are in place and people's rights are respected and upheld. Care staff and volunteers all complete safeguarding training and there is a low level of incidents within the home.

Care and Support

People living in the home are settled and care staff treat them with respect and promote their personal development. Care staff know people well and understand their needs and behaviours. The team of care staff has remained stable and unchanged since the last inspection and people are receiving continuity of care. The service is supported by volunteers and people living in the home are involved in discussions prior to a new volunteer joining the home to ensure they are prepared for their arrival.

People's care and support needs are monitored and reviewed, and changes are made in line with developing needs and circumstances. People contribute to the development of personal plans to ensure they are personalised, and their preferences are known. This provides care staff with important information on how best to achieve people's personal outcomes. The process for reviewing personal plans has improved and the provider is developing systems to ensure reviews are meaningful and completed within the required timescales. The area for improvement in relation to the review of personal plans has been achieved.

Care staff spend regular one to one time with people to build trusting relationships. People learn to cook, do their own laundry, and clean their rooms. There are good routines in the home and people know what is happening day to day. Care staff complete daily records which include sufficient detail around key information.

People's physical and emotional health needs are promoted and monitored. Individual health conditions are known and recorded within their care documents. Arrangements are made for people to see health professionals when required and care staff follow the advice and guidance provided.

There are processes in place for the safe storage and administration of medication. Records show that people receive medication at the right time and care staff receive training to safely administer medication.

Environment

The home is situated in a village and people access nearby towns via public transport or the home's transport arrangements. People live in a home which has facilities and equipment to meet their needs and support them to achieve positive personal outcomes. The home is clean, tidy, and comfortable with sufficient space for people to spend time with others or on their own. The communal living areas of the home are clean, well decorated and homely. There are photos and items people have made on display and soft furnishings and decorative items which gives a warm and homely feel.

To the rear of the property there is a large garden with seating areas, lawns, a greenhouse and raised beds. A new patio area provides additional outside space which people use and enjoy. This provides an additional outdoor seating area for people to use which is located close to the house and easily accessible for all.

People have bedrooms they can personalise, and people spoken to told us they like their bedrooms. Some people have lived in the home for a significant number of years and are very settled. There are well established routines regarding the cleaning of communal areas with care staff support where appropriate. Kitchen and laundry facilities provide people with opportunities to develop their independence skills. The kitchen has sufficient seating and provides a good space for people to socialise and eat together. There is a large dining table, and the kitchen is well equipped and allows for people to help prepare their meals and snacks.

The provider is considering the suitability of facilities within the home and planning for people's developing needs. The provider is striving to ensure people can continue living in their home for as long as possible and planning the required adaptations.

A record is maintained of all visitors to the home, on arrival we were asked to show identification and sign the visitor book. Procedures are in place to ensure confidential information is stored securely. There are regular health and safety checks as part of the daily routine of the home, including fridge and freezer temperatures and food hygiene checks.

Records show regular testing of fire safety equipment and fire evacuation drills are completed. The fire risk assessment was reviewed in April 2023 and the RI has provided assurances any action required will be completed in a timely manner.

Leadership and Management

Victoria House is operating with sufficient care and competence in accordance with the statement of purpose. The area for improvement in relation to the statement of purpose has been achieved.

The provider has ensured the person appointed as manager for the service has the appropriate knowledge, skills, and competence. There has been a restructure to ensure the person appointed as manager is the person responsible for the day to day running of the home. The area for improvement in relation to the appointment of a manager has been achieved.

There are a suitable number of skilled, experienced, and trained care staff to support people to achieve their well-being outcomes. Recruitment practices have improved to ensure there are more effective and robust systems in place for the safe recruitment of care staff. People living in the home are involved in the recruitment of new care staff and form part of the interview panel. The service is currently fully staffed, and the support of agency care staff is not required. The area for improvement in relation to recruitment has been achieved.

People benefit from staff that are well supported and trained for their role. Care staff receive regular supervision which is an opportunity to seek support and reflect on their professional development. Team meetings are held monthly, and care staff and management discuss how people are progressing and what is working well and what could be done differently. Care staff are trained in the required areas and topics relevant to their role. Newly employed care staff complete the service provider's induction programme and probation period. The area for improvement in relation to supporting and developing staff has been achieved.

The governance arrangements support people's well-being outcomes and compliance with the regulations. The home manager oversees the day-to-day running of the home and is well supported by a deputy manager and a stable team of care staff and volunteers. Quality assurance measures are effective, and the RI visits the home at a minimum of once every three months. During these visits the RI spends time talking with people and care staff, reviewing the environment, and viewing a sample of records. The quality care report is completed every six months which evaluates the quality and safety of 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	
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
36	The service provider has not ensured or cannot show that care staff have completed an induction appropriate to their role or satisfactorily completed a probationary period in the prescribed timescales. Staff have not had regular supervision.	Achieved
35	The service provider has not always carried out required pre-employment checks.	Achieved
67	The person appointed to manage the service is not responsible for the day to day delivery of the service.	Achieved
7	The service provider has not kept the statement of purpose under review as required, and where it has been updated a copy has not been provided to the regulator. It does not accurately reflect the management arrangements of the service, or changes to legislation and guidance.	Achieved
16	The service provider has not carried out a review of people's personal plans at least three monthly.	Achieved

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Date Published 05/12/2023