



Inspection Report on

Apley Lodge Residential Home

Apley Lodge Residential Home

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**Apley Terrace
Pembroke Dock
SA72 6HJ**

Date Inspection Completed

28/10/2022

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About Apley Lodge Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Safe Haven Care Ltd
Registered places	24
Language of the service	English
Previous Care Inspectorate Wales inspection	4 April 2019
Does this service provide the Welsh Language active offer?	This service is working towards achieving the Active Offer of the Welsh Language.

Summary

Apley Lodge has a welcoming atmosphere where people are encouraged to socialise with others and take part in various activities. People have regular interactions with staff, who are visible and attentive to their needs. The service promotes people's health and well being. Care workers have a very good knowledge of people's needs and preferences. They support people in line with their personal plans and make sure they have access to the medical and specialist services they need.

Care workers are appropriately trained and feel supported in their roles. The management is approachable and committed to making positive changes. The service is taking action to employ additional staff within the service. Governance arrangements are in place. The RI maintains very close links with the care home and is present in the service almost every day. Quality of care reviews are carried out.

The service implemented appropriate measures in response to COVI-19. People live in a clean environment and are comfortable in their surroundings. The home and its facilities are generally well maintained. Some areas are in need of redecoration and refurbishment and this is planned for the near future.

Well-being

The service promotes people's rights. Staff treat people with dignity and respect and are committed to providing a service that enriches people's lives. People's care preferences and routines are identified within personal plans. There is limited evidence of people's involvement in the development and review of their personal plans. The manager, who is relatively new to the service, is working hard to review and update all care plans and intends to ensure that people's inclusion in their plans is identified. Care workers have a good knowledge and understanding of people's backgrounds. People are consulted regularly on an informal individual basis about what they think about the care they receive and the service as a whole.

People's individual care and support needs are recognised and understood. A range of assessments and personal plans guide care workers in promoting people's physical and mental well-being. These are updated following changes in people's needs and any new advice given by health and social care professionals. Daily records show that people receive the care and support they need, in line with their personal plans. Work is underway to improve the quality of the daily records as they vary in the quality of the information they contain. The manager intends to offer care workers training in this area in order to ensure consistency and value to the records. People have positive interactions with care workers and are able to participate in some activities which they enjoy. Records show that people receive their prescribed medication. The service promotes a good standard of hygiene and infection control to reduce risks of cross infection.

There are systems in place to help protect people from harm. Care workers are visible and attentive to people's needs. Equipment is in place, as needed, to promote people's safety and comfort. Care workers complete training in relation to safeguarding vulnerable adults. They are familiar with and know how to access the service's policies and procedures. Care workers respond promptly to people's requests for assistance. They receive mandatory training and training in specialist areas, such as dementia care, in order that they can continue to meet people's changing needs effectively.

People live in clean, comfortable accommodation. Areas of the home have been identified as needing to be refurbished and upgraded. Communal and private rooms are generally homely and welcoming. Equipment is serviced to ensure it is safe for use. Environmental safety measures are in place and routine health and safety checks are carried out.

Care and Support

People receive care and support from an attentive team of staff. We saw care workers tending to people's needs and requests in a kind and respectful way. People appeared to enjoy taking part in a group activity in the lounge facilitated by care workers. People told us that they comfortable living at Apley Lodge and feel they are well cared for.

Assessments are carried out to ensure the service can cater for people's particular needs before they move into the home. Risk assessments and personal plans outline how people's care and support needs should be met, taking into account their care preferences and routines. Personal plans are reviewed and updated regularly. The manager was in the process of auditing all care plans in order to ensure that they contained relevant, accurate and up to date information. People's involvement in their plan of care is not always clear and the manager intends to address this. Records show that people receive input from medical and specialist services, as needed, to promote their health and well-being.

People receive appropriate support with their medication. People receive their prescribed medication at the correct time. The service has facilities to store medicines securely.

The service promotes a good standard of hygiene and infection control. We found the home and its facilities to be clean and free from malodour. People's bedrooms and equipment used are kept clean and hygienic. Appropriate measures have been implemented to reduce COVID-19 and other infection risks. Personal protective equipment (PPE) and waste bins are available and accessible. Care workers are clear about their responsibility to comply with infection control guidance.

Environment

Apley Lodge provides a homely environment for people to live in. People expressed satisfaction with the home and their interactions with staff. The service has facilities to support people to achieve their personal outcomes. People move freely around the home and are encouraged to socialise. We saw that people's bedrooms are suitably furnished and decorated. Soft furnishings are homely in nature. People told us they are pleased with their rooms, which include personal touches and items that are important to them. People appeared to be comfortable in the communal lounge and we saw people moving about within the home, both independently and with assistance.

People have personal emergency evacuation plans (PEEP's) in the event of the need to evacuate the building in an emergency. Cleaning substances hazardous to health are stored appropriately.

People live in an environment that promotes their safety and is clean and generally well maintained. Access to the home is restricted to authorised people. A keypad system was in place preventing visitors gaining entry into the home without permission. A visitor's book was also being used to monitor those entering and leaving the premises. Safety checks and maintenance of equipment are carried out. Health and safety checks are carried out, including fridge and freezer temperatures and electrical testing for fixed and portable appliances. People's confidentiality is upheld. We saw that confidential information was being stored securely.

Leadership and Management

Governance arrangements are in place to promote the smooth running of the service. Policies and procedures are in place to underpin care provided. The RI is very present within the home and knows all staff and people living in the home well. The manager is very visible and has regular, meaningful interactions with residents. We were told that staffing the home has been challenging over recent months but the manager and RI are confident that new staff are being recruited and that this will relieve the situation. The service has been through a difficult period of time due to the impact of Covid-19. Although care workers told us that at times they felt “*tired*” and “*overwhelmed*” they told us that the team had worked well together and had supported one another. We found staff to be friendly and professional, focusing on people’s physical, emotional and social well-being.

The RI is open to feedback and available to staff during her regular visits to the service. The RI visits the home most days and completes the required quality reports.

We found staff personnel files to be in order, containing the required recruitment documents, such as two appropriate employment references and evidence of renewed Disclosure and Barring Services (DBS) checks.

Care workers receive the training and support they need to carry out their roles. Care workers complete a range of mandatory and specialist training, which includes moving and handling, nutrition, dementia care and safeguarding vulnerable adults. Care workers told us they feel comfortable approaching the manager and RI and are confident they would address any issues they might bring to them. Records show that care workers receive formal supervision at least every three months, which allows them to reflect on their performance and discuss any training needs. Communication with staff is consistent and staff feel they are consulted about and involved in decisions regarding the running of the home.

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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Date Published 13/12/2022