



# Inspection Report on

**Woodfield Care Home (Nursing)**

**Woodfield  
Narberth  
SA67 8EH**

**Date Inspection Completed**

*27/07/2023*

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## About Woodfield Care Home (Nursing)

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Woodhill Care Ltd
Registered places	24
Language of the service	English
Previous Care Inspectorate Wales inspection	18 July 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

People living in Woodfield are supported by a caring staff team. The staff team know the residents well and support them, whenever possible, to make choices about their daily lives. Personal plans are person-centred, up to date and reflect people's needs. They are reviewed and updated regularly. Some activities are arranged for people to take part in and additional care staff would enable people to participate in increased activities which are important to them.

Care staff receive supervisions and appraisals and receive the training required to meet people's needs. There are governance arrangements in place and the Responsible Individual (RI) visits the home to oversee the management arrangements. The views and opinions of people, relatives and staff are gathered to help to improve and develop the service and quality of care review reports are produced. Relatives consistently told us that they are happy with the care and support provided. Environmental challenges are presented by the home being a period building. Whilst some attractive period features are present, parts of the home would benefit from some refurbishment and repair.

## Well-being

The service supports people's rights and choices. We saw care staff supporting people to make choices about preferred meals, where they spend their day and how they occupy their time. People looked comfortable speaking with care staff and we overheard good natured exchanges taking place.

People are safe and protected from harm and abuse. Care staff know their responsibilities to report any safeguarding concerns and were able to describe how they would do this. They are confident their manager would take the necessary action to ensure people are properly safeguarded. The building is secure and safe from unauthorised access. Recruitment measures ensure the service employs care staff who have the right skills and approach to care. People are supported by care staff who receive supervision and training. Policies are in place to support safe practices. The service undertakes appropriate security and fire safety checks to make sure people remain as safe as possible.

Care staff are committed to promoting people's physical and emotional well-being. Personal plans and risk assessments ensure care staff understand the level of support people require. Medication is administered as prescribed. Feedback indicates people have positive relationships with staff and benefit from regular contact with family members. The service communicates with health and social care professionals to ensure people remain as well as they can be. Some activities offer opportunities for people to engage with others and occupy their day but these are limited. Outside entertainers visit the service and indoor activities are available but care staff told us that they have insufficient time to spend carrying out activities with people, either collectively or on an individual basis.

## Care and Support

People are treated with dignity and respect. Many of the care staff working at the service have been in post for a number of years. This consistency has helped people to build up and maintain positive relationships with staff. We observed people looking relaxed and comfortable and noted interactions appeared warm, natural and friendly. We spoke to people and their relatives, who provided positive feedback about the care and support provided.

People have personal plans and risk assessments in place to explain how their care should be provided. Overall, personal plans we viewed show the information available to staff is sufficiently detailed, up to date and reflects people's current needs. People's preferences are documented, including information on their routines, likes and dislikes. Care files include up to date risk assessments and strategies on how to support people to remain safe. We saw evidence that reviews and daily records are completed. The service applies for Deprivation of Liberty Safeguards (DoLS) when required to ensure any restrictions are lawful and proportionate.

The service has systems in place to support people to remain as well as they can be. Medication is stored appropriately in a locked cupboard. Medication Administration Record (MAR) charts show people receive their medication correctly and in a timely manner. The service liaises with relevant social and healthcare professionals and people are supported to attend medical appointments. Food menus appear varied and kitchen staff cater for dietary needs and preferences. We saw sensitive and caring interactions between staff and people living in the home. We were consistently told by staff however that they felt they would be able to spend more quality time with people, and assist them to engage in meaningful activities of their choosing, if additional staff were available. We were told that the RI is aware of this and is actively endeavouring to recruit staff to the service.

## Environment

People living in Woodfield appear to be satisfied with their environment. Two lounges are available to people and there are a number of smaller sitting areas which people can use if they wish. All areas of the building appear clean and free from clutter and people can move freely between the different areas of the home. Woodfield is a period property and maintains some of its original features. Some refurbishment and repair has taken place since the last inspection. A number of windows have been replaced and the kitchen was in the process of refurbishment at the time of the inspection. We were told of plans to move the dining room in order to make better use of that area of the home. Parts of the home however would still benefit from attention. Some of the carpets are worn and staff told us that the checked floor tiles in the hallway pose difficulties for people who live with dementia due to their colour and pattern.

People's individual bedrooms are comfortable and personalised with their own possessions, such as photographs, ornaments and small items of furniture. There is a large garden which is laid mainly to lawn with established shrubs and trees. An enclosed courtyard is available and we were told that this is used mainly by people and their visitors. We saw that the kitchen is well stocked. We found good infection control measures in place. Care, domestic and kitchen staff confirm they have access to sufficient supplies and equipment to undertake their job.

There are ongoing safety and maintenance arrangements in place. The building is secure from unauthorised entry and environmental safety checks are regularly carried out. Utility and fire safety checks are in place. Personal evacuation plans have been developed to enable staff to understand the level of support people require in the event of an emergency evacuation. The service carries out testing of electrical appliances (PAT). We found substances hazardous to health are stored safely and communal areas appear free from hazards. Personal files and documentation is stored safely.

## Leadership and Management

Safe recruitment systems are in place. The service undertakes a number of checks prior to staff member starting their employment. This ensures any potential employee is fit and suitable to work with vulnerable people. Recruitment records show all care staff have a current Disclosure and Barring Service check (DBS), current photo ID and references.

Staff are appropriately trained to carry out their roles effectively. Staff tell us they complete an ongoing programme of training around safeguarding and supporting people in the correct way. The staff training matrix shows that most staff have up to date training in mandatory areas and specialist training is offered to meet the specific needs of the people who they care for.

Governance arrangements are in place and there are systems to support the day to day running of the service. The RI visits the home in line with their regulatory duties. They consult with people, their relatives and staff and produce quality review reports as required. Accidents and incidents are reported promptly to the relevant agencies. Policies are in place to support good practice guidelines. Staff consistently told us that they feel that additional staff would enable them to spend more time with people and to allow them to support people to participate in daily activities. Rotas showed that there are occasions when staffing levels would benefit from additional staff to support the needs of people living at the service.

People benefit from staff who work well as a team. Care staff told us they are supportive of each other and work well together. The service provides staff supervision to discuss day-to-day practices, policies and raise any issues or concerns. Staff are aware of their various roles and responsibilities.

### 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
80	A quality report was made available but this does not provide any specific information about the service. It does not set out details of engagement with people; relatives; other stakeholders and staff. It does not consider training and other quality metrics such as incidents and complaints.	Achieved
36	Care workers are not receiving supervision in accordance with regulation.	Achieved
21	Records do not provide evidence people are receiving their care as set out as needed in the care plans.	Achieved

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**Date Published** 13/11/2023