



Inspection Report on

Rhosbrook Care Home

Barry

Date Inspection Completed

04/04/2023

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About Rhosbrook Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Valebrook Care Homes Ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	30 September 2019
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 told us they are happy with the care and support they receive from kind and dedicated care staff. The environment meets people's needs and people enjoy living close to local amenities. People have opportunities to take part in activities that are of interest to them. Care staff are knowledgeable and compassionate. We saw positive interactions between care staff and people. People are spoken to with dignity and respect. Care staff are responsive to changes in people's mental well-being and are proactive in a positive and agreed way. The responsible individual (RI) and management team are consistently available to people, staff, and visitors. There are systems in place to monitor the quality of the service. We saw daily records are well maintained and keep staff informed of the care and support people need, but some medication records are incomplete. Good levels of training and supervision ensures care staff know how to keep people safe and protect them from harm. The provider values feedback from people who use the service.

Well-being

People appear settled and comfortable and told us they like living in the home. We saw people enjoying each other's company and taking part in activities together. The provider arranges twice weekly social gatherings at a day service where we saw people taking part in fun and stimulating activities. During the inspection we saw people taking trips out of the home with family members. The service facilitates and supports family contact and safe measures are in place for those who have additional needs to maintain relationships outside of the home.

People are supported to make decisions that are in their best interest. We found appropriate procedures in place for people who require additional measures to keep them safe. The provider supports people to make choices relating to their day-to-day care and support. Access to hobbies and interests are individualised.

There is opportunity for relatives to provide formal feedback to the service and to attend important meetings to review the care and support of people. Engagement with people who use the service is positive and frequent meetings take place to enable them to have their say.

Well informed and trained care staff protect people from abuse and neglect. Care staff know how to recognise signs of abuse and know how to raise a concern should a person's well-being be compromised. People and their representatives are provided with ample information about the service that includes how to raise a concern or complaint. Systems are in place to appropriately manage personal monies. Risk assessments and documentation is in place to protect people and are kept up to date.

Care and Support

Care and support is provided to a high standard and people can expect continuity of care from an established care team. Care staff know people very well and have an excellent understanding of people's preferences. The provider completes a detailed personal plan which informs staff of essential and important information to ensure that people achieve their personal outcomes. The provider invites people and their representatives to jointly review the personal plan every three months.

Care is provided with dignity and respect. The provider supports people to manage their mental well-being and works proactively with other professionals. The provider completes accurate records relating to incidents and events. All records are stored securely and shared appropriately with other health professionals. Risk assessments are in place for those who require them.

Care staff respond promptly to changes in health needs and complete necessary documentation to inform others of the changes. Staff complete daily records to monitor and assess people's health and well-being. People have regular access to health care services and the provider completes referrals to other health professionals as and when required. People are well groomed and appear well cared for. The provider encourages and promotes independent living skills. Care staff are kind, sensitive and show genuine affection to people.

People have access to home cooked meals; fresh food is purchased frequently, and meal choices are given daily. The service offers drinks and snacks throughout the day.

There are good systems in place relating to infection control which protects people from harm. Care staff use personal protective equipment appropriately.

Medication is stored safely and securely. Good working systems are in place for medication stock control. Administration of daily medication is properly recorded but not all documentation is complete for as required (PRN) medication. We advise the service this is an area of improvement, and we expect the provider to take action to rectify this and we will follow this up at the next inspection.

Care staff complete accurate and detailed daily recordings relating to the care and support people receive. Communication within the staff team is good and essential information is shared.

Environment

The home is purpose built and is as described in the Statement of Purpose. The environment meets the needs of the people living there and has plenty of space for people to relax in various areas of the home. The home is modern, clean, warm, and uncluttered. Furnishings are in good order. People have their own rooms that are personalised. All bedrooms are en-suite, most are maintained to a good standard, but we found one bathroom with some damage which could cause harm. The provider is taking immediate steps to make necessary repairs.

The provider has created a spacious and homely environment. We found some upstairs windows unlocked and could be a risk to people. The provider is taking immediate action to ensure safety measures are in place. The provider is quick to respond to maintenance needs of the home and completes environmental inspections every three months.

There are good cleaning regimes in place and care staff complete paperwork to document the facilities being checked, such as water systems and fridge temperatures. The kitchen is well stocked with fresh food. Some areas in the home are restricted to protect people from harm. Systems are in place to ensure the security of the home and the safety of people living there. There is a choice of rooms where people can receive visitors.

Equipment in the home is well maintained and records are kept in order. External grounds are accessible. During the inspection it was evident that people had participated in potting seedlings in readiness to plant in the garden. People share mealtimes together in the kitchen diner. People's bedding is clean, and clothing is freshly laundered. Medication and personal files are stored securely in a locked staff room. The temperature of the room is checked, on the day of the inspection we found the room to be warm but within range for safe medication storage.

We found individual Personal Emergency Evacuation Plans. Some details of the fire risk assessment are incorrect. Care staff told us they receive training to safely evacuate people in the event of an emergency and all have completed fire safety training. Documentation relating to fire drills is inadequate, the provider is taking immediate steps to improve the recordings.

Leadership and Management

The provider produces a Statement of Purpose and a service user guide that accurately describes the service. The RI and management team are consistently available to care staff, people, and their representatives. Care staff are kept well informed and attend regular staff meetings; they receive timely supervision and practical competencies are assessed annually. We found minor inconsistencies in risk assessment documentation available to staff and some lacked detail. We saw policies and procedures in place that are kept up to date.

The provider follows safe recruitment processes and staff complete a thorough induction. All staff are up to date with core training, and specialist training is available to meet specific needs. Most staff have achieved relevant qualifications in Health and Social Care and are registered with Social Care Wales, the workforce regulator. Promoting staff development is a strength of the service. Care staff consistently told us they feel supported by the provider, they feel listened to and respected. Staff told us they have complete confidence the provider will act promptly to concerns that may impact on people's well-being. We found a nurturing and caring culture across the staff team which positively impacts people's well-being and personal outcomes.

People's views and opinions are captured by the provider in a suitable format and people are encouraged to have their say. People have access to family or representatives to advocate on their behalf. The complaints procedure is available and there is a process in place to record concerns, complaints, and compliments. The RI visits the home formally every three months to speak with people. In addition, people attend house meetings to discuss things that matter to them and to provide feedback on the service they receive. The provider invites feedback from visiting professionals to the service through engagement questionnaires.

The RI visits the home to seek the views of care staff. The feedback from staff informs the quality assurance process. The quality care review is detailed and highlights the service is performing well, with clear action plans and outcomes being recorded.

Governance and oversight of the service is good, and the RI informs the provider on how the service is performing on a regular basis. Promoting positive outcomes and delivering high standards of care for people is at the heart 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
58	The service provider has failed to make accurate recordings relating to medication administration	New

Date Published 16/05/2023