

Inspection Report on

The White House

The White House Briary Way Bridgend CF31 2PT

Date Inspection Completed

18/10/2022

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About The White House

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Homestyle Care Limited
Registered places	7
Language of the service	English
Previous Care Inspectorate Wales inspection	[Manual Insert] 16/03/2022
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer' of the Welsh language and demonstrates an effort to promoting the use of the Welsh language and culture

Summary

This was a focused inspection, and on this occasion, we did not consider the physical environment. People appear happy, settled, and well cared for. Personal plans ensure care workers know the level of support each person requires. Care workers treat people with respect and dignity and tailored activities are available for individuals. Since the last inspection, improvements have been made regarding the medication practices and staff annual appraisals.

Well-being

People have a voice and are treated with dignity and respect by care workers who know them well. People can enjoy their day in the privacy of their own room or socialising in communal areas with others. Menus are varied and the service offers daily activities so people can positively occupy their time. People are consulted individually and can make suggestions for the improvement of the service. Care workers have good relationships with people and know how to support them well. We received positive feedback from the staff we spoke with, who told us they feel valued and supported by the manager.

People are safe and protected from harm. We did not identify hazards during the visit and the entrance and exits to the home are secure. Staff practice good infection control as required. The service has adult protection procedures in place, which include safeguarding, whistleblowing, and complaints policies. Staff we spoke with confirmed they would raise concerns if they had them.

People have support to remain healthy. People receive support to attend medical/health appointments and consultations with other professionals which are appropriately recorded. Records indicate that people are supported to take their medication safely. People have up to date behaviour management plans to help them with emotional health and to stay safe.

Care and Support

As this was a focused inspection, to test areas of improvement raised at our last inspection, we have not considered this theme in full.

Personal plans are in place for each person and cover key areas of people's care and support needs. They set out how care workers best support individuals to meet these needs. Plans include information relating to health issues and the support people need with their medication. The management of medicine at the service has improved. Protocols for the use of 'as required' and controlled drug medication are being followed. The service completes checks, which ensures medication is stored at correct temperatures, and therefore remains effective. Medication audits ensure staff maintain good practices and identify any areas of improvement. A sample of medication records we saw did not contain gaps or errors. Medication is stored safely in a locked facility and controlled drugs and stock checks are managed effectively. We received positive comments from social care and health professionals on service delivery and the level of detail in care plans.

The service has procedures and measures in place to keep people safe. Care workers are aware of their responsibilities to report safeguarding concerns. They are also aware of the whistleblowing procedure and are confident to use it if the need arises. Training for staff on safeguarding people at risk is up to date. The information held by CIW indicates that reportable incidents are addressed appropriately.

Environment

As this was a focused inspection, we have not considered the environment. We will examine this theme at the next inspection.

Leadership and Management

As this was a focused inspection, we have not considered the leadership and management in full. We will examine this theme fully at the next inspection.

Supervision and training records are well organised. Improvements have been made to ensure all care workers receive an annual appraisal. The records also show care workers receive regular one-to-one supervisions to reflect on their practice, discuss any issues and identify development needs. Records indicate staff receive the necessary training to undertake their roles. Staff told us they felt well supported and valued by the home's manager and are confident to approach her if they have any concerns.

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	N/A
	inspection	

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