



Inspection Report on

Heathfield Lodge Ltd

**Heathfield Lodge
35 Heathfield
Swansea
SA1 6EJ**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

28th June 2022

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About Heathfield Lodge Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Heathfield Lodge Limited
Registered places	16
Language of the service	Both
Previous Care Inspectorate Wales inspection	03.12.2019
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 intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

There is good governance and oversight of the service. All care workers told us they receive regular formal and informal support. People are well supported and cared for by dedicated, committed and trained care workers and a supportive management team. All feedback gathered as part of the inspection was very positive about the culture in the service and people informed us, they are happy and feel safe. Relatives also confirmed the service provided is of a good standard. There are processes in place to help maximise people's engagement in support planning. We saw people have made clear progress in relation to outcomes detailed in support planning documentation. Staffing levels are appropriate and align with people's needs and outcomes.

The environment is very well presented, maintained, clean and in accordance with the objectives detailed in the statement of purpose (SOP). The service structure promotes outcome focused care and support, inclusion and skills development. Safety checks and service schedules are completed in-line with current requirements. Some works need completion to fully meet an electrical inspection finding. There are good infection control and Covid 19 preventative measures in operation. There are robust recruitment checks in place and care workers receive a thorough induction and training to perform their roles competently. Some improvements are required in relation to ensuring all care worker training is current and recruitment documentation is fully in place. Also, that staff recordings fully capture incidents and risk.

Well-being

People are treated with dignity and respect. We saw positive interactions between care workers and people throughout the inspection. People informed us they feel safe living in the home and that they are consulted about their support needs. We received positive feedback from people during the inspection about living in the service and the care and support provided. We spoke to relatives and received very positive feedback. One relative told us *“very happy with care and support provided, they are wonderful”*, and another said; *“all positive feedback the care is fantastic”*. People are supported to maintain and develop skills. People told us they complete a wide range of independent living skills such as cooking, cleaning and laundry with support as needed. People access their local community with support in line with risk and support plans. We spoke to care workers and viewed staffing rotas. All confirmed there are good staffing levels currently ensuring people’s needs are fully met. The manager told us recruitment is very positive currently and new care workers have recently been appointed.

There is good oversight of the quality of care provision from managers and the responsible individual (RI). The RI completes regular visits to the service. Care workers, people and relatives informed us communication with managers is good and issues reported, are acted on promptly and appropriately. Personal plans are clear, informative and detailed, they are outcome focused and relate to care staff recordings and risk planning. Recording of risk in relation to one person was inconsistent. There are plans to change or replace the existing online recording system to help improve this. The service also uses specific assessment tools to measure progress in relation to mental health and recovery. The provider employs specialist professionals to enhance and support service provision. We saw records of internal and external professional involvement in people’s care. People are making good progress and are benefitting from living in the service. Care workers and managers receive a wide range of appropriate training to ensure they are fully able to meet people’s needs and outcomes. However; not all specialist training is up to date for all care workers. Care workers receive regular planned supervisions and appraisals.

The environment is well maintained, safe and provided in accordance with the objectives defined in the SOP. People benefit from a service that promotes and supports recovery and the promotion of independent living skills. People are safe and routines such as fire checks, gas and electric safety certificates were viewed on inspection. There is some outstanding maintenance work to complete following a previous electrical inspection. This work is due to be completed shortly. Administration and storage procedures for medication are safe, appropriate and in line with guidance. People are protected from neglect and abuse as care workers know what to look out for and how to raise concerns. Care workers are trained in safeguarding and there are clear and regularly reviewed procedures and risk plans to guide them. Care is provided in accordance with protocols covering capacity and restriction of freedom.

Care and Support

Overall, care planning documentation for people is accurate and up to date to meet care and support needs. We looked at two electronic care files and saw personal plans which include risk assessments are in place and regularly reviewed. These are supplemented with 'my meeting' records which indicate people are consulted and included in relation to care and support planning. We also saw specialist assessments and intervention are in place and documented where necessary and appropriate. The service is supported by specialist professionals employed by the provider such as occupational therapy, physiotherapy and behavioural practitioners. Care records are generally robust and detailed, however one record is inconsistent in relation to documenting outcomes following an incident. This was discussed with the manager and RI, we were told new alternative electronic care record systems are currently being looked at with a view to change in the future. While no immediate action is required, this is an area for improvement and we expect the provider to take action. Robust systems are in place to safeguard people who lack capacity in relation to their care and support needs.

The health and wellbeing of people is actively supported. People told us *"they are always interested in how we are doing"*, another person told us; *"staff are really good with no problems here"*. We also spoke to three relatives, one of whom told us *"the care is fantastic"*. Care workers know people they support well and are very familiar with their likes and dislikes, and how they like to be supported. Staff are also fully aware of any risk to themselves or the person through training and up-to-date information. This includes strategies to use to de-escalate any situations which may cause harm to people or themselves. Care workers receive both core and specialist training to ensure they are able to fully meet the care and support needs of people. Some specialist training is outstanding such as epilepsy, falls prevention etc. This was discussed with the manager who told us a plan will be put in place to ensure staff are fully compliant with their training needs. While no immediate action is required, this is an area for improvement and we expect the provider to take action. People have clear opportunities to engage in a range of activities within the service and the wider community.

There are safe systems in place for the management of medication in the service and to maintain people's health. Medication is securely stored in a designated room. We saw the relevant temperature checks are being carried out by experienced, well-trained staff. Senior staff carry out regular audits and competency checks of staff administering medication. We looked at Medication Administration Records (MAR) charts and saw these are completed accurately. We saw timely referrals and good communication with medical professionals take place when people require additional support.

Environment

The provider ensures care and support is provided in a location and environment with facilities that promote people's well-being and safety. The service is presented to a very high standard with large well maintained and decorated communal areas. There is a dedicated area for care workers with separate facilities such as a toilet and shower. There is also a large training and meeting room and all corridors are wide and free from clutter. We viewed many of the bedrooms and found them to be large, well presented and personalised with en-suite shower and toilet facilities. We saw people relaxing and enjoying time with others in a large lounge and separate dining area. There is a large well-presented garden to the rear with a separate visitor's room which we were told is going to be turned into an activities area for people. Although the home is extremely well presented we were told by the manager there are future plans to replace some windows and re-decorate areas. A smoking shelter is also due to be replaced. There is a separate small laundry area and we saw good procedures in place regarding infection control and cleanliness. We viewed a large kitchen and a Food Hygiene Rating of 5 is currently in place which is the highest possible. Some areas of the kitchen would benefit from updating and the head cook told us this has been requested. There is a separate locked office area for the safe storage of records and a dedicated, secure, well presented medication room. Good procedures are in place such as recording and documenting the temperatures of the medication room and fridges/freezers. There is a large well maintained garden area to the rear accessed via a ramp and large terrace with views across Swansea Bay.

The provider has systems in place to minimise any risks to the health and safety of people. Maintenance records show that checks are carried out to identify and address any issues; we saw these checks are, generally, up to date. Although, work required following a general electrical five year inspection completed last year remains outstanding at the time of inspection. The manager told us a date has now been arranged for the works to be completed. While no immediate action is required, this is an area for improvement and we expect the provider to take action. Materials that have the potential to cause harm are well organised and stored securely in various secure cupboards at the home. Manual handling equipment continues to be serviced routinely and the lift is serviced as per requirements. Window restrictors are in place to ensure people's safety. There are good fire safety arrangements in place, including regular checks of the fire alarm system. Staff are fully aware of what to do in the event of a fire. There are personal evacuation plans in place for people.

Leadership and Management

The provider has arrangements in place for the effective governance and oversight of the home through ongoing quality assurance processes. We saw the recent bi-annual quality of care report and RI visit reports. The reports include feedback from people and staff in the service. The reports also indicate what the service is doing well and include further improvements for the future. We saw the RI is in regular contact with the service. We saw policies and procedures have been reviewed and where necessary updated. The SOP has been reviewed and accurately reflects the service. There is a detailed and clear guide to the service for people and relatives. All policies and procedures are available in the Welsh language as requested. Care workers told us staffing levels are good and the manager stated recruitment is working well and a full staff team is currently in place. The appropriate agencies including Care Inspectorate Wales (CIW) are notified where necessary of any significant issues affecting people or the service. The manager told us the service is really settled and there are no current concerns or complaints.

People are protected by robust and safe systems of employment and recruitment. All staff files are kept securely at the providers head office. On checking three staff files, we found the relevant checks and documentation are nearly all in place. We were told references for one staff member are not currently available. The human resource manager told us they are in the process of transferring all information to a new system. An audit will now be completed to ensure all relevant information and documentation is in place and has been transferred appropriately. While no immediate action is required, this is an area for improvement and we expect the provider to take action. We found a good induction process with care workers speaking positively on the induction they received. The manager told us they are working through care worker registration with Social Care Wales (SCW).

Communication is consistently good, and staff feel well trained and supported by managers. Supervision records evidence that all staff have three-monthly supervisions and yearly appraisals. We found a supportive and open culture in the service led by an approachable and responsive senior team. A care worker told us *“really supportive manager and open door policy”*, and another said; *“completely supported – training is incredible. Managers are really supportive”*.

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
44	An electrical installation 5 year report dated 07.12.21 was 'unsatisfactory' and detailed additional work to ensure safety which had not been completed by the provider at the time of inspection.	New

35	As part of a full inspection completed on 28.06.22 recruitment information was requested from the provider. Employment references were unavailable for one member of staff currently working in the service.	New
59	As part of the inspection visit on 28.06.22 a support file audit was completed. There was inconsistency noted in respect of recording about an incident on the electronic record system.	New
36	A full CIW inspection took place on 28.06.22. As part of this training information was requested for all staff working in the service. Good compliance was evidenced in relation to core staff training but specialist training provided is inconsistent and some staff have outstanding training to complete.	New

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