



Inspection Report on

Queen's Care Home

Port Talbot

Date Inspection Completed

18/04/2023

Welsh Government © Crown copyright 2023.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Queen's Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rushcliffe Care Limited
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	13th April 2022
Does this service provide the Welsh Language active offer?	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

Queens Care Home is a small care home for up to four individuals aged eighteen and over with needs associated with mental health and substance misuse. The service is situated in a residential part of Glyncorrwg. The property has a terraced garden to the rear which has recently been improved, also parking at the front and side.

People have up to date personal support and risk plans that are regularly reviewed. People are supported by a dedicated team of well trained and experienced care workers, a team leader and service manager. All care staff are very knowledgeable about the needs of the people they support. People are supported to access routines that are important to them including access to the community on a regular basis. People are encouraged and supported to maintain and enhance their independence.

People live in an environment that meets their needs well and is homely, clean and well maintained. People are supported to access healthcare support when required. The provider has a range of people from different professional backgrounds that complement and enhance the care and support available. The Responsible Individual (RI) is in regular contact with the service and there are robust oversight and quality audit arrangements in place.

Well-being

People have a voice and are treated with dignity and respect. We observed care workers supporting people in a friendly, supportive and relaxed way with positive and supportive interactions. Personnel files viewed, indicate people's needs are fully considered including their ability to participate in care planning. We found personal support plans are up to date, regularly reviewed and give a good reflection of the current needs of people. People are involved in and consulted about their care and support needs on a regular basis. Risk assessments are detailed and thorough to ensure people are supported safely. The service utilises specialist assessment and risk tools that reflect the needs of individuals and enhance the quality of support provided. People spoken with during the inspection told us they are happy, value the care and support provided and enjoy living in the home.

People's physical, mental health and emotional well-being is promoted and maintained. People have access to the community and have a varied activities programme available to them in the service. People are supported to maintain and enhance their independent living skills and there is good evidence in personal files to support people's achievement of goals. People told us they take a full and active part in all household activities. There are good procedures in place for the recording, storing and auditing of medication in the service. People are supported by care workers who know them well and seek medical assistance quickly to support them appropriately when required.

People live in a home that is safe, secure and homely. The service is generally maintained well and there have been refurbishments made to the kitchen, an office location moved and improvements to the garden since the last inspection. Some further repairs are planned shortly. The service is homely, clean and comfortable and bedrooms are personalised where appropriate to give people a sense of belonging. Control of substances harmful to health (CoSHH) products are stored safely and securely. The environment meets the needs of the people living there well.

There are robust and thorough governance and oversight measures in the service. The RI visits regularly and provides support to the manager along with regular planned supervision. Care workers are recruited safely and supported well. All feedback from staff spoken with is extremely positive about the culture in the service. Care workers receive appropriate mandatory and specialist training and are registered with the appropriate statutory body. All staff receive safeguarding and whistleblowing training and are aware of their duties in respect of this. Policies and procedures to guide care workers are in place which have been reviewed and updated where appropriate. The provider ensures the appropriate notifications are made to Care Inspectorate Wales (CIW) as required by regulations.

Care and Support

People are provided with a good standard of care and support. We spoke to people, care workers, the manager and responsible individual (RI) as part of the inspection. A person told us; *“all staff are really nice and wonderful. I have no complaints or worries here and they are doing a good job”*. The provider has detailed and thorough personal plans in place that reflect the needs of people and are reviewed regularly. There are detailed risk assessments in place where required and the provider uses specialist assessment tools to compliment these. Recording of support given is detailed and evidences that people’s identified needs are monitored and reviewed when necessary. The service operates a ‘keyworker’ system where a care worker is nominated to be a central contact for an individual. Personal plans and reviews provide good evidence of people’s progress and achievement of goals. There are records detailing regular contact and meetings with people to ensure people are consulted and included in care planning. We saw people accessing the community and engaging in activities within the service. We also saw documented records of planned weekly activities. Activities are structured and planned around the needs of people.

People are supported to access appropriate health care support. There are detailed records of health care appointments with associated actions. The service is part of a wider organisation that employs specialist mental health practitioners including psychiatrists and mental health nurses. This means people can access support quickly when necessary. People are registered with the local healthcare practice. There are safe systems in place for the management and administration of medication. Medication Administration Records (MAR) are completed appropriately with signatures of care workers present. There are good processes in place for the ordering and auditing of medication in the service which minimises the risk of error. Staff assisting people with medication are trained and deemed competent to do so.

The provider considers a wide range of views and information to confirm their ability to meet the needs of the people they support. Policies and procedures are in place for the initial assessment of people. The provider has a Statement of Purpose (SoP); a document which shows people what they can expect from the service and a description of the admissions process. The SoP is clearly written and reviewed regularly by the manager and RI. Care workers attend safeguarding training and are aware of their responsibility in respect of reporting any concerns.

Staff have a good understanding of the safeguarding process. There is a clear safeguarding policy and procedures in place. All staff complete safeguarding training as part of their induction and follow up training is arranged. All staff spoken to feel they have the skills and knowledge to report issues.

Environment

The provider ensures people's care and support is provided in a location and environment with facilities that promote people's well-being and safety. The building is located in a small urban community setting with good access to transport links. The manager told us people in the local community are very supportive and friendly. Since the last inspection a former office area has been relocated to a purpose built lockable room attached to the ground floor. The provider has received registration approval to increase the registered number of people by one. At the time of inspection the new first floor bedroom with ensuite was empty and ready for future occupation. We viewed all communal areas and found them to be clean, generally well-maintained and decorated. Although the kitchen has recently been refurbished we saw vinyl flooring is damaged and worn in some areas and needs replacement. The manager told us there is a current food hygiene rating of five (Food Standards Agency) which is the highest possible. This means the hygiene standards are very good and fully comply with the law. The stairwell carpet is torn and damaged and also needs replacement. This was discussed with the RI who told us these will be rectified shortly. We saw improvements have been made to the rear garden. A vegetable plot has been developed and we were informed people will be taking an active part in cultivating and growing plants. We saw any control of substances harmful to health products (CoSHH) are stored safely and securely. The environment is well suited to the needs of the individuals living there. We saw people had their own personalised items in their bedrooms and rooms viewed were clean and well maintained. We saw good infection control is maintained, separate coloured mops and buckets for cleaning are stored in a dedicated laundry area. We saw mandatory fire safety checks take place routinely and certificates for gas, fire detectors, fire extinguishers, electricity and electrical equipment are all up to date. We also viewed regular documented checks for water temperatures, descale of shower heads and building checks. The provider has a dedicated health and safety advisor who we were informed is due to visit the service to complete audit checks.

Leadership and Management

People are supported by an experienced, well trained and supported team of care workers. We spoke to three care workers during the inspection and received a feedback

questionnaire from another. All spoke very highly of the management support received and culture in the service. A care worker told us; *“excellent – very supportive colleagues and very good training. Induction – shadow shifts and good support from management team. Nothing is too much trouble”*. Another care worker stated; *“I love working here. Very quiet and relaxed, we are a good team and we all get on really well. Management are great”*. There are regular planned staff team meetings and handovers taking place. We looked at two staff personnel files and saw appropriate pre-employment and recruitment checks are in place. References and up to date Disclosure and Barring Service (DBS) checks are on file. The training matrix was seen and we found almost all mandatory training requirements of the provider are up to date. This includes infection control, safeguarding, health and safety, fire awareness. Also, specialist training including; anxiety, mental health, self-harm and positive behaviour support. Care workers spoken with confirm they attend safeguarding training and understand their responsibility in relation to this. There are detailed and thorough safeguarding policies and procedures in place to guide care workers. We saw staff receive routine formal supervision. All staff are registered with Social Care Wales (the social care staff regulator).

The provider has arrangements in place for the effective governance and oversight of the service through ongoing quality assurance processes. Since the last inspection a new manager and RI have been appointed. Care Inspectorate Wales (CIW) have received the necessary notifications regarding this. We read detailed and thorough reports completed by the RI which include; discussions with people, manager and care workers. The reports also detail audits completed and associated actions which correspond with the inspection findings. We read the latest quality of care review which we also found to be detailed and includes feedback from staff and environmental audit information and associated actions.

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 inspection	N/A
57	On inspection a CoSHH harmful substance was found in an unsafe and unlocked location.	Achieved
84	The provider had failed to notify Care Inspectorate Wales of a change of manager in the service as required by RISCA regulations.	Achieved

Date Published 24/05/2023