



Inspection Report on

Woodcroft

**Woodcroft Care Home
Abergele Road
Rumney
Cardiff
CF3 1RS**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

05 and 06 April 2023

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About Woodcroft

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Hafod Housing Association Ltd
Registered places	60
Language of the service	English and Welsh
Previous Care Inspectorate Wales inspection	[Manual Insert]
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

People like living at Woodcroft, are happy with their care and appreciate the support they receive from care workers who know them well. People who are able, are involved in setting goals and reviewing these as part of personal plans, while others have advocates to support with this. People are encouraged to make day-to-day decisions. Health monitoring and support is provided, and health professionals involved when required. Arranged activities offer people opportunities to be active, involved in things that matter to them, and time to socialise with others.

The environment has been refreshed with décor throughout renewed and some flooring and furnishings replaced. The environment is checked as part of ongoing audits, and equipment is maintained and serviced appropriately. People enjoy the garden, balcony spaces and communal areas that offer plenty of room to walk around indoors.

Governance arrangements are in place. The responsible individual (RI) supported by a wider organisational team have worked with the service manager to secure improvements identified at the last inspection. Staff are recruited safely and are undergoing specialist training to improve awareness around people's needs. Care workers receive appropriate supervision and competencies are tested to ensure high standards of care, with medication administration being a focus.

Well-being

People's voices are heard. The service consults people, or their representative, about their needs before they live at the home to ensure their needs can be met, except on rare occasions when there is an emergency admission. People or their representatives contribute to the writing of the personal plan and are involved in the review of this on a regular basis. Personal plans identify goals people would like to achieve. People who find decision making difficult as they lack the ability to retain information have support from an advocate. When people have verbal communication difficulties, care workers know them well and can help understand their needs through body language and gestures. The RI consults with people to gauge what they think of the quality of care, and people contribute to decisions about the day-to-day life in the home through regular residents' meetings. People have information about how to raise issues and tell us they would know who to raise concerns if they had any.

The provider considers people's needs and helps them to stay as healthy and active as possible. People are involved in decision making around their physical and mental health needs. Records are kept to help identify if anyone needs additional support, for example, with maintenance of their weight, and this is acted upon. Meals are homemade and offer choice to encourage a healthy diet. People have good access to health professionals such as chiropodists and dieticians. Regular reviews are undertaken of people's medication, especially those who receive support with their mental health. There is a wide variety of activities offered, many personalised to the individual, to help them stay as physically and mentally active as possible. People are supported with their hygiene and personal appearance if they need this so that they feel positive about themselves.

People are kept safe from potential abuse. Governance arrangements are in place, providing oversight and monitoring of the service to test the quality of care provided. The building is safe with security measures in place such as CCTV. Areas of the home are secured to help protect people. Maintenance and cleaning of the environment is scheduled and audited. Infection control procedures are followed. Cleaning products, medication and other items that could cause harm are safely secured behind locked doors. Care workers are safely recruited and fit to work with vulnerable adults. There is sufficient trained staff and robust policies and procedures for them to follow.

Care and Support

People are consulted about their care. As part of admission to the home, people or their representatives are involved in providing as much information as possible so the service can help meet their needs. Personal plans are developed. There is currently ongoing work to transfer information over to a new format that highlights the goals people consider are important to them. This supports easier reviews to consider if goals have been met, and if care plans need adjusting to accommodate this. Further work is required to strengthen the information contained within personal plans, such as recording the frequency someone needs support, but there is no impact on people at present. People are consulted on a day-to-day basis about their care needs. We observed care workers offering choice and providing appropriate prompts for people who find decision making difficult. People choose what they want to do and where they want to be.

The provider has improved the standard of care and support. People are supported with their care needs in a timely manner, have their health monitored, and are referred to appropriate health professionals if required. One health professional told us that the service is good at making referrals, so people have the right help. More consistent recording is in place to help inform decision making around people's health, including nutrition and fluid intake for those who require this. Improved awareness training and communication ensures that all departments, including the catering team, are aware of people's dietary needs, with calorie rich foods provided if needed. Mealtimes are enjoyable, social and unrushed, with sufficient staff to provide encouragement and support. People receive their medication in a timely manner. People we spoke to were complimentary about the care they receive saying, "*Nothing is too much trouble,*" "*I can't fault them*" and care is "*Brilliant.*" On the day of inspection, we saw that people were helped with their personal appearance, with attention to detail such as assistance with shaving provided, and records show people have support with appropriate personal care. One person told us that the care they received that morning was "*Perfect*" with the agency worker showing "*Great respect.*"

The service provides opportunities for people to maintain their overall well-being. This has been an area of focus for the service and improvements have been made. A full programme of activity opportunities is available. We saw people encouraged and supported to take part in activities on offer, being helped to move to different areas of the home if needed. Families and other visitors are encouraged. Some activities are personalised to the interests of individuals, and we saw how people who expressed a love of birds were supported to visit the wetland bird reserve in Newport. We saw a portrait photographer who will present their work in a 'newspaper' format, celebrating the lives of people who live at the home.

Environment

The environment promotes well-being. The décor of the home has been refreshed throughout and renewals of flooring and some furnishing has been completed. The home appears brighter and more welcoming as a result, with one care worker telling us how everyone's well-being has benefitted. Secure areas within the home offer people space to move freely between their bedroom and communal living areas. Bedrooms are personalised. A passenger lift supports people to move between floors. People enjoy the garden courtyard, having support to access this if they wish. Kitchens in each communal area offer people choice to prepare their own drink or get their own snacks if they are able. The entrance to the home has a welcoming café-style seating area where people and their families can make a drink and enjoy the home-made cake on offer. The home's pub offers another space that is well-used by families.

Infection control is considered. The routine cleaning of the home has improved as additional agency staff have been used to support the regular domestic team. The home is clean. We found one area of the home with malodour, but this was immediately addressed by the manager, and one shower room chair that required more thorough cleaning. Schedules of cleaning are in place, including shower traps and heads. The manager considers the cleanliness of the environment as they carry out daily walks around the building, in addition to routine auditing. There is sufficient personal protective equipment available throughout the home, including gloves and aprons, and visitors entering the building have hand sanitiser available when signing in. Ample, lidded bins are available throughout the home, though some of these are not pedal operated, as they should be.

The provider has systems in place to monitor and maintain the environment. A maintenance person supports the routine testing and maintenance within their capabilities. External contractors are used to test and maintain services such as gas, electricity and fire detection systems. All regular staff are aware of the requirement to keep cupboard doors locked, we found one cupboard unlocked, with an agency member of the domestic team using this to access cleaning materials; they were reminded of the importance of keeping the environment safe. The manager and wider organisational officers audit the safety of the environment. The kitchen is audited through Environmental Health and have the highest score to show it meets the Food Standard's requirement.

Leadership and Management

The provider has made improvements. The RI and Director of Care have addressed issues following the identification of improvements required at the last inspection. An experienced manager has returned from a period of absence. They told us that the provider is supportive, enabling them to work with a wider management team to address identified issues. Methods of monitoring the service have changed so that issues can be identified quickly by the organisation's directors, and support put in place to ensure these do not escalate. Sufficient progress has been made to secure compliance in all areas.

Systems are in place to oversee the quality of care. The RI carries out their role with due diligence, visiting the service regularly and consulting with people or their representatives as part of this process. A development plan, maintained by the manager shows progress made with tasks identified through RI visits, inspections or organisational audits. Policies, procedures and other documents such as the 'statement of purpose' are regularly reviewed and updated, providing information for people and staff so they know what the service offers and how care is to be delivered.

The staffing levels and skill mix is appropriate and kept under review. Improvements have been made to ensure care is delivered appropriately and in a timely manner. Staff are deployed throughout the home if there is short notice sickness, or absence is experienced and agency staff cannot be secured. Staff are recruited safely. When agency workers are required, the home asks for consistency of care workers and ensure they have a robust induction, so they are clear on the home's processes. Whole staff meetings and supervision meetings with line managers provide opportunities for care workers to share their observations in addition to reviewing their professional development. Care workers are encouraged and supported to register with 'Social Care Wales,' the workforce regulator.

Care workers undergo training suitable to their role. The focus over the past couple of months has been on training to meet the needs of the people, including, 'Dementia,' and 'Diabetes.' A health professional told us that they have planned to provide training around prevention of skin deterioration for the service. Other training has included refreshing 'First Aid' and 'Medication Administration.' More rigorous auditing of medication highlights that the competencies of some staff are in question. The manager is taking action to address this. While the majority of staff are observed to be respectful in their approach, the manager is considering isolated examples of over-familiarisation that could be seen as crossing professional boundaries and is addressing this. People who were able to express their opinion told us staff are "Nice," "Pleasant," or "Lovely."

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
21	The provider is not ensuring that people receive appropriate care and support in a timely manner to promote their health and well-being, and protect them from harm.	Achieved

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
58	The provider is not ensuring that recording of medication is in line with National Guidance.	Achieved
44	The provider is not ensuring that the premises is free from hazards which can impact on the health and safety of individuals, nor is the building properly maintained and kept clean to a standard which is appropriate.	Achieved
8	The provider has not provided monitoring, reviewing and improving systems which are effective	Achieved
36	The provider is not always ensuring that staff have appropriate induction and specialist training to ensure they have adequate knowledge to meet the needs of the people they care for.	Achieved

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