



Inspection Report on

Prestemedde Care Home

**Prestemedde Care Home
Townend
Presteigne
LD8 2DE**

Date Inspection Completed

30/11/2023

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About Prestemedde Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Shaw healthcare (Cambria) Limited
Registered places	12
Language of the service	English
Previous Care Inspectorate Wales inspection	First inspection since re registration of the service to reflect new provider name.
Does this service promote Welsh language and culture?	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 are supported by a care team who are committed and dedicated to making sure they have the care and support they need. Care staff take time to find out what people are interested in and tailor activities to meet individual preferences. They are supported to maintain links with family and the community.

Personal plans and risk assessments are in place for care staff to follow. Further training has been arranged at the request of the staff team to improve their knowledge around the use of the electronic care planning system. This will help to make sure care plans contain all the relevant information. People are referred to health professionals quickly if their health declines. Recruitment processes in place help to keep people safe. Care staff feel supported by the management team.

The responsible individual (RI) has very good oversight of the service. Systems are in place to regularly audit and review the quality of care. This means the provider can see what works well and what needs to happen to improve the service. People participate in this process.

Well-being

People have choice and control over their daily life. They make choices in areas including when they get up and go to bed, what they have to eat and drink and how they spend their day. Regular resident meetings take place where people give their views on the service and make suggestions on how it can improve. Information about what the service provides is available in the statement of purpose and guide to the service. These documents can be made available in Welsh. Care staff are respectful and involve people in decisions that affect their lives including how they want their care and support needs met.

People are supported to manage their physical and emotional well-being. Care staff know them very well. They take time to find out what is important to them and support them to do things they enjoy. Family and community involvement is encouraged to maintain good relationships. Health professionals are contacted quickly when required. Systems are in place to make sure people get their medication as prescribed. Care staff offer timely support to people when they want it.

There are systems in place to protect people living at the service. Policies and procedures are available to guide care staff in relation to the protection of vulnerable adults. Visitors are asked to sign when they enter and leave the building. The training programme allows care staff to gain the knowledge and skills needed to support people.

People live in an environment to suit their needs. They are encouraged to make their personal space comfortable and homely with their personal belongings. Systems are in place to make sure health and safety checks are carried out regularly.

Care and Support

People receive support from care staff who are friendly, kind, and respectful. They know individual routines and provide the right level of support when people need it. The whole staff team value people by for example, celebrating their birthdays. We saw the joy this brought to a person during our visit. There was a lot of laughter and people are comfortable in the presence of care staff. A new activity coordinator is working hard to get to know people and what they enjoy. A wide range of group and individual activities are available. Events such as Christmas are celebrated. People were making Christmas cards during our visit and plans are in place for a Christmas party. Comments from a relative include “*all efforts are made to make this a lovely home for a range of people with a wide range of interests*”. Community contact is encouraged. Care staff support people to attend coffee mornings and church fetes so they can meet family and friends.

People are provided with the care and support they need. Assessments and personal plans are in place and developed with the individual and /or their family. This enables people to say how they want to be supported. The provider is using an electronic care planning system. Information in personal plans is inconsistent. Some are detailed, others would benefit from more information. Care staff tell us they are not always confident using the electronic system; however, they clearly know the support people need. Training has been arranged to provide them with further support. Since our visit, we have received positive feedback about this training and how it is helping care staff with writing personal plans.

Systems are in place to keep people as safe as possible. Care staff have training and there are policies in place to guide them in relation to safeguarding. Risk assessments show measures the care staff should follow to manage any identified risks. They understand their responsibilities to keep people safe and are confident to approach the manager if they have any concerns.

People are supported to remain as healthy as possible. Medication processes are in place. Care staff have medication training and their competency to administer medication is regularly assessed. We found no gaps in the medication administration records (MAR). Controlled medication is appropriately stored and recorded. Health professionals tell us care staff always report concerns to them in a timely way. Family members praised the care provided saying it is “*consistently excellent*” and they are always kept updated between their visits.

Environment

People are cared for in a homely, friendly environment. Bedrooms are personalised with things important to people. Communal areas are comfortable spaces where individuals can enjoy each other's company or spend time on their own. Bilingual signage is in place to help people navigate around the home. People choose if they want to spend time in the communal areas or in their bedrooms and care staff respect their decision. There is an ongoing programme of refurbishment to continue to improve the environment. The manager told us they have recently purchased new chairs for the lounge and new dining furniture. There is a safe outside space to enjoy. The activity coordinator told us of plans they have in place to support people who want to do gardening, when the weather improves.

The home is clean, warm, and comfortable. Care staff have access to personal protective equipment (PPE) when they need it. Policies are in place to make sure good hygienic practices are followed. Substances hazardous to health are stored safely. Domestic staff tell us they have good training and have all the equipment they need to support them in their role.

Measures are in place to identify and mitigate risks to health and safety. There is a rolling programme of safety checks, servicing and maintenance of the home's equipment and facilities. This includes fire safety checks. The management complete regular health and safety checks so any issues can be identified and quickly addressed.

Leadership and Management

The provider has systems in place to make sure there is good oversight of the service. This means issues can be identified and quickly addressed. The management complete regular audits including personal plans, safeguarding, and complaints. The RI visits regularly and talks with people and staff. They have oversight of areas including accidents and incidents. The operations manager also visits the service to offer support. The manager feels very well supported and tells us they are confident to approach the RI if they have any concerns. People can give their views on the service. They do this in a number of ways including discussion with care staff and the management team, resident meetings, completing questionnaires and during reviews of their personal plans. A review of the quality of care takes place every six months. This allows the provider to see what is working well and where they can make changes to improve the service.

Care staff are recruited, trained, and receive support in their role. They work very well as a team and feel supported by the manager. There are care staff vacancies, the provider is working hard to recruit to fill the vacant posts. Permanent care staff are working extra hours to make sure the shifts are covered, but the care staff spoken with tell us this is difficult, and they are tired. We have since been assured agency staff are being used to cover the shifts whilst recruitment is ongoing. Due to the dedication and hard work of the manager and the care staff, there is no impact on people using the service. Recruitment records have the required checks in place before people start work, to ensure they are safe to work at the service. Care staff have regular, formal, one to one supervision and an annual appraisal of their work. This helps them to reflect on their practice and identifies areas for training and development to further support them in their role. Records show training opportunities are good. However, care staff tell us they cannot always attend training due to staff shortages. The manager is aware of this and addressing it.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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Date Published 10/01/2024