



Inspection Report on
Rachel Kathryn Residential Home
Blackwood

Date Inspection Completed

15/04/2024

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About Rachel Kathryn Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Dawn Hobbs
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	09 January 2020
Does this service promote Welsh language and culture?	This service does not provide the 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people who use, or intend to use their service.

Summary

People have choice and control over their day to day lives and are provided with opportunities to influence how the service is provided. People are kept safe and are supported by trained and experienced care staff. The team of care staff are led by a team leader and a part time home manager. The Responsible Individual (RI) is actively involved in the daily running of the home and assists in providing care when needed.

People have access to a range of activities and opportunities which are suited to their needs and preferences. Care staff support people to access health and social care services and are proactive in identifying any changes in a persons' needs. People are supported to take their medication as prescribed and care staff make accurate records of this.

Medications are stored safely and appropriately, and the manager completes regular audits to ensure good standards are maintained.

The service replicates a family home which has been adapted to meet the needs of people living there. There is a through floor lift which is not currently used as it is not required by people who use the service. The living room has recently been redecorated and refurbished in line with people's choices and preferences. Overall, health and safety checks are completed within the environment to ensure people are kept safe.

Well-being

Care staff who know people well support them to maintain and improve their health and wellbeing. People have control over their day to day lives and care staff support them to make their own informed choices. Skilled care staff help people with complex needs express themselves, using personalised communication tools. People choose when to get up, how to spend their day and what they would like to eat along with other daily decision making.

People and care staff work together to promote the achievement of people's personal goals and outcomes and to do the things that matter to them. Resident meetings take place, and the service acts on people's views and requests positively.

People told us they enjoy living at the service and spending time together. People described the relationship they have with each other and staff as 'being like family'. We were told "*oh we do have some fun here, we are always laughing.*" Activities take place spontaneously as well as being planned in advanced. These include card games, art and crafts, knitting and chatting together. People told us they enjoy the garden and watching the wildlife, particularly the birds and squirrels.

People live in a home which is appropriately secure, and we were asked to show our identification prior to entering the home. People told us they feel safe and could talk to care staff or management if they are worried. Care staff are trained in safeguarding and are aware of their duty to report any concerns they have, or which have been raised with them.

The service does not provide the Welsh Active Offer, however we saw Welsh culture and history celebrated within the home. Artwork created by people was on display and included Welsh ladies, the Welsh flag and daffodils. '*A Miners Poem*' was also displayed, referring to the local mining history which is familiar to the local community. There are currently no Welsh speaking people using the service. The Statement of Purpose (SOP) reflects this and advises it will make effort to recruit Welsh speaking care staff if this situation changes.

Care staff support people to maintain the relationships which are important to them. Where appropriate, family members are involved in care planning and are kept up to date about their loved one. People have the visitors they want to, and care staff support people to meet friends in the community.

Care and Support

There is an admission process in place which is followed if a person, or their representative on their behalf, has decided they would like to consider moving into the service. This process is described within the Statement of Purpose (SOP) and includes informal visits to the service. The manager also considers a range of information about each person to ensure the service can meet their needs. Compatibility with other people living at the service is also considered. Where appropriate, staff speak with relatives prior to a person moving in, to gather valuable information. This includes a person's life history, what matters to them or their unique circumstances and communication styles.

People have individual personal plans which care staff update with regular reviews. These plans guide staff how to meet a person's needs in their preferred way. Where needed, specialist plans completed by health or social care professionals are included. People's plans detail what matters to them, such as being '*well presented*' or '*eating my meals at a dinner table*', which facilitates a continuity in the care people receive. Personal plans include the outcomes the person wants to achieve. The manager is developing how it records and reviews a person setting and achieving their goals. Due to the processes in place, people receive care and support in a way which promotes their rights, independence and autonomy. We saw a bespoke communication support plan for a person with complex communication needs which helps them make informed decisions about their day-to-day life and how their needs are met.

Care staff monitor people's health and take action when needed. On the day of inspection, we saw staff working skilfully with community nurses and a Doctor. Records show care staff support people to take their medication safely and as prescribed. Medication is stored correctly and safely. The leadership team regularly complete medication audits to make sure medication practices are consistently good.

People are supported by care staff who are trained in how to safeguard people from harm. The staff we spoke with understand their duty to protect people and the processes to follow if they were concerned about abuse or neglect. Equally, they are confident the leadership team at the service would act on any concerns they raised with them.

We saw good infection prevention and control measures in place on the day of our inspection. We saw personal protective equipment (PPE) being used and disposed of appropriately and there was ample hand sanitiser available.

Environment

The environment is cosy and maintains a homely atmosphere. The manager told us the living room had recently been redecorated and refurnished, with people choosing the colour scheme and sofas. There is a through floor lift available, however this is not currently used as nobody using the service requires it. The downstairs bathing facilities consists of a shower room with a level access walk in shower. There is a further bathroom available upstairs.

People living at the service have their own room which are personalised to their needs, preferences and interests. One person told us *"I like it here; I really like my room"*.

The accommodation promotes independence and offers the opportunity for people to maintain or develop daily living skills. Items which could cause harm, such as cleaning products, are stored securely. The conservatory is used for a variety of purposes, including activities, mealtimes, to meet with visitors or as a quiet area. A person told us *"I love sitting here (in the conservatory) I love the views and watching the squirrels"*. The outside area is very large, with an accessible patio area people can use as well as a flat grassed area.

The provider ensures the buildings electrical and gas systems are appropriately maintained and serviced and the manager completes monthly health and safety audits. Damaged flooring in a bedroom had already been identified by the manager and repair has been planned.

The service has a fire risk assessment in place. Each person has a Personal Emergency Evacuation Plan (PEEP) and fire safety update training had been arranged. There are fire alarms throughout the home which are all tested regularly along with the emergency lighting. Care staff complete water temperatures to prevent scalding.

Leadership and Management

Rachel Kathryn Residential Home is a small family run care home. The RI maintains oversight of the service and are involved with the day-to-day running. The manager works at the service part time and is supported by a knowledgeable and experienced full time team leader.

We saw the provider has proper governance arrangements in place to support the provision of good quality, safe care. This is also supported by comprehensive policies and procedures to guide care staff in their roles. The safeguarding policy reflects current legislation, and the provider told us they will develop accompanying guidance for care staff. We will follow this up at the next inspection.

Care staff have regular formal supervision meetings with a senior member of staff along with annual appraisals to support them in their role. Care staff told us they enjoy their roles. The manager regularly facilitates staff meetings to share information with care staff and to reflect on the care and support provided to each person. Care staff are encouraged to discuss any concerns they have along with any suggestions of how care and support can be changed for the benefit of people. We saw minutes of a staff meeting which also discussed the Active Offer of the Welsh Language. Residents' meetings are also held and are used to involve people and their views into how the service is run. We saw minutes of the meetings where people said they wanted to be involved in the weekly grocery shop, and we were told this was put in place without delay.

In addition to being involved in the daily running of the home, the RI completes regular, formal RI visits and meets with people and staff to consider the standards of care being provided. We saw the RI keeps a formal record of these discussions. There are also processes in place to record any compliments or complaints made to the service, along with records of any accidents and incidents. These records, along with people's care files and daily notes, are stored securely.

All care staff receive thorough pre-employment checks prior to being offered employment. Once employed care staff are supported through an induction which includes training and 'shadowing' an experienced or senior member of staff until they are confident and capable within their roles. During this process there is an enhanced level of supervision provided.

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
16	<ul style="list-style-type: none"> Review of personal plans (Regulation 16 (5)): The service provider had not ensured personal plans had been revised when necessary. 	Achieved
57	<ul style="list-style-type: none"> Health and safety (Regulation 57): The service provider had not ensured that unnecessary risks to the health and safety of individuals are managed effectively. 	Achieved

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