



Inspection Report on

Lakeside House Nursing Home

**Lakeside House Nursing Home
37 Wedal Road
Cardiff
CF14 3QX**

Date Inspection Completed

30/04/2024

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About Lakeside House Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Lakeside Homes Limited
Registered places	69
Language of the service	English
Previous Care Inspectorate Wales inspection	15 March 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People receive good quality care and support at Lakeside House. Care staff know people well and understand their needs which people like. Personal plans are detailed which is important for care staff to understand the needs and preferences of people. People's health is closely monitored and there is good access to health services. We saw care staff being attentive, caring and respectful. People participate in activities of their choice and are supported to maintain relationships with family and friends.

People live in a suitable environment which is safe and meets their needs. Bedrooms are personalised and offer space and privacy. The relevant health and safety checks are up to date.

There is strong leadership at the home. The responsible individual (RI) regularly visits the service to seek people's views and evaluate the quality of the service. There are effective quality assurance systems in place to monitor and review the care delivery. Care staff receive appropriate training, supervision and feel valued working at the service.

Well-being

People can make choices about their day-to-day life. People are treated with respect by care staff who know them well. An individual told us *"I love my carers; they are so lovely"*. We saw caring, patient interactions where people are given choice, listened to, and treated as individuals. Personal plans are clear on how best to enable people to be as independent as possible. Regular activities take place five days of the week, the activities co-ordinator records what activities people have participated in. People are supported to follow their religious beliefs by attending a regular service. An individual told us *"I love going to the Church service, this is important to me"*. Relatives and friends are welcome to join activities at the home. Visitors are enabled and encouraged to spend time with their family members.

There are systems in place to help protect people from harm. Care staff deal with accidents and incidents confidently. People's health is closely monitored and there is good access to health services. People receive the right medication but the completeness of records needs to improve. Personal emergency evacuation plans are available to inform care staff of the assistance people need in the event of an emergency. Robust staff recruitment checks are undertaken to ensure they are suitable to support vulnerable people. There is good management of hazards in the home. Safeguards are in place for people who are unable to consent to receiving care and support at the home, Deprivation of Liberty Safeguards (DoLS) are requested when required.

People are supported in an environment which supports them to achieve their well-being. Each person is encouraged to personalise their surroundings in whatever way they wish. People told us they are happy with their rooms. We saw people have access to specialist equipment when required. There is a refurbishment plan in place to update some of the bedrooms, ensembles and communal bathrooms.

Care staff recognise and respect people for who they are. The service involves people and their representatives in the development of their personal plans to identify what matters the most to people. Care records show people receive the right care and support at the right time. The manager told us that they will ensure people are encouraged to contribute to their reviews over the coming months. The RI seeks people's views about the service during formal visits. The service sends feedback surveys to people and their representatives which are complimentary about the service. The service remains well staffed and people are benefiting from trusted relationships.

People benefit from a service with good leadership. The RI and management team closely monitors and evaluates the quality of care and safety of the service. There are effective audits in place to identify patterns and trends for lessons to be learnt. All staff are sufficiently trained to understand the needs of people they support. There are policies and procedures in place to guide staff.

Care and Support

There is information available to inform people of what to expect from the service. The statement of purpose is currently being reviewed. The service receives many compliments and when complaints are received these are seriously considered, recorded and actions taken if required. People and their representatives told as that they know how to raise a concern and are confident this would be acted upon. The service is not currently offering the Active Offer of the Welsh language. There are currently no people living or working in the home that speak Welsh. Key information about the service is not currently available in Welsh but can be translated on request.

Nurses and care staff consider people's wishes and personal outcomes to inform their personal plan. Since the last inspection, people and their relatives are involved in setting out what is meaningful for each person. Personal plans and 'About Me' information is person-centred with detail around people's previous work and social history. Staff record care interventions in real time which provides a more accurate picture of people's care delivery. Personal plans are reviewed to keep them accurate and reflect any changes. The RI plans to involve people, and the representatives when appropriate with their reviews, which identify what matters to people most.

People can be confident that their health and well-being is promoted. There are regular clinical meetings to ensure the service is proactive in identifying changes or actions that need to be taken promptly. Records confirm that people have good access to the health care they need and they are supported to attend regular health appointments. Care information confirm that there is good monitoring of health and observations are taking place which helps to identify any changes. Appropriate referrals are made to other health professionals for advice and we found this is followed through into practice. There is an up dated medication policy in place for nurses to follow. We found people receive medication at the right time but some medication records need to be accurately completed by nurses in line with the medication policy. Medication audits are regularly completed and any actions are addressed but this could be further strengthened. Medication is stored in a secure medication room but trolleys must always be secured to the wall. There are adequate stock levels meaning medication is available and administered as prescribed. We observed medication being administered in a caring, safe and sensitive manner. Care staff receive regular medication competencies to ensure their knowledge is up to date.

Lakeside has a dedicated activity team who arrange a full activity programme over five days. There is a planned activities programme which is displayed in the home to meet people's preferences and interests. These include, forget me not chorus, arts/crafts, visits from the nursery children, beauty and relaxation, exercise, quiz, and planned entertainment events. There is also one to one time with people in an area of their choice. There is a regular Church service to meet people's spiritual and religious needs. The home has purchased a minibus to offer social outings and attend personal appointments. People told us they look forward to the activities and we saw positive engagement from all staff. The

service uses social media to communicate with relatives with secured permission. They regularly post events and activities to share people's experiences and keep well informed.

Environment

The service promotes hygienic practices and manages the risk of infection. There are safe arrangements in place for the disposal of clinical waste and some pedal bins were replaced. There are sufficient supplies of personal protective equipment (PPE) available. Staff are trained in infection control and prevention. The home is clean throughout and we found good levels of staff in the domestic and laundry team. Staff work hard to ensure that standards in the home are met and exceeded. We did not detect any malodour within the home.

There are a variety of aids and equipment available to support people's mobility and ensure their comfort. The environment is fully accessible for people with mobility difficulties which promotes people's independence. There are passenger lifts for people to move between floors safely and independently.

People's dining is a mixed experience but action was taken to address this. People are encouraged to socialise in the dining room, whilst others told us they choose to eat their meals in their bedroom. The menu is displayed in the home but this should be easily accessible to people. The menu is varied and people's nutritional needs are accommodated for. Pureed food is moulded in a way that resembles the meal to make it look more appetising and encourage intake. The manager gave assurances that the serving of meals will improve to ensure all people on each table to be served at the same time. This will promote a social experience and encourage nutritional intake. We observed care staff being attentive and provided the right level of assistance to people. The Food Standards Agency rated the home as Level 5 "very good" in December 2023.

Rooms within the home are personalised to people's preferences. People told us "*I love the home*" and "*My room is homely and comfortable*". We saw people spending time in their bedrooms enjoying quiet time or in communal areas as they preferred. The bedrooms have ensuite and twenty rooms have showers. People also have access to communal bathrooms and toilets. The fabrics and furnishings throughout the home are stylish but practical. The communal areas are light, bright and airy. There is a refurbishment programme for some of the bedrooms, ensuites and bathrooms. People can access the gardens as can their families. People told us they are happy with the environment in the home. Generally, the building is well maintained and safety testing of the building takes place in line with legal requirements. Any repairs are communicated to the maintenance team and these are promptly addressed. People living in the home have a personal emergency evacuation plan which informs staff of the assistance they require to safely evacuate in an event of a fire. We found the home free from clutter and hazards that would pose a risk. All staff told us that they understand the importance of health and safety and records show they have undertaken training in this area.

Leadership and Management

The manager is qualified and registered to conduct the role. Recently a new deputy manager has been appointed and is working well with staff. The care staff described the manager as *“Fantastic, approachable and will always help”*. Communication systems have been strengthened to ensure each department in the home is kept up to date with any actions and changes.

There are clear arrangements in place for the oversight and governance of the service. The RI regularly visits to keep well informed. The quality care report is produced to evaluate the standards of care and identify ways to improve and develop. The RI gains feedback from people which was positive and they have developed a resident forum following discussions with people. The RI intends to consult again with care staff and other professional agencies who attend the home, in the near future. Since the last inspection, audits are in place to monitor all aspects of the service such as, accidents and incidents, safeguarding, care information, and call bells to identify any patterns or trends for lessons to be learnt. All staff have access to policies and procedures that are kept up to date and are in line with current guidance.

There are robust systems and processes in place to protect people. We found that there are safe staff recruitment and vetting checks in place to keep people safe. Accidents and incidents are reported and records show that care staff have taken appropriate action. Care staff are able to recognise abuse and neglect, as they undertake regular safeguarding training. People we spoke with and care staff felt able to raise concerns and confident that these would be acted upon.

People can be confident that the nurses and care staff are well trained in their role and understand the needs of people they support. Since the last inspection, the service reviewed their training programme to offer all staff a full induction and a range of core training for their role. This consists of face to face and online training. The care staff told us *“The training keeps me updated”* and *“I value the opportunity to shadow the experienced staff”*. The staff have a professional registration with Social Care Wales (SCW) and the Nursing and Midwifery Council (NMC) as required. We found care staff are given opportunities to work towards their professional qualification. This means that staff have the appropriate knowledge, skills, and experience to provide people with safe, person-centred care. The care staff are given regular opportunities for supervision and appraisal which is important to seek support, reflect on practice and discuss their professional development.

Staff are responsive to people’s needs. Staff and visitors to the home are positive about the staffing levels. We observed care staff promptly responding to people’s needs and call bells are answered. The manager monitors the responses to call bells to identify any patterns and trends for lessons to be learnt. People told us that care staff are kind, caring, patient and respectful. The service retains staff well and we saw positive interactions between

people. A care worker told us *"We know people and what they like"*. We observed care staff understanding people's different communication needs and quickly responded when needed, which gave people reassurance.

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	People to be contribute to their reviews to seek their view and preferences	Achieved
15	Personal plans to be fully reflective of people's needs and updated when there are changes.	Achieved
58	To improve the management of medication and update the medication policy in accordance with current guidance.	Achieved
57	To effectively manage health and safety hazards that will pose a risk to people.	Achieved
8	The regular auditing of information to assess the quality of care and any patterns/trends are actioned accordingly.	Achieved
36	Staff to receive the opportunity to receive regular supervision and training for the role they perform	Achieved

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