



# Inspection Report on

**Honeyhome**

**Milford Haven**

## **Date Inspection Completed**

04/07/2024

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## About Honeyhome

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	sharon davies
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	19/04/2023
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 and their relatives are very happy with the care and support provided at Honey Home and speak well of care staff. People are encouraged to be as independent as possible and make choices regarding how they live their lives. Care staff have a good understanding of the needs of the people they support. Care documentation is in place, helping care staff deliver care and support. Care staff told us they feel supported in their roles and receive training, so they remain sufficiently skilled. A safe recruitment process ensures care staff have the necessary skills and qualities needed for working in the care sector. Governance and quality assurance is overseen by the Responsible Individual (RI) who visits the services regularly to discuss provision with people and staff. Written information such as policies and procedures are in place and guide staff to ensure good practice is followed. The environment is maintained to a high standard, enhancing the well-being of people living at the home.

## Well-being

People are supported with their health needs. They have access to health professionals when they need additional support and prescribed medication is administered safely. People enjoy a balanced diet and care workers monitor food and fluid intake. Documentation relating to people's health needs such as epilepsy profiles are available. They give care workers information regarding the best ways to support people safely and what to do in an emergency situation.

People are supported to do the things they want to do. Activities are varied and include activities within the home and wider community. On the day of our inspection, we saw some people being supported to go out for a picnic at a local beach. Others were enjoying 1:1 support to enjoy individually tailored activities within the home. The service also helps people to plan holidays and provides support enabling them to enjoy their holiday safely.

As far as possible, people are protected from harm and abuse. Risk assessments highlight areas of concern and strategies for keeping people safe. There is a safeguarding policy and care workers know the process for reporting concerns. Other policies such as medication and positive behaviour support help underpin safe practice. Care workers are recruited safely and receive training, support, and guidance to help them understand their responsibility to protect vulnerable people. Many of the care workers have worked at the service for some time. They know the people they support well and can recognise signs of changes in their presentation and report to the relevant professional for support or advice.

The environment promotes people's well-being. Routine maintenance and testing of equipment and utilities ensures the environment is as safe as it can be. The home is clean and tidy throughout with suitable furnishings and décor. People are encouraged to exercise choice in relation to their personal space by decorating their rooms in a way which reflects their tastes and interests.

## Care and Support

All people living at the service have personal plans. These set out the means by which people are supported to achieve their individual outcomes. Personal plans are specifically tailored to each individual. We examined a selection of personal plans and found them to be clear and concise. Individual risk assessments are also in place. These highlight potential risks and strategies for keeping people safe. Care staff we spoke to told us personal plans contain the right level of information for them to provide effective care and support. Personal plans are reviewed to ensure they remain relevant. We saw evidence that people and their relatives are consulted about the effectiveness of their care plan, together with any changes which might need to be made.

During the inspection people were seen to enjoy good relationships with care staff. We observed positive interactions between people and care staff throughout our inspection. It was evident care staff know the people they support well and are familiar with their needs and daily routines. We saw care staff engaging with people in meaningful conversations and activities, speaking in a knowledgeable, friendly and respectful manner. People and their relatives provided consistently complimentary feedback regarding care staff.

Medication management systems are effective, ensuring medication is stored and administered safely. Medication is stored securely and people have medication support plans detailing how and when they take their medication. They also contain information about their medication and any risks associated with it. There is a medication policy and care staff receive training to help them administer medication in line with best practice guidance. We examined a selection of medication recording records (MAR) and found they are completed accurately. This indicates that people receive their medication in line with the prescriber's recommendations.

Written information is available for people to view. The statement of purpose sets out the service's aims and objectives and evidences how it can meet the range of needs the service caters for. This is kept under review and updated when necessary.

## Environment

People live in a clean, comfortable environment. Suitable furnishings and décor in communal areas help create a homely feel. The provider has invested in the environment with new carpets being laid throughout the ground floor, including people's bedrooms. New fire doors have been installed in order to ensure compliance with fire safety regulations. We saw people in communal areas during our inspection. They appeared to be relaxed and comfortable, suggesting they are pleased with the environment. People's rooms are reflective of their tastes and preferences. We saw rooms are decorated with pictures and other items of importance to the occupant. We conducted a visual inspection of the home and found it is very clean throughout.

People benefit from a well-maintained environment. Environmental checks and routine maintenance and servicing ensures the environment, it's equipment and facilities are safe. Care workers perform routine checks and report any defects in the home's maintenance book for actioning. People have a personal emergency evacuation plan (PEEP) in place detailing the best ways to support people to evacuate the building in an emergency situation. The home is clutter free with sufficient storage space available. Substances hazardous to health are securely stored and can only be accessed by care workers. The kitchen is well equipped and domestic in nature, in keeping with the service . The laundry facilities are well maintained and are suitable to meet the needs of people living in the home.

## Leadership and Management

Safe recruitment processes make sure care workers are suitable to work with vulnerable people. We examined several personnel files and found they are well organised and all necessary pre-employment checks have been completed. These checks include employment history, references from previous employers and Disclosure and Barring Service (DBS) checks. On commencement of employment, new employees must complete a structured induction and are required to shadow existing care staff for a minimum of two weeks. Care staff are required to register with Social Care Wales, the workforce regulator. This is done to ensure they are suitably qualified. Care files have been reorganised since the previous inspection in order that information held within them is current and easy to locate, with historical records being archived.

Care staff are trained to meet the needs of people living at the service and feel valued and supported. Care staff receive core and specialist training and those spoken with said that they feel competent to carry out the required care and support effectively. Core training covers generic topics such as health & safety and safeguarding. Specialist training is specific to the needs of the people living at the service, such as epilepsy training and mental health awareness. Care staff we spoke to said they feel well supported in their roles by the RI, the manager and by their colleagues. They reported a good sense of team morale and said the home is an '*excellent*' and '*really great*' place in which to work.

The Responsible Individual (RI) has good oversight of service provision. They visit the home regularly and meet with people and staff to discuss their experiences and gather their views to inform improvements. Quality of care reports and indicate a positive response.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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.

### Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A



	inspection	
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