



Inspection Report on

Haven House Residential Care Home

**2 Pentre Street
Cardiff
CF11 6QX**

Date Inspection Completed

19/07/2024

Welsh Government © Crown copyright 2024.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Haven House Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	CRS CARE LIMITED
Registered places	15
Language of the service	English
Previous Care Inspectorate Wales inspection	19 May 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's feedback about the service is mostly positive. Personal plans include some important information regarding the individual. People and care staff have good relationships with one another. People can raise concerns with care staff and managers openly and honestly. Care staff are recruited safely and receive a range of training specific to people's needs. Some care staff are extremely knowledgeable and competent. The service needs to review staffing levels to ensure these are sufficient and safe. The Responsible Individual (RI) visits the service on a regular basis and a quality of care review is completed. However, arrangements for the oversight of the service needs to be improved to develop and embed clear improvements. The service has made some improvements to the property including creating a self-contained flat to aid in promoting people's independence. The home is generally clean, but we found oversight of the environment needs to be improved to ensure cleaning and effective health and safety checks are regularly undertaken.

Well-being

People have control over their day to day lives. People can choose what they do and when they do it within the service. Resident meetings, reviews, surveys and advocacy provide platforms so people's voices can be heard. We saw care staff treat people with dignity and respect. People's personal choices are listened to and their right to refuse is upheld and respected. Most of people's individual circumstances are considered within personal plans. People's health is monitored, medication is well managed and care staff record and manage accidents and incidents. Care staff record people's nutrition and hydration needs; we were told people have choices at mealtime but found more nutritious options are needed. Handover documents show care staff communicate important health matters with other staff.

There are some activities available within the service and some people enjoy being supported to go out. Some people enjoy going out into their local community. We saw people enjoy walking to the local shop, going for walks and to the pub. Improved management of rotas and the deployment of staff would enable people to have more opportunity and freedom to access the community when they choose and in a safe way.

Care staff are knowledgeable in managing concerns and effectively report to the management team. Seniors are regularly visible and the management team are accessible. Care staff receive training in relation to protecting people from abuse and neglect. People appear confident talking openly with care staff and managers. More could be done to ensure all risks are identified and measures implemented.

People told us they like their rooms and we saw positive feedback is received regarding the service. Care staff describe a relaxed and family like atmosphere at the home. The home is generally clean, regular checks are carried out on fire safety equipment, but better systems are required to maintain effective and consistent oversight of the environment to reduce any risks.

Care and Support

Personal plans are consistent in their layout and easy for care staff to read and understand. Most plans provide detail about the person, their life history and their needs. We saw some people have achieved personal goals, but the service needs to consider how they can better capture people's personalised desired outcomes. Most plans are regularly reviewed, and the person is mostly involved in these reviews. Plans require further information to better identify individual risks and measures in place such as, health, mobility and missing person protocol. People can attend resident meetings where they can talk openly about their experience and any concerns they may have. We saw people confidently approach care staff and speak to them about any issues. Care staff respond to people with kindness and respect their choices, decision making and their right of refusal. Surveys are sent out to people and their loved ones so they can provide their feedback. The service promotes the use of advocacy to ensure people have their voices heard.

Plans include most information regarding people's health. Care staff communicate important information with one another in daily handovers. Accidents and incidents are logged and show what action is taken by care staff such as first aid, medical advice and observations. People are supported to attend appointments when needed. Medication is well stored and medication administration records are completed in full. Seniors and managers have regular oversight of medication. Fridge and room temperatures are regularly checked. Care staff receive competencies to ensure they are sufficiently skilled to administer medication. Care staff complete daily records which show people are supported with personal care, nutrition and hydration and some activities such as going out to the shop or listening to music.

People can choose what they want to do within the home. People are free to access the kitchen and get snacks and drinks. We found meals provided could be more nutritious. People enjoy relaxing in their room, listening to music and chatting with other residents and care staff. We saw people sat at a table playing chess together. Some people enjoy walking to the local shop or going for a pub lunch. We saw feedback to show some people would like more activities to be offered.

Environment

The service has invested in expanding the home. They have converted an office space into a light and spacious bedroom as well as a new self-contained flat at the rear of the property. Feedback shows people are happy with their rooms. The home is generally clean throughout. Bedrooms include people's personal belongings and some family photographs. We found some rooms would benefit from being more individual to the person to provide a greater sense of belonging. Some work has been completed within the home such as new flooring in the smaller lounge and some redecorating. The medication room has been moved so it is more accessible to care staff. Care staff told us this has had a positive impact on how they can effectively administer medication. There are communal rooms available and new furniture has been bought to better suit the space and promote communal living. Care staff told us there is a family like atmosphere.

The RI is responsible for maintaining oversight of health and safety. We saw fire safety equipment is checked by professionals and fire alarm systems are tested to ensure they are working effectively. Personal emergency evacuation plans are in place and provide information on how the person needs to be supported and communicated with during an evacuation. We raised concerns regarding the staffing available to effectively support people during an evacuation or an emergency. The manager took swift action to address this. We noted some window restrictors do not have the appropriate security measures in line with current guidance. We discussed this with the RI who has taken action to address this.

Leadership and Management

Care staff are safely recruited, and all complete a Disclosure and Barring Service check prior to employment. Care staff told us they complete an induction of the service, so they understand their roles and responsibilities. Care staff feel well supported by the seniors and management team and told us they all work well together. One staff member said, "*I love doing this job,*" and another said, "*I really enjoy it.*" Regular supervisions are completed, and training provided is specific to people's needs. The service is planning to introduce more face-to-face training. Care staff told us management are "*Easy to talk to.*" Senior care staff in place manage the day to day running of the service. We found seniors are knowledgeable, passionate and committed to their roles. Seniors go above and beyond to fulfil their duties.

Due to the seniors taking on these leadership roles we found this can impact their ability to support with routine work. At times there are insufficient staff available, this may impact people's ability to access the community when they choose or ensure emergency situations can be managed appropriately. Staffing levels in place are below what is identified within the services dependency tool and in the Statement of Purpose (SOP). The manager took swift action to rectify this and immediately increased staffing numbers at night times to ensure these levels are safe. This is an area for improvement, and we expect the provider to take action.

The management team complete regular checks and audits to maintain oversight. The RI is visible at the service and people and care staff know who they are. A quality of care review is completed. We found these documents need to be improved to better identify areas of improvement, who is responsible and how this will be achieved in order to improve people's experience. We found the service is not being completely provided in line with the SOP. The SOP is fundamental to the vision of the service, including how care and support is delivered safely. Oversight of care planning, monitoring, safe staffing and the premises need to be improved. This is an area for improvement, and we expect the provider to take action.

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
------------	---------	--------

34	There are insufficient staffing arrangements in place these require review	New
6	Better oversight and governance of the service is required	New

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 19/08/2024