



Inspection Report on

Florence Justice Christian Home

**Florence Justice Residential Home
19 Stow Park Circle
Newport
NP20 4HF**

Date Inspection Completed

23/04/2024

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About Florence Justice Christian Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Martin Phelps
Registered places	27
Language of the service	English
Previous Care Inspectorate Wales inspection	13 July 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 are happy with the care and support they receive. Staff present as respectful and kind. People choose where to spend time and what to do. There are opportunities for them to take part in daily activities facilitated by care workers and by external entertainers. Relatives are also satisfied with the service.

The new leadership and management structure introduced last year is now embedded. The service provider, staff and an external professional spoke to us about the impact on the service and about the improvements made. These include improved care documentation, defined areas of responsibilities and a calmer atmosphere in the home.

The responsible individual maintains oversight of the service and they visit on a regular basis.

The home provides people with suitable accommodation which feels homely and reflects individuals' needs and interests. Work to upgrade the environment and equipment is ongoing.

Well-being

People receive the care and support they need and want. We observed warm and positive interactions between them and the care staff. We also saw care workers know people's visitors and have a good rapport with them. During our inspection visit, we observed people spending time in the communal areas and in their bedrooms. We saw people engaging with a range of activities. We noted two people spending most of their time together working out a puzzle. Activities take place on a regular basis; this includes external entertainers coming in. After these activities, staff ask each person what they thought. The manager explained this enables them to arrange activities which people really appreciate. There is documentation in place for each person, this includes a description of their needs and how staff can best support them. The RI visits the service on a regular basis and speaks to people who use it and to visitors to seek people's views. Records show relatives say they made feel welcomed in the home and staff are friendly.

People are supported to remain as healthy as possible both physically and mentally. This includes supporting people with their medication and to eat and drink. We observed drinks being offered throughout the day. Staff monitor people's health, and referrals and appointments with health professionals are arranged when necessary. Care workers assist people with their personal care and with taking care of their appearance. They also encourage people to take part in activities and to maintain meaningful relationships. This promotes their emotional well-being.

Measures are in place to protect people from abuse and neglect. Care staff receive training in safeguarding and have policies and procedures to guide them. There are risk management plans in place, and staff keep these up to date to keep people as safe as possible. The manager works with relevant agencies to ensure any restrictions placed on a person's liberty are only in their best interests. The home provides people with suitable accommodation which feels homely, reflects individuals' needs and interests and where there are good standards of hygiene.

Care and Support

People receive the support they require when they need it. We observed care workers supporting people and noted a natural rapport between them. Care staff are encouraging and reassuring, and demonstrate a good understanding of people's needs. People told us they are happy with the support they receive from staff. We observed people are settled and content. People also access services from external professionals on a regular basis. Records show this includes GPs and district nurses. An external professional told us the registered manager works very well with them and that they have a positive impact on the service. They also told us concerns with people's health are escalated appropriately.

There is documentation in place for each person. We saw a manager conducts a pre-assessment before people come to the home. They gather information from people and significant others including health care professionals. They also give a document called '*This is me*' to people and to their families if they wish to contribute. The document includes information about person's life history, their likes, dislikes and their interests. This information is used to set up people's personal plans. These cover all the areas in which they need care and support. They consist of a summary of their needs and instructions for staff on how to support the person. At our last inspection, we were told about planned improvements to people's care documentation and to how the care delivered is recorded. At this inspection, we noted the registered manager introduced changes. We saw personal plans are person centred and capture what people need and want. These are reviewed on a regular basis as required.

There are systems in place to ensure staff store and administer medication safely. These include the use of the system to dispense medication, regular audits by allocated staff, training for staff and assessment of their competencies. In addition, we observed good practice in relation to hygiene and standards of cleanliness.

Environment

People live in an environment that meets their needs and promotes their well-being. The environment is homely and welcoming. There are communal areas including a dining room and three lounges. People can choose where to spend time and can spend time privately with relatives, friends, or external professionals in one of the smaller lounges. Bedrooms are personalised and reflect people's needs and interests. People have access to outdoor areas. At our last inspection, we noted work to upgrade the environment. At this inspection, we saw work to upgrade the environment continues including refurbishment of bedrooms. In addition, some equipment has been upgraded, this includes new wash machines and a new boiler.

There are systems in place to identify and deal with risks to people's health and safety. These systems have been strengthened since our last inspection. Maintenance staff at the home conduct regular health and safety checks. External contractors complete specialist checks such as equipment and checks relating to Legionella. Records show checks are carried out at the required frequencies. Overall, the service provider ensures all necessary risk assessments, audits and checks are conducted. Each person who uses the service has a personal emergency evacuation plan in place. The home has a food hygiene rating of five which means standards are very good.

Leadership and Management

Florence Justice Christian Home is a family run care home. The registered person maintains oversight of the service, and, with their spouse they are involved with the day-to-day running of the home. At our last inspection the RI told us about the changes they wanted to make, and we saw the new leadership and management arrangements they had put in place. At the time, people were getting used to their new roles and care workers were getting to know the new structure. One person told us they wanted to know who is responsible for which area of work and what their own responsibilities were. At this inspection, we saw the new structure has been further strengthened and some role titles changed. People told us the new structure is now embedded and it is clear who does what. An experienced manager who is registered with Social Care Wales (SCW) is in post. They are responsible for the day-to-day running of the service, and they have regular contact with the RI. We saw the RI and the registered manager review the quality of the service delivered together. The registered manager works along a floor manager to ensure people's day-to-day needs are met and staff are supported. The RI also appointed a contract and compliance manager. We saw their role includes overseeing recruitment, training activities, and completing reports on behalf of the RI. In addition, a training officer and an administrative officer are in post.

There are arrangements in place to recruit, train, and support staff. We examined recruitment records. These show the service provider carries out checks before a person can start working at the home. At our last inspection, we discussed these checks with senior staff and the RI, they were strengthening these to ensure the relevant references were systematically sought and staff's full employment histories were on file. At this inspection, we found checks are still not as robust as they should be. In one instance, a reference from a person's last employer was not on file. The RI assured us work will continue to ensure checks are as robust as they can be.

Discussion with staff and documentation seen shows they have access to extensive training which includes online training, face-to-face training and one-to-one training sessions. We saw training activities are on-going and the service provider prides itself with the wide training opportunities given to all staff. Staff receive one-to-one supervision with a nominated senior member of staff and they support each other. Care workers are registered with SCW, the workforce regulator.

The RI maintains close oversight of financial arrangements and investment in the service. There is evidence of continuous investment by the provider to maintain the service. This includes investment to maintain and improve the environment, sufficient staffing levels which are appropriate to give people the support they need, and investment in the leadership and management structure.

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
59	The service provider must ensure that records relating to individuals are accurate and up to date.	Achieved
66	The lines of accountability, delegation and responsibilities between the RI and the manager are not set out in writing.	Achieved
35	The service provider must obtain a full employment history from each member of staff and must check all reasons why staff left previous employment with vulnerable adults and/or children.	Achieved
7	The service provider must keep the statement of purpose under review.	Achieved

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