



Inspection Report on

Red Rose Care Home

**Red Rose Nursing Home
Park Road Victoria
Ebbw Vale
NP23 8UP**

Date Inspection Completed

09/04/2024

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About Red Rose Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	BANYAN CARE HOMES 2 LIMITED
Registered places	32
Language of the service	English
Previous Care Inspectorate Wales inspection	19 September 22
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates significant effort to promoting the use of the Welsh language and culture.

Summary

Peoples' wellbeing is actively promoted through all areas of care and service provision. Activities are creative and provided with skill and enthusiasm. The culture of the home promotes positive relationships and the sharing of meaningful moments together.

People receive the right care at the right time. Care is provided to people with dignity and respect, by staff who are skilled and competent in their roles. People have care plans in place to guide staff on individual needs and these are kept up to date.

There has been significant investment in the accommodation and environment for the benefit of people living at the service. The provider has carefully considered the needs of people and their preferences when implementing these changes. There are plans for further updates and investments.

There is a skilled leadership team at the service. The Responsible Individual (RI) and manager work closely together to closely monitor the quality of the service being provided to people and to implement continuous improvement. There are safe recruitment processes in place and all staff receive formal 1:1 supervision and an annual appraisal.

Well-being

People are provided with innovative and creative opportunities to promote their well-being. People we spoke to, and their relatives, consistently told us, *'There is always something going on here'*. The 'Red Rose parties' appear to be a firm favourite. These events enable people to celebrate birthdays and festive periods together. These opportunities are extended to people's friends and loved ones. We were told, *"Moving here has been the best thing to happen to my mother – there is something going on all the time"*. There is a full-time activities coordinator at the home who is passionate about promoting physical, emotional and mental wellbeing through meaningful activities. On the day of inspection, we saw people learning about rainforests which was incorporated into a quiz and memory game. The activities coordinator has made links with the local community, and we saw plans for a Victorian workshop to take place the next day, with people from a local museum coming into the home to speak to people and share Victorian artifacts. The activity coordinator and some care staff spoke of the characters they would play at the workshop and costumes they had prepared. The culture of the home felt uplifting and heartening.

The use of the Welsh language is promoted, with the activity coordinator supporting people to learn the language within 'Welsh Wednesdays' activities.

Care staff support people to choose what they would like for their meals. The meal experience we observed was pleasant and unrushed. Care staff assisted people who needed support with their meals in a dignified and respectful manner. Meals are served to people in the dining room directly and people choose which sides and vegetables they would like.

The provider has made significant investment in the accommodation and has focused on improving the wellbeing of people. People choose the colour their room is painted and can personalise them as they wish. We were told how the RI took time to speak to a person about how they would like their room redecorated. This made them *'feel important'* and that their *"opinions matter"*.

Appropriate levels of care and nursing staff ensure peoples' needs are met without delay. Rotas also showed this is maintained, with any gaps being covered with 'regular' agency staff. Care staff we spoke to were aware of their duty to protect people and knew how to report any concerns they had. Care staff and relatives we spoke to were confident any issues they brought to the manager or RI would be acted upon to keep people safe.

Care and Support

The manager gathers information about a person; their needs, preferences, and what matters to them, as part of a pre-admission process. People have their own individual care plans in place when they move into Red Rose which detail their care needs and guide staff on how they prefer these to be met. Care staff makes sure these documents are kept up to date and regularly reviewed. Care staff record the support provided to people, and key information such as what a person has ate or drunk, using handheld mobile devices.

People receive care and support which is personalised to their individual needs at that time. People are supported to consider their goals and outcomes, any support needed to achieve the goal and the progress made towards achieving it. For one person, their goal was to purchase a computer, and we read records of each step taken to enable the person to achieve this which had a positive impact for the person.

We saw care staff treating people with care and respect. We saw care staff apply practical knowledge and skill when working with people with a dementia type illness. There are processes in place to support people to achieve positive outcomes in situations where they are not able to make a decision themselves. We saw the positive impact this had for a person with dementia who had been supported to incorporate meaningful tasks into their day.

Overall, there is a stable staff team which enables people to be supported by care staff they are familiar with. The use of agency staff has decreased and when this is needed, 'regular' agency staff are arranged.

There are safe medication processes in place. People are supported to take medication as prescribed and accurate records are kept on each person's medication chart. The management team completes medication audits to ensure high standards of practice are maintained.

People are supported to access specialist health and social care services as needed and without delay. The service provides information relevant professionals if the person is not able to do this themselves and we saw records detailing these discussions. There is also a registered nurse on the premises at all times.

On the day of inspection, the manager told us no one living at the home had any pressure areas and we saw care plans which stated how pressure areas are to be prevented for people who needed this level of care. We also saw all permanent nursing staff had received tissue viability training within the last six months.

Environment

People live in an environment which promotes their wellbeing and creates a positive experience of living in a care home. On the day of inspection, we found the service to be clean, free from clutter, warm and inviting. There has been significant redecoration since the last inspection and the provider has considered the needs and preferences of individuals during this process. This includes new lighting throughout and appropriate signs to help people find their way around the home. People have been involved in decisions about the redecoration, and their views on the accommodation are actively sought.

There is specialist equipment in place to support people who need this, such as hoists. We saw records which show these are serviced and maintained. There are handrails throughout the home to help people walk around safely and independently. We saw the rails were also free from unnecessary clutter and were in a contrasting colour to help people locate them.

The entrance to the home is appropriately secure to protect people from unknown visitors. On the day of inspection, we were asked for our ID and to sign the visitors' book. The service uses CCTV inside the home, which covers the entrance, corridors, and communal areas. There is a policy in place in relation to the CCTV and we saw signs in the entrance of the home saying CCTV is in operation. There is internet and Wi-Fi throughout the home, and we were told of several 'boosters' in place to ensure people can use this if, when and where they want to.

People have their own rooms which are personalised to their own preferences. Care staff respect people's rooms as their personal space and we saw care staff promoting people's right to dignity.

The provider ensures facilities within the home are properly serviced and maintained. We saw a fire risk assessment in place along with servicing of the fire fighting equipment. Fire alarms and emergency lighting are tested regularly and fire drills take place. All people within the home have a Personal Emergency Evacuation Plan in place to guide staff and emergency services in this is needed.

There was a Food Standard Agency inspection taking place during our visit and the service was awarded an FSA rating of 4 which means standards of food hygiene are good.

Medication is stored safely and securely and at the correct temperatures. We were told additional cooling systems are planned to be bought in anticipation of warmer weathers during the summer. There are suitable offices within the home to provide private working and meeting spaces. Paper records are stored securely and access to electronic systems are password protected to protect against unauthorised access.

Leadership and Management

The provider has strong processes in place to ensure they have good oversight of the service being provided. The manager completes monthly and quarterly audits on a comprehensive range of areas of care provision to ensure care is provided consistently and reliably. The audits include the training needs of care and nursing staff, maintenance checks, care records and directly observing care provision. All staff receive formal supervision with a senior member of staff and annual appraisals. The nursing team also complete clinical peer supervisions. The manager arranges regular staff meetings which the RI often attends.

The RI has an active role in the service and is known by people, their relatives and the staff team. People spoke positively about the RI and we were told by a relative, *“Since the new owners have taken over, there is no comparison - they have completely transformed this place”*. The RI completes three monthly formal RI visits to the service which are formally recorded. In these visits the RI speaks to people and encourages them to speak about their experience of receiving care at the service. The RI also completes quality of care reviews and produces a comprehensive report.

There are policies and procedures in place to support the service achieve its aim and objectives, which are stated within the Statement of Purpose (SOP). The leadership structure has recently been updated with the clinical lead role being shared by two members of the nursing team, with each taking responsibility for certain areas of clinical practice within the home.

There are appropriate numbers of care and nursing staff at the home and the provider has a process in place to assess the staffing levels needed. If needed the service will use agency staff to ensure safe levels of staffing are maintained. Staff we spoke to told us they enjoy their jobs and providing care and support to people. People spoke of *“being part of a team”* and *“working well together”*. When speaking about the RI and management team, care staff told us they feel well supported and valued.

We saw evidence of financial investment in all areas of the home including the accommodation, catering and activities. We were told of plans for continued investment for the benefit of people living at the service.

Care and nursing staff are safely recruited, and the manager completes the required pre-employment checks prior to a person working at the service.

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
N/A	No non-compliance of this type was identified at this inspection	N/A

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