

# Inspection Report on

**Cwmbran House** 

Cwmbran House Five Locks Road Cwmbran NP44 1AP

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

15/01/2025



# **About Cwmbran House**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Hafod Housing Association Ltd
Registered places	56
Language of the service	Both
Previous Care Inspectorate Wales inspection	07 December 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

## **Summary**

People are supported in a dignified and respectful manner by care workers at Cwmbran House. People appear happy and content. People's families are welcome to visit the service at any time. Family members offered positive feedback about the service at the time of our inspection. People live in a homely and suitable environment. Robust health and safety procedures and protocols keep the environment safe. Medication management has improved, meaning people receive their medication in-line with their prescriptions.

People are not always supported to be as healthy and safe as possible. People's personal plans lack detail and do not always outline people's individual needs in a robust manner. Care is not always delivered in a consistent way to ensure people achieve well-being. This puts people at risk, and we have therefore issued a priority action. The service provider offered us assurance this matter would be reviewed immediately.

Overall governance and quality assurance arrangements have improved in most areas of the service. The responsible individual (RI) undertakes their regulatory duties in a diligent manner. More robust quality assurance tools have been developed to help the service run more smoothly. Improvement plans are implemented when things go wrong to mitigate further risk to people.

#### Well-being

People sometimes have control over their day-to-day lives and do the things that matter to them. People are treated with dignity by care staff who listen to them. A comprehensive statement of purpose (SoP) and reader-friendly service user guide (SUG) tells people what to expect from the service and what opportunities are available to them. An activities coordinator delivers an activities programme to help keep people stimulated. This includes group and communal activities, as well as fun seasonal activities. Daily records are often task-orientated, meaning they do not always include evidence of people engaging in meaningful activities that make them happy. The service provider offered assurance this would be reviewed. The recruitment of a second activities co-ordinator is in progress. This will extend the home's activities programme and is anticipated to further improve people's well-being.

Family and personal relationships are encouraged. People's relatives and friends are encouraged to visit the service at any time. Care workers have built up a good working relationship with people's loved ones and know them well. At the time of our inspection, lots of friends and relatives visited people and this had a positive impact on them. People's families offered positive feedback about the service provider. One relative told us "The care is wonderful", whilst another told us "I am absolutely happy with the care." People appeared happy and content at the time of our inspection.

The service provider does not consistently support people to achieve well-being. Care and support are not always delivered in a timely manner to help people stay healthy. People's personal plans are not always co-produced with them and lack person-centred detail, meaning care staff do not always have access to the information needed to support people in a way meaningful to them. Personal plans do not always outline people's up-to-date care needs and sometimes include contradictory information. This may be confusing to care staff, particularly new or agency care workers who are not familiar with people's needs. Some people's care and support is not delivered in-line with their individual needs, which puts their emotional and physical health at significant risk.

We were offered assurance this issue would be reviewed promptly to mitigate any further risk to people's well-being and safety.

### **Care and Support**

People are treated with dignity and respect by a caring staff team. Care workers engage people in meaningful interactions which have a positive impact on their emotional well-being. People's loved ones offered positive feedback about care workers. One person's relative told us "Staff can't do enough. They are so attentive." Some people have meaningful personal outcomes, which care workers support them to achieve. These outcomes act as goals for people to work towards, to help them reach their full potential and do the things that matter to them. Some people do not have meaningful personal outcomes, which may impact their well-being. The service provider offered us assurance that people's outcomes would be reviewed and co-produced with them to ensure they are more personcentred.

The service provider has not ensured care and support is delivered in a way that always protects, promotes, and maintains the health and safety of individuals. People's personal plans do not consistently include sufficient and accurate information to enable care workers to provide care and support in a safe and effective way. In some instances, we identified contradictory information in people's personal plans, which puts them at risk of receiving inappropriate care. This risk is especially significant when agency workers are involved, as these care workers may not be familiar with people's needs. People's care and support is not always delivered in-line with their individual needs. Daily records are not consistently completed to evidence what care and support has been delivered. This puts people's physical and emotional well-being and health at significant risk, and we have therefore issued a priority action notice. The service provider must take immediate action to address this. The service provider offered us assurance immediate action would be taken to mitigate further risk to people, and we will review this at our next inspection.

The service provider's medication management has improved since our previous inspection. The introduction of an electronic medication system has made medication arrangements more robust, ensuring people's medicines are stored and administered safely. Better analysis of medication errors helps the service provider identify trends when things go wrong, and improvements are promptly made. Care workers undergo regular competency checks and training to ensure they have the knowledge required to safely administer medications. The service provider is in the process of developing a new medication induction programme for agency care workers to ensure they are fit to administer medications, and this is something we will review at our next inspection.

#### **Environment**

People are supported in a pleasant environment which is suitable and helps them achieve well-being. The location, design and size of the service are as described in the service provider's SoP. This helps people choose a suitable service. Relevant adaptions have been made and appropriate equipment and facilities are available to meet people's needs.

Internal areas of the service are homely and nicely decorated. The service offers ample communal space for people to socialise. This includes large lounge areas, as well as smaller, private areas ideal for family visits and smaller social groups. Dining areas are well-presented for mealtimes which helps create a positive dining experience. People's bedrooms are spacious and include en-suite facilities. People can decorate their bedrooms to their personal tastes and preferences to make them feel more like home. External areas are well-maintained. The service benefits from a secure garden area where people can sit out and enjoy the good weather.

Robust health and safety arrangements ensure a safe environment. The service provider employs a permanent maintenance technician to oversee internal health and safety matters. Internal health and safety checks and testing are undertaken consistently. This includes regular testing of the fire alarm system. Appropriate health and safety test certificates evidence the service is compliant with relevant health and safety legislation and regulations. The service benefits from a food hygiene rating of five. This is the highest rating achievable and demonstrates the service has good food hygiene arrangements. The service provider has robust security arrangements to ensure people are kept safe. Visitors are asked to present identification and sign-in on arrival. A fob system is used by staff to ensure some areas of the service are kept secure.

The service provider has good infection prevention control measures. A robust infection prevention control policy and protocols help to reduce the risk of infection. The service provider employs permanent domestic staff to regularly clean all areas of the service. On the day of our inspection the service was very clean, and we observed domestic staff deep-cleaning various areas of the service.

#### **Leadership and Management**

People are provided with accurate and thorough information about the service. A comprehensive SoP and reader-friendly SUG mostly reflects the service provided which helps people choose a service which can meet their needs. Comprehensive policies are regularly reviewed and updated when required.

The service provider has shown commitment to continuing improvement to ensure a mostly well-run service. Governance and quality assurance arrangements have improved since our last inspection. A better range of quality assurance tools are used to identify trends and patterns when things go wrong. Improvement plans are promptly developed and implemented to reduce further risk and improve people's well-being. Some quality assurance tools are being further developed to enhance how effectively the service is run. The service provider offered us assurance it will take issues of concern identified at this inspection seriously, and prompt improvement action will follow. We look forward to reviewing this at our next inspection.

The RI has a regular presence at the service and knows people well. The RI undertakes their regulatory visits in a timely way and in-line with the regulations. Comprehensive visit reports evidence the RI takes the time to speak to people, their families, and staff members on a regular basis. A bi-annual Quality of Care report describes what the service is doing well and what improvements are needed to enhance people's quality of life. The RI offered us assurance that deeper analysis of care planning and delivery will be carried out going forward to ensure any improvement areas are identified promptly.

People are mostly supported by an appropriate number of staff who have the right skills, experience and competencies. Care workers are mostly safely recruited and undergo an induction and probationary period before being signed-off as fit to work. The service provider offered us assurance that a more robust approach to the induction of agency care workers would be taken going forward. Care workers are supervised in a timely way. Regular supervision is important as it affords care workers the opportunity to discuss any developmental needs or concerns. Care workers receive appropriate core and specialist training to ensure they have the necessary knowledge required to deliver care and support. The service provider hosts an annual staff awards ceremony, which recognises staff hardwork and achievements.

The service provider has recently developed a dependency tool to calculate required staffing ratios to support people safely. This tool considers people's individual care needs as well as other factors such as the environment and staff training needs. We look forward to reviewing how this dependency tool has been utilised at our next inspection.

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
21	The service provider has not ensured care and support is delivered in a way which protects, promotes and maintains the safety and well-being of people.	New

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 inspection	N/A
15	Personal plans do not include outcomes to improve people's wellbeing.	Not Achieved
58	Medication procedures to be more robust to ensure people's safety and wellbeing.	Achieved

# 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 <u>Feedback surveys</u> <u>page</u>.

Date Published 25/02/2025