

Inspection Report on

Landsdowne Gardens

Cardiff

Date Inspection Completed

30/08/2023



About Landsdowne Gardens

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	15 May 2019
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

Landsdowne Gardens endeavours to support people as they wish. Promoting people's independence, choice and control are given priority. We saw people settled and at ease in their environment and with care workers. Care staff are compassionate, respectful, and support people to achieve their goals. People are protected from harm but are also encouraged to take risks, in a safe and managed way. Good communication channels are evident throughout the home, with prompt referrals to healthcare professionals where necessary.

There is a drive at management level to consistently improve and develop the service provided. Staff are very happy working at the service, feel very supported in their roles and receive appropriate training. The service has systems to monitor care and support. There are structured and thorough arrangements in place to continually monitor the quality of the service to ensure people are achieving their desired outcomes.

Well-being

People are treated with dignity and respect at Landsdowne Gardens. We saw people are well-settled in their environment, receiving warm and caring support. We saw several good examples of person-centred support by the service, helping people achieve their goals and improve their well-being. We saw several examples where people's lives had changed significantly in terms of the skills they had learnt. People do the things that make them happy. Each person is as busy as they wish to be.

People's physical and mental health and emotional well-being are promoted. Care workers listen to people's opinions about the support they receive. Keyworkers meet with people regularly to discuss their plans and to review any changes required. All personal plans are up to date and clearly describe each person's needs. There is good sharing of communication within the team and prompt referrals to healthcare professionals where necessary.

People live in an environment that supports them to meet their needs. Bedrooms are comfortable and personalised. Communal areas meet people's needs. The home is clean, well-maintained, and well-situated to the local community.

People are protected from abuse and harm. There are systems in place to help protect people such as comprehensive risk assessments. Policies and procedures support good practice and can assist staff to report a safeguarding concern or 'whistle blow', should this be needed. Care staff report they feel confident if they raised an issue with the manager, it would be responded to. Suitable training ensures care staff are sufficiently skilled.

We were told the home did not provide a service to people in Welsh at the time of the Inspection as no one living at the home speaks Welsh but could make efforts to try and facilitate support in Welsh if required in the future.

Care and Support

People are supported to develop their full potential. People receive support as described in their care plans. There are up to date plans for how the staff team enable people to live their lives as they wish. Personal plans are individualised, detailed, and outcome focused. Risk assessments help to ensure people retain their independence as much as possible whilst protecting them from potential harm. Care records clearly describe people's support arrangements. Keyworkers and the manager regularly review these records, especially where needs change.

Timely referrals to health professionals and partner agencies are made to promote individuals physical and mental wellbeing. Any recommendations or directions are acted upon promptly by the service. There are systems in place for the management of medication. Medication is stored securely and can only be accessed by authorised care staff. Records show staff administer medication in line with the prescriber's directions and are free from gaps or errors. There are regular medication audits, and the home has an upto-date medication policy. Monitoring charts are used where required, such as weight and other pertinent checks. When a person declines monitoring, this needs recording. A body map is not currently in place to support cream application although the use of creams is recorded on the Medication Administration Record (MAR) chart.

Care and support is provided in a dignified and respectful manner. People appeared well cared for. We saw warm and positive interactions between care workers and people living at Landsdowne Gardens. Each person is given the individual support they need. People contribute as much as they can about decisions around their care and support. We saw people have good relationships with care workers who support them. Staff are respectful and are kind in their interactions with people. Staff, and management, get to know the people they support well, and they are familiar with each person's individual needs.

Environment

People receive support in a suitable environment. Landsdowne Gardens is a domestic sized home in a residential area of Cardiff. The home is safe, warm and clean and people

say they feel comfortable. Communal areas include a large lounge, an open plan kitchen dining area, where people can choose to spend their time and have meals. There is also a conservatory. Bedrooms are personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos, and items of furniture.

Refurbishments since the last inspection includes a new kitchen and areas of re-decorated. We were told of further upcoming plans to help further develop the environment. We saw some areas required redecoration such as the downstairs toilet area and radiator covers.

People can choose where to spend their time, be it in their own rooms or with others in communal areas or the recently renovated back yard. To the rear of the property is a small courtyard, with a few small sheds. This area is going to be further developed to include a seating area.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry and record their visits in the visitor's book when entering and leaving. Care records are kept securely and only available to authorised care workers.

The service takes measures to maintain the safety of the environment. There are no obvious trip hazards. Daily cleaning and laundry duties are maintained. A pedal bin is required in the downstairs toilet to strengthen infection prevention controls. Maintenance records confirm the routine testing of utilities. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal emergency evacuation plans enable staff to understand the level of support people require in the event of an emergency and are easily accessible in a 'grab bag'. Regular review of the grab bag is required to ensure all information is up to date such as staff contact details and individuals MAR charts.

Leadership and Management

People can access information about the service. The statement of purpose accurately describes the service provided. There is a service user guide available. This enables people to make an informed decision regarding the service.

The service ensures staff are fit to work at the service. Care workers go through a robust vetting procedure to ensure they are safe to work with vulnerable adults. They are happy and enjoy working at the service. They are passionate about improving the lives of the people they support. Most care workers have worked at the service for several years and know the people they support very well. They are friendly and skilled. Care workers receive ongoing mandatory and person specific training to meet people's needs. All have achieved or working towards their social care qualifications (QCF) and are registered with Social Care Wales, the workforce regulator.

People benefit from care workers that feel well-supported. All receive regular supervision which is important to give them the opportunity to receive support and discuss their professional development. Care workers told us that the manager and senior staff are supportive and approachable.

The service acts in an open and transparent way. Care workers and people living in the home are confident in expressing their views and we saw evidence they are listened to. Policies and procedures are in place to support good practice and care staff have a sufficient understanding of what is expected of them. Care workers demonstrate a good understanding around safeguarding and whistleblowing. We noted the safeguarding policy was dated 2021 and requires review to ensure it remains in line with the All Wales Safeguarding procedures.

The Responsible Individual (RI) completes regular visits to the home to assess quality and maintain oversight. The RI gains feedback from people and care staff. Staff training, accidents and incidents are analysed to identify patterns and trends. The RI also completes a thorough review on the quality of care using feedback from a range of sources. The review considers progress of previous actions and identifies what the service does well and ways to improve and develop.

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
	Inspection	

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