



## Inspection Report on

**The Willows**

**The Willows  
6-10  
Llys Gwynfryn  
Neath  
SA10 7UB**

**Date Inspection Completed**

16/11/2022

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## About The Willows

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">15.06.2021</a>
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People are well supported and cared for by dedicated, committed and well trained care workers and a supportive management team. There is good governance and oversight in the service. All care workers told us they receive good formal and informal support. All feedback gathered as part of the inspection was positive about the culture in the service and people informed us they are happy and feel safe. There are good processes in place to help maximise people's engagement in support planning and skills development. Care worker staffing levels are regularly reviewed to ensure people's needs are met in line with care planning and personal outcomes.

The environment is safe, clean and in accordance with the objectives detailed in the statement of purpose (SoP). Safety checks and service schedules are completed in-line with current requirements. Some communal areas and a bathroom are tired and need re-decoration and updating. There are plans to refurbish and update some parts of the building next year. There are good infection control and Covid 19 preventative measures in operation. There are robust recruitment checks in place and care workers receive a thorough induction and training to perform their roles competently.

## Well-being

People are treated with dignity and respect. We saw positive interaction between care workers and people throughout the inspection. People informed us they enjoy living in the service and that they are consulted about their support needs. People gave us consistently positive feedback about care workers and managers during the inspection. People are supported to maintain and develop skills. People told us they complete a wide range of independent living tasks such as cooking, cleaning and laundry with support as needed. People access their local community in line with risk and support plans. We spoke to care workers and viewed staffing rotas, all confirmed there are good staffing levels currently ensuring people's needs are fully met. The manager told us new staff have been recruited recently to fill vacant posts and the staff team is now up to full numbers.

There is good oversight of the quality of care provision from managers and the responsible individual (RI). The RI completes regular visits to the service. Care workers and people told us communication with the manager is good and issues reported are acted on promptly and appropriately. Personal support plans are clear, informative and detailed, they are outcome focused and relate well to care staff recordings and risk planning. The service also uses specific assessment tools to measure progress in relation to mental health and recovery. We saw people are making good progress and are benefitting from living in the service. Some people told us they feel ready to move on to more independent living given the progress they have made. Care workers and managers receive a wide range of appropriate training to ensure they are fully able to meet people's needs and outcomes.

The environment is safe and provided in accordance with the objectives defined in the SoP. People benefit from a service that promotes and supports independent living and skills development. The provider has invested in the service and a new kitchen has been installed since the last inspection. Some areas of the service would benefit from re-decoration and new floor coverings. A bathroom also needs updating and refurbishment. People are safe and routines such as fire checks, gas and electric safety certificates were viewed on inspection. Administration and storage procedures for medication are safe, appropriate and in line with guidance. People are protected from neglect and abuse as care workers know what to look out for and how to raise concerns. Care workers are trained in safeguarding and there are clear and regularly reviewed procedures and risk plans to guide them. Care is provided in accordance with protocols covering capacity and restriction of freedom.

## Care and Support

There are current and up to date support plans for how care is provided in order to meet people's needs. We completed an audit of two people's support files. Personal support plans demonstrate what matters to the person and how best to support them to achieve their identified goals. Detailed risk assessments are in place to correspond with people's support plans including specialist assessment and monitoring tools in relation to their mental health. People's ability to be involved in care planning is considered and the appropriate legal measures are in place to safeguard them where appropriate. Recording of support given is detailed and evidences that peoples identified needs are monitored and reviewed where necessary. There are detailed health records and associated actions documented. We also saw regular planned reviews which include consultation with people on progress being made. We saw clear progress is being made by people against outcomes detailed in support plans such as independent living skills and participation. We saw people participating in household tasks and visiting the local community during the inspection visit. Several people told us they are hoping to move on to more independent living in the future. At the time of inspection some people were in the process of moving to their own home with targeted support. We spoke to people living in the service who all told us they are happy, settled and generally get on well with staff. One person told us; *"Would like my own place in the future. Not quite ready for this yet and get along really well with the staff and manager. No complaints or concerns to report"*.

People live in a home that provides appropriate numbers of knowledgeable, competent and skilled care workers. Care workers confirmed staffing levels are appropriate and targeted to the needs of individuals living in the service. The manager told us new care workers have recently been recruited following a challenging period during the height of the Covid 19 pandemic. We saw all care workers receive core training mainly provided online. The manager told us taught subjects are being reintroduced following the pandemic in areas such as first aid and behavioural management. A care worker told us; *"Very good training. First job in social care and really feel the training provided has been excellent"*.

There are safe systems in place for the management of medication and people's health is promoted by good practice. We saw medication is stored securely in a locked room. Records of daily temperature checks were seen to ensure safe storage of medication. Medication Administration Records (MAR) are completed appropriately with signatures of care workers present. There are good processes in place for the ordering and auditing of medication in the service which minimises the risk of error. Staff assisting people with medication are trained and deemed competent to do so. Many care workers in the service have been in post a number of years and know people well. This enables them to identify any health deterioration quickly and to seek support when needed. We saw detailed recordings documenting health issues, appointments and associated actions.

## Environment

The provider ensures people's care and support is provided in a location and environment with facilities that promote people's well-being and safety. The service consists of a large, detached building with seven large bedrooms, one of which can accommodate a couple. We viewed three of the bedrooms and found them to be well maintained, personalised and homely. Since the last inspection, the communal kitchen has been updated and refurbished. The area was seen to be clean and hygienic with a current food hygiene rating of five which is the highest possible. There is a living/dining area where we saw people relaxing. We were told people are fully involved in relation to household activities such as cleaning, cooking and clothes washing. There is a separate locked laundry room and locked storage cupboard for the safe storage of control of substances harmful to health products (CoSHH). Parking is available to the front of the building. We looked around the service and found some communal areas such as the ground floor hallway and entrance are tired and need re-decoration and new flooring. We also noted the first floor bathroom would benefit from refurbishment and updating. We were told by the manager this work is planned to be completed early next year along with fitting a new smoking shelter roof in the back yard. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

We saw mandatory fire safety checks take place routinely and certificates for gas, fire detectors, fire extinguishers, electricity and electrical equipment are all up to date. At the time of inspection, work was being completed by an external contractor in relation to the fire panel and door closures. This was due to a recent lightning strike that had damaged some of the equipment. Monthly external contractor water temperature checks are taken and documented. Personal emergency evacuation plans (PEEP's) are in place for people. We saw fridge temperatures are taken regularly and documented appropriately and all areas viewed appeared clean. Also there are facilities such as coloured chopping boards and mops/buckets to promote good food hygiene procedures. There is a secure office area where files are stored appropriately.

## Leadership and Management

People are supported by a dedicated team who have been recruited safely and are well supported in their roles. Many of the care workers have worked in the service for years and are very familiar with the needs of the people being supported. The manager is relatively new and told us they are supported very well by the new RI who was the previous manager of the service. We looked at two staff personnel files and saw appropriate pre-employment and recruitment checks are in place. References and up to date Disclosure and Barring Service (DBS) checks are on file. The manager told us all care workers are now registered with Social Care Wales (SCW). The training matrix was seen and we found all mandatory training requirements of the provider are up to date. Most training is facilitated online and includes infection control, safeguarding, health and safety, fire awareness. Also specialist training including; mental health, personality disorder and positive behavioural support. Care workers spoken with confirm they attend safeguarding training and understand their responsibility in relation to this. The manager told us some taught training has recently been re-introduced such as first aid and behavioural management. There are detailed and thorough safeguarding policies and procedures in place to guide care workers. We saw staff receive routine formal supervision and an annual appraisal. Care workers spoken with are complimentary of the training and support they receive. Comments include; *“Good support, as a team we all support each other...I know the strengths of each staff member. Deputy and manager very supportive, open door policy”*. And another; *“Manager is really supportive and helpful. She checked in with me a lot when I was on sick leave. Really understanding and supportive. She has been fantastic”*.

The provider has arrangements in place for the effective governance and oversight of the service through ongoing quality assurance processes. We saw the recent bi-annual quality of care report. The report includes feedback from people and staff in the service. The report indicates what the service is doing well and includes further improvements for the future. We saw the RI is in regular contact with the service. We saw policies and procedures have been reviewed and where necessary updated. The service's SoP has been reviewed and accurately reflects service provision. There is a detailed and clear guide to the service for people and relatives. All policies and procedures are available in the Welsh language as requested. Care workers told us staffing levels have improved and the manager stated there is now a full staff team in place and no agency workers in the service. The appropriate agencies including Care Inspectorate Wales (CIW) are notified where necessary of any significant issues affecting people or the service. The manager told us the service is settled and there are no current concerns or complaints.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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43	A full inspection took place on 16th Nov 2022. As part of this an inspection of the environment took place. In some communal areas decoration and flooring needs updating and refreshing. A bathroom is dated and needs refurbishment.	New
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