



Inspection Report on

Southern House Nursing Home

**Southern House Nursing Home
18 Water Street
Abergele
LL22 7SH**

Date Inspection Completed

10/02/2023

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About Southern House Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Chestnut House Healthcare Limited
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	11 March 2020
Does this service provide the Welsh Language active offer?	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 tell us they like living here. The service provider ensures the home meets people's needs and is warm, comfortable, and welcoming to both visitors and residents. Care staff routinely offer people choice in their day to day lives. Staff know people well, but personal plans do not always reflect this level of knowledge. Management is addressing this as part of regular reviews of these plans and people's needs. Care staff are kind, respectful, and attentive in their care for people living here.

There is currently no responsible individual (RI) or registered manager at the service. The service provider is actively working to fill these posts. In the meantime, the area manager along with an interim manager are both providing governance oversight of the service. Both have worked at the service for many years and know the people very well.

Well-being

People have a choice about how to live their lives day to day. The views and opinions of people are considered in writing personal plans for how they want staff to support them with their care needs. We also saw choices are offered at mealtimes and people can choose where they want to eat their meals and spend their time throughout the day. There is an activities coordinator employed and activities are planned for most days of the week. These include themed events such as Valentine's Day, as well as movie nights, and a virtual reality walks around Rome and Venice. Group and individual activities are supported and encouraged by staff; we saw an activity plan for the week including hairdresser visits and pampering, singalongs, one to one room visits for a chat, and arts and crafts for those who wish to take part.

People can be sure their mental and physical well-being and health is looked after, including being protected from abuse or neglect. Staff receive training in safeguarding and are confident in reporting any concerns for people's welfare to management. Care records show timely referrals are made to health and social care professionals as required. Records also show appropriate steps are taken to ensure care is provided in the best interests of those who lack capacity to make decisions for themselves. One person told us they enjoy speaking Welsh with staff and have lots of visitors. We saw visitors are welcomed throughout the day. People told us they like the food and we saw it looked and smelt appetising. We saw evidence that advice from nutritional specialists is followed to ensure people maintain a healthy weight whilst living in the service.

The home provides suitable accommodation to meet the needs of the people living here. It is warm and homely, and bedrooms are personalised, contain personal belongings and items of importance to people, like photos and ornaments. We saw care staff approach people in a calm, dignified manner and are kind to people. We saw staff welcoming new residents to the service. Staff were patient, provided reassurance and supported them to settle in and meet other residents. People told us staff are lovely and know what they like, and they "*can't say there's anything wrong with the place*".

Care and Support

People can be sure their needs are fully assessed to ensure the service can meet their needs. The interim manager uses information gathered from people themselves, their relatives or representatives, and health and social care professionals to build a picture of people's care and support needs before they move into the home. This information is used to write personal plans to inform staff about people's needs and how people would like to be supported. These plans are accessible to staff both electronically and in paper format. We saw records and observed care showing care is provided to meet people's plans, and the care we saw was kind, dignified and patient.

Care staff we spoke to know people well and were able to tell us about people's care needs and preferences. In the main personal plans contain information to inform staff in how to care for people, however they could be further developed by recording how staff can support people in achieving their personal outcomes by recording what aids they use. The interim manager was able to tell me the detail missing in the plans and agreed to focus on enhancing the level of detail in everyone's plans as they come up for review.

People have personalised risk assessments in place appropriate to their needs, but we saw one person's personal plans had not been updated with changes made to their risk assessment outcomes. We discussed this with the interim manager, who plans to provide refresher training for care staff involved with reviewing and updating risk assessments and personal plans.

The domestic staff look after the cleanliness and hygiene in the home and follow current national guidelines and legislation around infection prevention and control. Ample cleaning supplies, laundry supplies, and Personal Protective Equipment (PPE) are available, and these are used appropriately by staff.

Environment

The home itself is secure, warm, and welcoming. It has spacious and bright communal areas for people to enjoy spending time together. Communal areas, bathrooms and bedrooms seen are well decorated and maintained. Records show the décor and repairs needed throughout the home are monitored through monthly health and safety audits; the service provider and management act swiftly to address any issues identified. Corridors are uncluttered, clean and nicely decorated. Bedrooms are also clean and tidy, with furniture such as wardrobes, attached to the walls for safety. The exterior of the home is well maintained and includes a brightly painted seating area in the rear, suitable for warmer weather.

People have access to the equipment they need, and this is serviced and maintained regularly to ensure safety of use. Records show health and safety checks that comply with current national guidance and legislation are done in the home, including fire safety and electrical safety. The Food Standards Agency has awarded a Level 5 food hygiene rating, which is the highest rating achievable. The service provider and management ensure that health and safety risk assessments are updated and reviewed regularly. We saw records of fire evacuation plans, emergency action plans, fire safety training for staff, and personal emergency evacuation plans (PEEPs) in place for people that were all recently reviewed.

Leadership and Management

The service provider is working towards ensuring adequate governance systems are in place in the service since the former Responsible Individual (RI) left their post last year. The lack of RI has not impacted upon people living in the home and therefore the service provider remains complaint. The service provider ensures the home is financially sustainable and that adequate audit and monitoring of the day to day running of the service is in place. A new area manager has been appointed and is supporting the interim manager for the home in their new role. Management staff know the service and people living in the home well as both have worked in the service for several years. The service provider is currently applying to register a new RI with Care Inspectorate Wales and is actively seeking a permanent manager for the home.

We saw evidence of adequate vetting and safety checks for new staff, including registration with the relevant regulatory bodies for nurses and care staff. We noted the records in staff files do not accurately reflect the online recruitment process timelines followed by management; we discussed this with the interim manager who will ensure the records in staff files reflect this from now on to ensure their ongoing compliance with regulations is evidenced.

Records show adequate numbers of staff are deployed in the service to meet the current needs of people living there. This is supported by what we saw during our visit. Due to ongoing recruitment issues in the care sector since the pandemic, the service uses some agency nursing staff and has their own internal bank for care staff when required. We saw the same care agencies are used and the interim manager requests the same staff to maintain continuity of care for people; this is supported by a brief induction process for agency nurses. The area manager told us they have also introduced a new induction checklist that ensures health and safety is a key component of this. The interim manager told us they have a good relationship with the agencies and routinely request evidence of individual agency staff's fitness for their role before booking them.

Staff we spoke to feel well supported by each other and the management; some staff have worked there for decades and told us they continue to enjoy working there. We saw records of regular staff meetings and management provide one to one supervision for staff in addition to annual appraisals. Training records do not reflect the current level of staff compliance with required training; however, the interim manager is in the process of updating records with completed and planned training sessions. Courses covered meet the needs of the people living in the service and the service provider employs a training person to coordinate staff training across all the homes in their organisation. The interim manager and area manager ensure staff are available and have time to attend training face to face courses and complete online training requirements.

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
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Date Published 12/04/2023