



Inspection Report on

The Penylan Residential Hotel

**Penylan Residential Hotel
82 Pen-y-lan Road
Cardiff
CF23 5HX**

Date Inspection Completed

02/02/2024

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About The Penylan Residential Hotel

| | |
|---|---|
| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | The Penylan Residential Hotel |
| Registered places | 15 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | 15 August 2022 |
| 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 receive tender, kind care, are happy, safe and feel they belong. Care and support is provided according to an individualised, agreed plan which is regularly kept under review. People are understood, including people living with Dementia, and the right care and support is provided for individuals to achieve good outcomes. People's health monitoring is excellent, informing actions to be taken, such as referrals to health professionals.

The environment is suitable for people's needs with sufficient space and appropriate equipment. A programme to refresh décor and replace some items of furnishing is underway. People like the homely, traditional presentation and feel comfortable in their surroundings.

The provider has a nominated responsible individual (RI) who is exceptionally supportive, has excellent oversight of the service, and fosters a 'family' culture. The service is run smoothly with clear systems in place. All staff are recruited safely and receive robust training to meet people's needs.

Well-being

People's individual circumstances are considered. The provider fosters a culture of care where everyone belongs and feels part of a 'big family.' Care and support is delivered in a calm, sensitive manner tailored to the individual's needs. Assessments of people's needs inform detailed, individualised personal plans that care workers follow. People's wishes are recorded, and where safe to do so, are supported. The ethnic diversity of people and staff is recognised, supported and celebrated. People feel they belong, are happy and feel "safe." Communication is good and people who are unable to express themselves verbally are understood. Staff are highly knowledgeable and competent in supporting people living with Dementia. The service has been commended by health and social care professionals for their dedication and competence in supporting people to the end of their life, and the general care delivery.

The provider ensures people are safe and protected from abuse and neglect. The environment is safe and secure. Regular testing and maintenance of the building, services and equipment takes place. There is a programme to refreshing décor and replacing some items underway. Risk assessments are in place in relation to the environment and people, helping to identify how these can be minimised. People have a personal plan to follow, including one for emergency evacuation of the building. Staff are recruited safely, have a thorough induction and robust training. People's needs inform the training needs of staff, for example, when catheter care is required. Competencies of staff are tested, including medication, which is safely administered. There is a focus on 'safeguarding' training to ensure staff know the signs of neglect or abuse.

Support is given to ensure people are as healthy and active as they can be and do things that matter to them. People are observed to be engaged in activities of their choice, some being organised group activities. Fun exercise activities promote mobility maintenance. People are observed and heard laughing and singing throughout the day, and those who wish more quieter space are supported to access this. A robust health monitoring system is in place to inform staff when action needs to be taken, for example, referral to a dietician. Other health professionals are consulted when required, including the GP. Timely referrals are made for equipment to assist people's health needs. Medication management is good, including stock levels, and regular medication reviews for individuals take place. Personal plans are updated to reflect any changes in need for people and this is done in consultation with the person or their representative.

Care and Support

People are treated with dignity and respect. Consistent care staff know people well and understand the subtle indicators used by people to show they need support, even if the person is unable to speak. We saw staff provide care in a respectful manner, giving people time to understand information and make choices. People's wishes are respected. The home celebrates the multi-cultural backgrounds of people and staff. People told us they feel safe, and confirmed that staff are "*Very kind,*" and are "*Such nice people.*" People are supportive of one another.

Healthcare needs are monitored and supported. People's weights and skin are routinely checked. Staff are competent in identifying issues, reporting these, ensuring external health professionals are involved when required. People who need support from Mental Health services, including those living with Dementia, have access to specialist support. An appropriate prescriber completes medication reviews. People have personalised support to help maintain their health, including adapted diets to promote nutritional intake, and meals provided outside of more traditional times. Sensitive care is provided for people who are towards the end of their life so they can remain at the home, with specialist involvement to provide guidance and medication if required. Compliments from families, and documents reviewing the service by professionals, show people have exceptional care at this difficult time. Medication is administered safely, and the documentation around this is robust, especially for medication that only needs to be taken from time to time. People have day to day access to other health services such as chiropody.

People can be confident that the service has an up-to-date personal plan. The service uses initial assessment and detailed risk assessments to inform the writing of the care plans, including oral and skin care. These are used to guide staff on how to support the person. Other documentation is available within the personal plan as required. People or their families are consulted about any changes required to the plan and this is actioned. Daily records give a good picture of the care delivered, in addition to health monitoring records, used to inform any reviews of changes in need. People who find decision making difficult, including reviews of their care needs, have access to family members or advocacy services to help with this.

Environment

People live in a home that meets their needs. A through floor lift provides safe transfer for people between floors, enabling access to communal areas on the ground floor. Two separate lounges provide people with opportunities to choose to participate in activities arranged in one, or to spend quieter time in the other. Décor is traditional in style, but people like the environment and one person told us, *"I like what they've got on show."* People personalise their bedrooms with photographs and memorabilia. People access communal bathrooms. Equipment is provided if required, to support people's mobility, and a 'nurse call' system is in place for people to alert staff if they need help. When required, referrals are made to health professionals who provide, specialist equipment such as pressure relief pillows and mattresses to support good skin care. Situated at the end of Roath Park, and with a maximum of 15 occupants, The Penylan Residential Hotel is a smaller home which people like, as it provides a more intimate 'homely,' 'family,' feel. An outdoor courtyard provides external space which is used in warmer months.

The environment is monitored and maintained. Systems are in place to support routine monitoring and testing of services, such as gas and electricity. Equipment, such as lifts and hoists are routinely serviced. When servicing identifies actions required, these are taken. There is an ongoing plan to improve the environment with larger projects, such as replacing floors and coverings now complete on the ground floor, and in some bedrooms. Improvements are underway to freshen décor, and new dual-language signage helps to promote the Welsh language. People's cultures and celebrations are recognised and reflected within the home, for example, we saw Chinese New Year and Valentine's Day decorations in different communal areas.

The provider takes steps to mitigate risks to people. Risk assessments are in place and updated, such as Fire Safety and Legionella. All staff are trained appropriately in all aspects of Health and Safety and take part in regular fire drills. People have a personal plan to show the support they need to help them evacuate the home in the event of an emergency. The home is secure. Infection prevention is managed with sufficient supplies of Personal Protective Equipment and sanitiser. The home is clean, warm and bright. The Food Standards Agency has awarded a level 5 rating, which is the highest possible rating as part of monitoring by external authorities. Improvements have been made to ensure furnishings are safely secured to walls if required, and risks to people are reduced by replacing worn or damaged items. Medication is stored safely, and improvements have been made to ensure personal information is stored securely.

Leadership and Management

The provider has governance arrangements in place. A nominated RI is experienced and knowledgeable and provides a high level of oversight and support. The RI is respected and acknowledged for their dedication to the service, encouraging a 'family' culture where everyone belongs and is supported. They carry out visits to the home, consult people and care staff to understand how the service can improve, and takes action to enable improvements. The RI guides and supports the manager, providing detailed reports on the quality of the service and care. The provider is kept informed of the quality of the service, and arrangements made to invest in provision of resources to meet compliance, for example, renewing of flooring. Policies and documentation are kept under review.

The service is run smoothly. An experienced manager is in post who is dedicated and passionate about the service. They are visible and form part of the care team helping to prevent the need for agency staff. Systems are used to monitor the service. Audits are carried out. Care staff are supervised, and documentation reviewed as required. Projects, such as renewal of the flooring, is managed well, considering the health and safety of people and care staff. The manager leads by example, showing good interpersonal skills and knowledge of people and their needs.

All staff are recruited safely and feel supported. Pre employment checks are carried out to ensure care workers are fit to work with vulnerable adults. Personnel files are organised and contain all necessary information. Care staff have supervision meetings with a line manager to discuss their performance and personal development. All staff we consulted told us that they feel supported, not just by the manager but also by the RI. The manager told us how dedicated the staff are, supporting each other to ensure continuity of care as all staff prioritise the people living at the service, often before their own families. All care staff are registered with Social Care Wales, the workforce regulator.

The provider ensures care staff are suitably trained. A robust induction programme to the service is followed up with rigorous training to ensure care staff are knowledgeable and competent in care delivery. Much of this training is face to face and not reliant upon digital learning. All staff have training around the safeguarding of people, and there is a focus on people's needs, for example, training on supporting people 'living with dementia' and 'catheter care'. Most care staff are trained in medication administration and have suitable checks to ensure they are competent before undertaking this task. The manager uses supervision meetings to refresh care staff knowledge and awareness of areas such as 'oral care' and the importance of this.

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 |
| 57 | The provider is not identifying and minimising the risks to people, especially with regards to the environment. | Achieved |
| 58 | The provider is not ensuring that medication requiring refrigeration is stored appropriately and care workers follow safe processes when recording administration of medication that requires the signature of two care workers. | Achieved |
| 59 | The provider is not ensuring that all personal information is stored safely. | Achieved |
| 21 | The provider is not always ensuring that care and support is delivered in accordance with the care plans. | Achieved |

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