



Inspection Report on

Milford House

**Milford House Centre
Dartmouth Street
Milford Haven
SA73 2AH**

Date Inspection Completed

25 May 2022

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About Milford House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pembrokeshire County Council Adults and Children's Services
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

People receiving support from the team at Milford House are safe. They are supported by workers who are appropriately trained and safely recruited.

Encouragement and support is offered to help people maximise their potential and to live more independently. Within the home, people have rights as well as responsibilities. Care workers know people well, and know what is important to them

There are some effective governance processes in place to monitor quality, but these could be strengthened to make the documents more meaningful.

Care workers are motivated to provide person centred care and support and feel they are part of a good team. However, some do not always feel valued or listened to.

Some improvements to the physical environment would enhance people's experience.

Well-being

People are safe and protected from abuse and harm. This is because people using the service know how to report any concerns. Care workers know their responsibilities in relation to safeguarding and are confident the managers will take the appropriate action. The home is kept locked to prevent any unauthorised access, although people do have the freedom to leave the property if they choose to do so.

There is a focus on rehabilitation and helping people to achieve or re-establish a level of independence. A worker is proud of the support and encouragement offered to one person who, on arrival at the service, was reliant on staff for most things. They were much more independent by the time they left. Another spoke about the progress people make at Milford House and the pride the staff have at helping them achieve this. People living at the service have rights as well as responsibilities and those we spoke with understand and accept these.

People are supported, where possible, back into work and on to more independent living. This is done through finding out what is important to the person; clear goal setting and offering the right level of assistance.

The physical environment contributes to people's well-being. There is space for people to spend time with others or in their rooms if they prefer. There is safe and secure outside space. Parts of the home would benefit from some repair and redecoration, and this has already been identified by the manager. People working in the home feel some redecoration and updating is needed. The home is clean with people living there having some responsibilities for this. People living, visiting and working in the home are wholly satisfied with its cleanliness.

People are cared for by workers who are motivated to providing person centred and quality care to people. One care worker told us they are motivated *"by wanting to make sure people get the best out of their lives"* and another told us *"we put 100% into our jobs"*. Some care workers feel valued but there are some who don't. Some do not always feel listened to but consider the team to be very supportive of each other.

Satisfaction levels are high among people living at Milford and visiting professionals and there are some processes in place to monitor quality. The quality assurance report could be improved by making sure it is current and contains all of the information necessary.

Care and Support

People can do things which matter to them. One person told us how care workers are helping them to return home and another told us the staff are helping them to build their confidence to live more independently. One also described how care workers are helping them to improve their cooking skills. Some people are involved in work, either paid or voluntary, and a local scheme is due to restart shortly whereby people will be offered a range of work related opportunities. People have some responsibilities in the home to keep their rooms and communal areas clean and tidy. Some are able to do this independently and others need assistance from care workers.

People get on well with each other and choose, at times, to spend time together. On the day of the inspection some people had gone out on a trip to a local castle which they enjoyed.

Care records are comprehensive. They set out people's goals and there is a detailed assessment of the level of their support needs. Most of the daily entries reflect the person centred nature of the support, but we have asked the provider to ensure all of the entries are person centred and objective. Care workers find the records helpful and they have time to read them.

People are wholly positive about the support they receive at Milford House. One described the staff as "*great*" and another said "*I'd be lost without them*", adding how easy the staff are to talk to, and how they have time for them. Other professionals involved in people's care corroborated this, telling us "*They (the staff) have been fantastic. They accomplished in days what I have been trying to do for months.... They are a great team*". Another professional told us "*Staff are very good....a real strength is the knowledge staff have of the residents*".

There is an understanding of the importance of good nutrition. Meals are made using fresh ingredients with little reliance on processed food. People have responsibilities for meal preparation and some enjoy and appreciate the help they have to do this. Care workers understand the impact some psychotropic medication has on people's weight and appetite and therefore actively discourage people from eating unhealthy food.

Environment

People live in a home which is suitable for their needs. All of the bedrooms are single rooms but none have en-suite facilities. There is a comfortable lounge and a large dining room. A separate smaller lounge is also available for people to use.

The home is clean and there are no malodours, but parts of the building would benefit from some redecoration and refurbishment. Some of the windows are rotting; there is rust on some of the fittings and the flooring in one of the bathrooms does not reach the toilet which means it is difficult for care workers to maintain good hygiene and infection prevention and control. People living and working in the home are responsible for keeping it clean and tidy.

There is outside space which is safe and secure. A summer house has a dart board and pool table for people to use and there are plans to develop the gardens further.

The kitchen has been awarded the maximum rating of five by the Food Standards Agency. It is clean and well equipped.

Leadership and Management

There are some robust and effective arrangements in place to monitor quality. The RI carries out regular visits and meets with people living and working in the home. The quality assurance report is detailed but would benefit from being more objective. Feedback should also be current as the quotes in the 2022 report are the same as the ones used in the 2020 report. Much of the 2022 report is the same as the one written in 2020.

Processes to ensure safety are robust. There are certificates to demonstrate gas safety checks; pest control and electrical testing has recently been carried out. Fire safety checks are completed and fire equipment is serviced as required. The fire risk assessment in the file is out of date, but we were told, by the manager, that work has been done to the fire system and more up-to-date records are available.

Workers are appointed following a safe recruitment process. Staff files are easy to navigate and contain the information necessary. The manager maintains an up-to-date record of staff DBS checks. References are not held in the files but there is a clear record to evidence they have been received and checked.

Training is a priority for the service and care workers consider they have had the training they need to enable them to safely and effectively carry out their duties. One care worker would value more training in caring for people with mental illness. Care workers are not asked to do anything they do not feel confident or skilled to do. Visiting professionals also consider care workers to be skilled, describing them as “*fantastic*” and having the right values.

Supervision is carried out and some care workers say they get balanced feedback on their work. Records confirm this with supervision records containing sections for “what is working well”; “what needs improvement” and “biggest challenge”.

Some care workers say staffing levels are an issue. Some workers are leaving and others are working long hours. Efforts are being made to recruit new staff but the provider needs to ensure care workers are not working excessive hours. Duty rotas indicated staffing levels have, in the main, been maintained.

Most care workers feel valued by their colleagues and describe the team as good, but some do not always find the management to be approachable. They are, however, mostly confident of having a helpful and timely response to ideas or concerns about people receiving care and support. Some care workers do not feel able to raise issues in team meetings and do not always feel listened to. Others, however, describe the management as responsive and approachable. Morale among care workers is mixed, with one describing their working environment as “*terrible... It has got worse... Never been like this*”. Another said there is no opportunity to discuss issues and they feel the management do not listen. A

different care worker though, told us the management had “*put things in place to make my life easier*”. The atmosphere in the service was calm and appeared to be well organised.

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

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