



Inspection Report on

Rostley Care Home

**29 Castle Pill Crescent
Steynton
Milford Haven
SA73 1HD**

Date Inspection Completed

13/06/2022

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About Rostley Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Celtic Residential Care Ltd.
Registered places	14
Language of the service	English
Previous Care Inspectorate Wales inspection	17 June 2019
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 are enthusiastic about the care and support they receive, and one said *“The staff are wonderful, so friendly and they always check in on me”*. Care workers are guided by up-to-date person centred plans and have a good understanding of people’s needs. Interactions are warm and friendly, a care worker told us *“The residents tell us, that it doesn’t feel like a care home but more like a family, they have a laugh and seem so happy”*. Representatives of people value the service, one told us *“I have found Rostley to be superb so far, the staff are very friendly, and mum speaks highly of them and she is particularly fond of the home cooked food”*.

The environment is being fully refurbished, the new layout supports interactions and the new décor is bright and fresh. People who live and work in the service value the manager and have trust and confidence in them. The Registered Individual (RI) and a senior director are accessible to all and focus on developing the quality of the service.

Well-being

People speak positively about the care and support they receive. Up to date personalised plans guide staff and inform care workers about what is important to people. The manager involves health and social care professionals to help people remain as healthy as possible.

People are respected as individuals, and interactions with the staff team are supportive and relaxed. People live in a service that does not provide an 'Active Offer' of the Welsh language.

People get the right care and support, from well trained and familiar care workers. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People know how to make a complaint if needed and have confidence in the manager and RI.

The environment is being renovated and is bright and welcoming; there are many different communal areas to enable people to socialise and interact. Individual rooms are personalised by the person with photographs and their own furniture. When fully completed the grounds and gardens will be accessible for people to do things they enjoy.

Governance processes focus on developing the service by using information from internal audits and this is recorded in the six-monthly Quality of Care Review. The RI talks to people and staff about improving the quality of the service during their regular visits. However, this feedback needs to be recorded in more detail in Regulation 73 visit reports.

Care and Support

People are positive about the care and support they receive, a person told us *“It’s like home from home here, it’s brilliant, we’re like a family”*. Representatives of people value the service and one said, *“They take really good care of her and we feel she’s in safe hands there, plus the continuity of staff is so good for her”*. Enthusiastic care workers are passionate about their roles and told us *“I get a buzz when I come into work, I love it”*. Interactions between staff and people are warm and friendly. Prior to admission the manager assesses a wide range of information from the person, their representatives and external professionals. The service has clear plans for how it provides care and support to individuals. The manager regularly assesses people’s needs and reviews plans so they remain relevant. Daily notes record the care tasks completed and would benefit from detailed information from the perspective of the individual. There is good evidence of health and social care professionals being involved with people documented.

People keep their own medication, securely in their rooms and it is accurately administered by care workers, in line with the services policies and procedures. All care documentation is stored appropriately and securely.

During the COVID-19 restrictions care workers supported people to remain in contact with family and friends using phone and video calls. People enjoy different social activities together such as music, games and everyone was looking forward to the Jubilee tea party they have been planning. The manager has purchased new interactive technology to enhance current activities, that will benefit people who live with memory challenges.

Sufficient staffing levels are in place to meet the needs of the people living at the service. Care workers have a very good understanding of individual needs and preferences and ensure they spend time with people.

The provider has policies and procedures to manage the risk of infection. There are good hygiene practices throughout, staff wear the correct PPE and follow the latest Public Health Wales guidance.

Environment

The manager ensures the service supports people in line with their needs. The provider is completing a full refurbishment of the service, with the majority of communal areas and bedrooms have been re-decorated. The grounds are being re-designed and when finished will improve people's access to the garden and patio area. A care worker told us *"The new environment is absolutely lovely, the open plan makes it better for the residents and really helps us with activities"*. People decorate their rooms with photographs and furniture as they wish, an individual proudly showed us photographs of their family and friends that they have on display.

Maintenance issues are resolved promptly. Regular Health and Safety audits of the property are completed and actions from external inspections are resolved promptly. The service is compliant with fire regulations and testing of all fire safety equipment is up to date.

People are involved in meal planning, there is a rolling menu, and they can make alternative choices if they wish. Meal times are tailored to suit each individual and can be quiet or social. Individual dietary needs and preferences are catered for, and a person told us *"The food is fantastic and there's plenty of it"*. When discussing meals, a representative said *"she is always well fed, it seems very good and always home cooked"*.

Additional COVID-19 measures are in place. There are sanitation stations throughout the service and a strict testing procedure for all visitors.

Leadership and Management

People involved in the service describe a very friendly and supportive culture. The RI is accessible and knows people and staff well. Care workers are positive about the support from the RI and one told us *“[RI] Is easy going and there are no worries if you need to talk to them”*. Arrangements are in place for monitoring and improving the service, through the six-monthly Quality of Care Review. The RI visits every month to talk with people who live and work at the service but does not complete Regulation 73 reports with enough detail after they have these conversations. We will check the RI includes this feedback in their reports during the next inspection.

Staff are very positive about the leadership at the service, care workers told us *“[manager and director] are very helpful if you need anything; they always at the end of the phone for support”* and *“it makes a big difference when you have such good support”*. The manager has a hands-on approach, and people have built up positive relationships with them. People told us *“[manager] is amazing, I can open my heart up to her”* and *“[manager] is great and so easy to talk to”*. Family members have trust and confidence in the manager and told us *“I find [manager] very approachable and she clearly cares for the residents”* and *“[manager] does a fantastic job; she has her finger on the pulse”*.

Policies and procedures are up to date, and staff have a sufficient understanding of them. Care workers demonstrate a good understanding around safeguarding and their responsibilities to report concerns. Care workers receive regular effective one to one supervision sessions, appraisal and staff meetings are productive. A care worker told us *“Talking about our monthly training topics in team meetings is reassuring, this month was pressure damage and it was helpful to discuss it all together”*

Pre-employment checks take place before new employees start work. These include reference checks, right to work and Disclosure and Barring (DBS) checks. Effective induction and ongoing training ensure staff have the right skills and knowledge to meet people’s needs. A care worker told us *“I did my induction and got a good idea about people when I read the care plans, I’m also being supported with my career development”*.

The manager ensures adequate numbers of experienced care staff work on shift to meet people’s needs. Care workers have built good relationships with people and understand their individual needs.

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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