



Inspection Report on

Avenue Road Nursing Home

**Avenue Road Nursing Home
28 Avenue Road
Abergavenny
NP7 7DB**

Date Inspection Completed

13/07/2023

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About Avenue Road Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	BIRA CARE HOMES LTD
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	09 March 2023
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

We carried out a focussed visit to the service to consider the priority action notice (PAN) for activity provision set at our last inspection. We found people are now able to participate in regular activities. An activity worker is providing group and one to one activity sessions five days a week and maintaining necessary records.

Generally, people living at the service are comfortable and settled. We saw mixed interactions from staff towards residents. Staff have attended awareness training to develop their skills in delivering care and support to people. The recording of individuals care and support continues to be unreliable and could pose unnecessary risks to them. In the next few months, the service provider is to introduce an electronic record keeping system to provide a greater overview of individuals care and support. This will need time to embed and sustain. We will consider people's care documents in more detail at our next inspection.

Well-being

People are not always treated with dignity and respect. During our visit, we saw mixed interactions between staff and residents. In one instance we saw staff were kind and considerate using appropriate touch to reassure a person when distressed. Whilst in another, staff ignored a person calling out for assistance. Task orientated support was given to individuals with little or no engagement from the staff member and we heard a person being treated in an undignified manner.

People's healthcare needs are inadequately monitored because staff are not reliably recording individuals care and support. This information is essential to ensure people living at the service receive consistent care and support. We saw people's hydration recordings are not fully completed which could place already compromised individuals at risk. The service provider is introducing an electronic recording system which will allow better oversight of individuals care and support although this will take time to embed.

People are not always safeguarded as they could be at risk from inconsistent care and support. Staff are trained to report concerns in line with safeguarding protocols. The manager reports incidents to the relevant agencies. We found people's healthcare monitoring needs to be more reliable to ensure they are protected at all times.

Opportunities for people to participate regularly in activities has increased. At our last visit to the service people told us there was little going on at Avenue Road. During this inspection, we saw regular activities taking place with dedicated group morning sessions and individual afternoon sessions. We sat in on a group activity and found individuals engaged and enjoying the quiz and bowling. Activity records could be more detailed to show which individuals are offered the opportunity to join in with activities and if they attend whether or not they liked the experience.

Care and Support

People's health needs are being reviewed without sufficient and reliable information being available. If there is a specific need, a person's food/ fluid intake is monitored on a daily basis to ensure they are consuming sufficient food and fluids. We looked at one person's chart which had not been fully completed to include a daily total of their intake for over a month. We consulted the person's eating/ drinking care plan which did not specify how much they should drink each day. The person's last care plan review could not have considered the daily amounts consumed as recordings were minimal. The organisation has identified the need for staff recordings of people's care and support to be improved. We asked for assurances that other people whose food/ fluids are being monitored are consuming sufficient daily amounts. This is an area for improvement, and we expect the provider to take the necessary action to ensure individuals food/ fluids intake is sufficiently monitored.

The service provider is to introduce an electronic care document system at the service in August 2023. It is envisaged that the new system will enable greater oversight of people's care and support by including up to date monitoring of individuals care needs. The service will maintain people's paper care records until staff are trained and the service provider is satisfied the system is working appropriately. We will consider people's care and support records in greater detail at our next inspection.

Managers are looking at ways to develop staff's skills and competence having recognised shortfalls in people's care delivery. We reported our observations of interactions between staff and residents during our visit. Training is planned to improve staff practices in relation to care delivery. Care staff have recently attended dignity and respect training.

People's health monitoring needs improvement to ensure they are safe. During our inspection, we found an individual was at risk from dehydration and asked for assurance other people whose fluids are being monitored are safe. Individual measures have been put in place to ensure the person is safeguarded and we expect processes are reviewed to ensure everyone is protected. Following our inspection, the manager introduced a daily monitoring chart staff which will keep staff updated of individuals needs.

Environment

We visited the service to carry out a focussed inspection which did not fully consider the environment. At the last inspection people told us there were areas of the service which were cold including some resident's bedrooms. We are assured a plumber has addressed the situation. In addition, storage of activity supplies has been moved and they are now accessible to all staff. We noted a strong odour in the downstairs of the property. The manager told us the carpets are earmarked for cleaning. The handy person has a planned maintenance schedule in place.

Leadership and Management

Systems are in place to support the running of the service. The manager is registered with Social Care Wales and is experienced having worked at the service for a number of years. They are supported by a clinical lead who is responsible for people's care and support. The manager conducts regular audits which monitor the operation of the service. There has been some improvement in staff morale.

Some measures have been put in place to improve the oversight of the service although they have not been fully implemented. The Responsible Individual (RI) has continued to conduct visits to the service in accordance with the regulations. During our visit we did not see any signs of people having to wait unnecessarily for care and support. Although the call bell system is not working reliably. Staff have been recruited to replace members of the staff team who have left the service. Bank staff are employed to cover sickness, holidays, and last-minute absences. A new call bell system is to be introduced at the service once the new electronic system is up and running which will show how efficiently people are supported with their care and support. Staff awareness sessions in basic care and support have commenced. The manager has started an action plan to address shortfalls identified at this inspection. In view of the introduction of the new electronic document system we propose to evaluate the service's systems at our next inspection.

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
21	People are not receiving regular and meaningful activities to support their well-being.	Achieved

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
59	The service provider must ensure records relating to individuals health and wellbeing are accurate and up to date.	New
16	We viewed 3 people's personal plans and found they were routinely reviewed without any consultation with the resident and or their representative.	Reviewed
66	The RI is responsible for overseeing management of the service and providing assurance it is safe, well run and complies with Regulations.	Reviewed

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