



Inspection Report on

Treetops Residential Care Home

**Treetops Care Home
Llangeinor Road Brynmenyn
Bridgend
CF32 9LY**

Date Inspection Completed

21/03/2024

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About Treetops Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Treetops Care Home Ltd
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	21.3.2023
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

Care and support at Treetops Care Home is provided according to an agreed personal plan which is regularly kept under review. Care workers have a good understanding of people's individual needs and choices. Care records provide a sense of the individual, reflect their current care needs as they involve the person and/or their representative. This includes people living with dementia, and the right care and support is provided for individuals to achieve good outcomes. People's health monitoring is good, with referrals to health professionals as required. People can choose to be involved in a range of activities. They are also very happy with the meals served at the home.

Care workers are happy working at the service and feel supported and valued. Policies and procedures are regularly reviewed and aligned with current statutory guidance. Care workers are recruited in line with regulation and have access to an on-going programme of development and support. The Responsible Individual (RI) has good oversight of service provision and regularly reviews the quality of care provided. The environment is suitable for people's needs with sufficient space and appropriate equipment. People like the homely presentation and feel comfortable in their surroundings.

Well-being

People are treated with dignity and respect. We saw positive interactions between people and care workers throughout the inspection. We could see people and care workers have a genuine good rapport and care workers are familiar with people's needs and the best ways of providing care and support. Consistently positive feedback from people and their representatives regarding the quality of care provided supported our observations.

People live in an environment which supports their well-being. The environment is well-maintained, homely and comfortable. An ongoing programme of maintenance and repair ensures the environment remains safe. People can personalise their bedrooms to their individual preferences and there are communal areas which can be accessed for socialising with others or relaxing.

People are listened to and have influence over the care they receive. People can choose where and how to spend their day. People are provided with a choice of food options and meals can be eaten in the dining room, lounge, or people's own rooms as they choose. Visiting arrangements for family and friends are flexible. The management team and RI gather regular feedback to ensure the care provided meets expectations.

People are protected from harm and abuse. There are policies and procedures in place underpinning safe practice. Care workers are trained to meet the needs of the people they support and can spot the signs of abuse, neglect, poor health, and act accordingly. Care workers we spoke to said they feel confident raising any issues with the management. There is a safe recruitment process and staff are supported within their roles. Staffing rota's show sufficient care workers are available to provide the right level of care and support.

Confidentiality is maintained throughout the home. People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry and are asked to record their visits in the visitor's book when entering and leaving. Care records are stored safely and are only available to authorised personnel.

Care and Support

People benefit from a good standard of care and support. Detailed individualised personal plans support care workers to meet people's needs. Pre-admission assessments ensure the service is able to meet people's needs prior to moving in. Personal plans contain key information on people's physical and emotional needs. Details of social history, interests, preferred activities and food preferences help in understanding how people like to be supported. There is a four weekly rolling menu in place, which encourages people to eat a varied and healthy diet. People's weights and skin are routinely checked. Staff are competent in identifying issues, reporting these, ensuring external health professionals are involved when required. A visiting health professional told us they have no concerns "*whatsoever*" and "*it's a really good home*".

People experience warmth and kindness. We saw care staff treat people as individuals. They are very attentive and respond to people's different needs with appropriate levels of prompting and support. Treetops Care Home employ a dedicated activity coordinator who arranges a variety of events and activities which people are free to attend if they wish. We were told "*There's plenty going on*" and "*It's very enjoyable*". People look relaxed and comfortable in the presence of staff. Staff speak in a friendly, caring and respectful way and people respond positively. People living in the home told us "*It's excellent here, they are very caring*" and "*I'm pretty happy with most things*". When asked about the manager we were told "*she's lovely*". We witnessed positive interactions during the inspection and saw care staff supporting people in a dignified manner. A visitor told us they are all lovely and "*It's outstanding here*".

There are safe systems in place for the management of medication to maintain people's health. Medication is stored securely in locked cupboards/trolleys within the locked medication room. We saw that medication administration record (MAR) charts are completed accurately. A record is kept of the temperature and is monitored to ensure safe storage of medication. We saw people are supported to attend routine medical appointments which are documented in their care files. Medical assistance is sought promptly if any issues arise with people's health.

There are consistent and appropriate staffing levels in place to meet the care and support needs of people living at the service. There are sufficient staffing levels for each shift, with some staff having worked at the service for a significant period. Care workers respond quickly to any requests of help. The staff are supportive of each other and complimentary of the support the management provide. When talking about the manager a relative said "*she is very pleasant*".

Environment

People live in a home that meets their needs. The accommodation is homely, comfortable and benefits from sufficient quality decor and furnishings. We observed the environment to be mostly free of clutter throughout the home. We saw people sitting in the lounge on the ground floor and sitting in the comfort of their bedrooms which are personalised to their tastes. The home is set over two floors and has a stair lift so people with poor mobility can access the upper floor. The Food Standards Agency has awarded the kitchen a score of 4, this suggests good standards of hygiene.

Entry to the service is safe and documents are stored securely. Visiting professionals are requested to sign into a visitors' book on arrival, ensuring people's safety is maintained. Information is stored securely in locked cupboards and care documentation is treated sensitively ensuring people's privacy is upheld.

Communal areas and emergency exits are uncluttered and free from hazards. Substances harmful to health (COSHH) are stored safely. Emergency alarms are accessible for people to use and are responded to in a timely manner. The service is clean with no malodours.

The service has systems in place that ensure the home and its facilities are safe. We looked at a range of documentation relating to health and safety and the maintenance of the service. The information provides a detailed overview of a rolling programme of safety checks, servicing and maintenance of the home's equipment and facilities. Effective and efficient fire procedures, testing and training are in place to protect people. Records confirmed fire alarm tests take place weekly. We saw window restrictors are in place.

Leadership and Management

People living at the home can be assured staff are recruited via a safe process. We looked at a number of personnel files which contain all of the required information, such as references, Disclosure and Barring Service checks and work history. New staff members have to complete a structured induction and get to shadow experienced members of the team in order to familiarise themselves with the service and people living there.

People can access information to help them understand the care, support and opportunities available to them. The statement of purpose and Information leaflet accurately describe the current arrangements in place regarding the service's accommodation, referral and admission process, the type of care and support available and ways in which it is working towards providing a Welsh language service. The statement of purpose also includes details of the service's supervision and training arrangements for care staff.

Care workers receive training to meet the needs of the people they support. The service is compliant with its core training requirements. New care workers receive an induction in line with Social Care Wales's requirements. There are robust up to date company policies and procedures in safeguarding, whistleblowing, infection control and medication. Regular staff meetings take place. Staff we spoke with told us *"It's lovely to work here"* and *"I feel settled and at home here, this is my second family"*.

Care workers enjoy working at the service and feel supported in their roles. Records relating to supervision show staff are receiving the required levels of formal support. This helps aid their professional development and gives them the opportunity to discuss things like workload or concerns they may have. Care workers we spoke to confirm the management team are always accessible and provide a good level of support. Care workers told us *"The manager is very supportive"*, *"nothing is too much trouble"* and *"she is lovely"*.

There are systems and processes in place to monitor, review and improve the quality of care and support provided. We saw evidence the manager and RI have good oversight of the service. We looked at documentation, which confirmed formal quarterly visits take place. On a six-monthly basis, the RI produces a quality-of-care report. The service also offers various formal and informal opportunities for people and their representatives, to ask questions and give feedback. We found the communication is effective, open and transparent. We found notifications to Care Inspectorate Wales, Local Authority and Health professionals are timely and consistent.

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
57	The provider is not ensuring issues identified by Fire Service and internal H&S audits are actioned	Achieved

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Date Published 10/04/2024