

# Inspection Report on

**Orchard House Residential Care Home** 

Orchard House Residential Home 3-7 Colcot Road Barry CF62 8HJ

**Date Inspection Completed** 

19/01/2024



## **About Orchard House Residential Care Home**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Northcote Developments Ltd
Registered places	40
Language of the service	English
Previous Care Inspectorate Wales inspection	28 October 2022
Does this service promote Welsh language and culture?	The 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**

Orchard House can accommodate 40 people with residential and personal care needs. This inspection was unannounced. There is an appointed manager in place who is in the process of registration with Social Care Wales the Workforce Regulator, in accordance with legal requirements. Hugh Gibson is the responsible individual (RI) for the service. People receive care and support from a friendly staff team. There are sufficient staff to provide care, with suitable arrangements in place to cover any staffing shortfalls. People receive a good range of activities with social and recreational support in accordance with people's interests.

People are consulted about the care and support they receive. The manager and RI are visible and engaged in the day-to-day running of the service. Systems are in place to ensure the quality of care and support is provided to a good standard. Care documentation reflects the care and health needs of people living at the home but we identified some areas for improvement. Staff receive general mandatory training with additional training carried out in specific areas.

People live in an environment which is extremely homely and suitable for their needs. We identified some areas would benefit from refurbishment but discussed the schedule of works currently in place throughout the home. The home environment is secure. Infection prevention and control processes are in place to reduce the risk of infectious diseases being spread throughout the home.

### Well-being

People feel safe and protected from harm. The entrance to the home is secure. Arrangements for fire safety and general maintenance are in place. The home is clean and pleasant throughout and suitable for the needs of the people. The manager ensures it is a safe place for people to live, work and visit. People can move freely in accordance with their abilities and assessed risks. There are two floors to the home accessible via a passenger lift with a separate annex in the grounds.

People are happy living at Orchard House. Care staff respond promptly to individual needs, and we saw people happy and well-presented. People can move freely in accordance with their ability and level of risk throughout various communal areas of the home and pleasant gardens. People told us they enjoy spending time outside in the warmer weather and there are several areas throughout the home to spend quiet time alone or with visitors. A good variety of social activities and pastimes are available for people to enjoy which include one-to-one activities, visiting singers, armchair aerobics and various arts and crafts.

People have a good choice of meals and drinks to suit their nutritional needs and preferences. We saw some people enjoying the meals provided and observed the mealtime experience to be a social time for people to enjoy. The service has a hygiene rating of five (very good) with the Food Standard's Agency. We spoke to people who were complimentary about the choice and quality of food. We discussed where the breakfast arrangements could be improved to enable better outcomes for people.

Measures are in place to promote good standards of practice throughout the home, with infection prevention and control measures in place and in line with Public Health Guidance. Management shows oversight of incidents, accidents, complaints, and safeguarding matters. A statement of purpose is present which is up to date and reflective of the home.

Management oversee the training and supervision needs of staff. Team meetings are due to take place and we advised that minutes be taken of each staff meeting. There is a robust recruitment process in place. The RI demonstrates appropriate oversight of the service to ensure it operates safely and in accordance with its statement of purpose.

People are safe and receive appropriate care and support and staff demonstrate a friendly approach. During our visit, we saw staff interacting kindly and people told us they had good relationships with care staff that were respectful. Documentation to support the delivery of care and support people require has greatly improved but with some areas further discussed. People are encouraged to have visitors to the home and people we spoke with told us "These girls are fabulous to me", "I am so well looked after, nothing is too much trouble for them to do for me".

#### **Care and Support**

People appeared comfortable and relaxed with the care staff who provide their support. Systems are in place to protect people who use the service. We saw people's body language and expressions indicated they felt safe and secure around the care staff who support them. Care staff are visible, and we found there to be appropriate oversight of staffing arrangements. Care staff know the people they support well and some staff told us they had worked at the home for many years. We saw care staff interact with residents in a friendly and respectful manner. We saw activities taking place throughout the home and sufficient staff to enable one-to-one meaningful interactions. During our visit we spoke with individuals who told us staff are kind and friendly and always helpful. We saw care staff are readily available, attentive and recognise people's needs. The daily visits of two dogs give a warm homely feel and plenty of laughter throughout the visit.

People's mealtime experience was observed as a social and pleasant time for people to enjoy. We observed the dining area during lunch time and saw people enjoying the meal provided, sitting and chatting with others around the dining tables whilst others who preferred to, remained in their rooms or in quieter areas of the home. The home has been awarded a rating of '5' (very good) by the Food Standards Agency. We discussed how the breakfast experience for people could be improved to ensure people had choice and at a time they preferred. We were reassured by the management team that the matter would be addressed immediately.

People have access to health and other services to maintain their ongoing health and well-being. Information within people's care files evidenced referrals and contact with various health professionals. We saw these referrals were made in a timely manner and whenever people's needs changed. We saw people looked healthy and receive the care and support to meet their personal outcomes. Although personal plans reflected people's current needs we highlighted areas where further improvement could be made to ensure any changes are robustly captured.

Measures are in place for safeguarding residents. Entry to the home is secure and a log of visitors to the home is maintained. A safeguarding policy is present. The home has liaised appropriately with the Local Authority regarding incidents and notifies Care Inspectorate Wales (CIW), where appropriate. The service promotes hygienic practices and manages risk of infection, such as cleaning schedules. The service has an infection control policy and procedures in place. Discussions with care staff confirmed they are aware of the infection control procedures, and we saw them wearing appropriate personal protective equipment (PPE) when needed.

#### **Environment**

People have a sense of belonging. The home offers several small communal areas for people to sit and enjoy with others or spend time alone. Bedrooms are personalised with items of people's choice and personal belongings. There is a large open dining area with good access and egress for people with mobility needs. There is a large conservatory area and garden area which gives the home a pleasant feel and where people can enjoy spending time in the warmer weather. People are cared for in a clean and homely environment. However, we observed some areas required attention. The RI told us of the schedule of works planned to be carried out, which include refurbishment of bathrooms throughout and the entrance to the home which required attention. We saw improvement from the previous visit and saw new carpets throughout the home, redecoration, painting throughout various areas and new blinds.

People are safe, the home is secure and visitors must ring to gain entry. The home offers suitable accommodation for people. Management oversees the home's health and safety requirements. From our walk-around we noted window openings that may pose a risk to residents are secure. There is a fire risk assessment and care staff have training in fire safety and manual handling with all current training up to date or future dates arranged. Environmental audits to ensure areas are clean and safe are carried out daily/weekly.

The service provider identifies and mitigates any risks to health and safety. We considered various records relating to health and safety, which evidenced the provider maintained effective oversight to ensure the environment was safe. The home has a visitor book in accordance with fire safety arrangements and visitor identity checks are undertaken. We saw all safety checks in relation to gas installation, electricity and safety records were satisfactory and up to date. All confidential files including care and staff files were stored securely.

People can be confident that there are effective arrangements at the home that will protect public safety and minimise cross infection. There is oversight to ensure staff follow the correct infection guidance.

#### **Leadership and Management**

People can be assured that staff are safely recruited and we saw staff training carried out for the roles they undertake. We looked at staff recruitment files and saw they contained all the pre-employment checks required in respect of any person working in regulated services. Staff receive formal one-to-one supervision in accordance with regulatory requirements. However, we noted several supervisions were overdue, the manager told us they were scheduled to be carried out over the next few days. Supervision provides each staff member with opportunities to discuss their performance, development and/or any concerns they may have. We were told that staff training was up to date, which included safeguarding of vulnerable adults, infection control and manual handling. We saw staff training being undertaken during our visit.

People can be confident management monitors the quality of the service they receive. Systems and processes mostly help promote the smooth running of the home; however, we identified where some improvements are required. Management oversees incidents, accidents, and complaints. The home carries out internal audits to monitor standards and practice. We looked at some key policies and saw they are up to date and reviewed. Policies and procedures are accessible to staff and provide guidance and information to support them in their roles.

We spoke with staff during our visits who told us, "Management are really supportive", "I enjoy my job and have worked here many years", "It is very homely here and we work as a team". Daily handovers ensure pertinent information is shared between staff at shift handover. Staff meetings take place on an ad hoc basis, but minutes were not taken. We advised all future meetings be documented to ensure any issues raised by care staff are resolved appropriately. The manager is visible and described by staff as "very supportive" and "helpful and caring". The RI visits the service as required and is also at the home daily. We viewed the latest quality assurance monitoring report dated January 2024 which contained all the required information. We saw from the report that some areas we highlighted as requiring improvement throughout our visit had been previously noted by the RI. The manager has assured us that they are taking action to address these areas. We were told the appointed manager in place remains working towards registration with Social Care Wales the workforce regulator. This will be followed up at the next inspection visit.

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
56	This is because people cannot be confident that there is effective arrangements at the home that will protect public safety and minimise cross contamination. There is a lack of oversight to ensure staff follow the infection control guidance.	Achieved
58	The service provider has failed to ensure that arrangements are in place to ensure that medicines are stored and administered carefully.	Achieved
15	The service provider has not ensured that there is a personal plan of care which contains all the required information.	Achieved

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