



## Inspection Report on

**Pembroke Care Ltd trading as Hollyland Lodge**

**Pembroke Care Ltd  
Hollylane Lodge Care Home  
Holyland Road  
Pembroke  
SA71 4BL**

**Date Inspection Completed**

26/01/2023

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## About Pembroke Care Ltd trading as Hollyland Lodge

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pembroke Care Ltd
Registered places	14
Language of the service	English
Previous Care Inspectorate Wales inspection	4 October 2021
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

People are very happy with the care and support they receive, one person told us “*This place is fantastic and these lot (pointed at the care workers) are wonderful*”. Care workers are guided by accurate and up-to-date plans. Interactions between people are positive and friendly. Experienced care workers have built up longstanding relationships with people and they know each other well.

The environment is homely and welcoming, people move around the communal spaces as they wish. The grounds are accessible and well used by people and their visitors.

Representatives of people who live at the home are positive about the service and one told us “*I’m absolutely over the moon with the home and my mind is at rest because she is so happy*”. People, their family members and staff value the managers of the service and have confidence in them. The Registered Individual (RI) is supportive of the service and the staff but does not record this in sufficient detail in reports.

## Well-being

People receive person centered support and are involved in decisions. The manager involves health and social care professionals to help people remain as healthy as possible. Up-to-date personal plans focus on things that matter. Staff encourage socialisation and interactions in communal areas and people enjoy accessing their local community. Individuals are respected and interactions with the staff team are positive and friendly. When discussing the service, a family member said *“I’m absolutely over the moon with the home and my mind is at rest because she is so happy”*. People live in a service that does not provide an 'Active Offer' of the Welsh language.

People are protected from harm as recruitment and training ensures people get the right care and support, from skilled and knowledgeable care workers. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People and their representatives know how to make a complaint if needed and have confidence in the manager.

People live in a service that supports their well-being. The environment is comfortable and there are different communal areas for people to use to do things that make them feel happy. Individual rooms are personalised and homely. The gardens are accessible for people to do things they enjoy and help them remain healthy.

Governance processes focus on developing the service by using information from audits. The RI talks to people and staff about improving the quality of the service but does not always consult with their representatives. This feedback needs to be recorded in more detail in Regulation 73 visit reports and the six-monthly Quality of Care Review.

## Care and Support

People are happy with the personalised care and support they receive. We witnessed many warm and friendly interactions. A person who lives in the service told us *“The staff are fantastic and really renewed my faith in humanity”*. Representatives of people are positive about the service, one described the staff as *“excellent, they are so friendly and kind to my mother, she is so happy there”*. A care worker told us *“I really enjoy my job, it’s nice having a laugh and a joke with people or helping them to feel better”*. The manager assesses a range of information from the person, their representatives and professionals. The provider has accurate plans for how it provides care and support to individuals. Senior staff regularly review plans with people, so they remain relevant but need to record this in more detail. Daily notes record the care and support completed but would be improved if they contained feedback about the day from the perspective of the individual.

There is good, documented evidence of health and social care professionals being involved with people. However, records do not always evidence that prescribed creams are administered correctly, the manager will address this and we will check these records at the next inspection.

People enjoy a variety of activities in the service, grounds and local community such as going to the hairdressers, shopping and visiting friends. A person who lives at the service helps to maintain the gardens and told us *“the grounds are lovely and I enjoy helping [staff member] to keep them nice”*. A family member spoke about the positive relationships between her mother and the staff and said *“they do the little things that make a difference, they just know her so well”*

There are sufficient staffing levels in place to meet the needs of the people living at the service. Staff have adequate time to spend with people and have a very good understanding of individual needs and preferences.

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

## Environment

The manager of the service ensures the environment supports people in line with their needs. People can use the different communal areas to socialise or to have quiet time in smaller groups or alone. People appear comfortable and relaxed throughout the service. Individual rooms are personalised by the person as they choose. Individual photographs of people with a point of interest about themselves are hung in a communal area, which is an effective conversation starter.

Maintenance issues are resolved promptly and all staff are committed to keeping the building clean and fresh. A person who lives at the service said *“the staff are fantastic, they’ve done a great job making it look nice”*. Accessible grounds are well used and people grow fruit and vegetables which they eat. The provider has recently replaced the majority of the flooring and has an ongoing decoration programme.

Regular Health and Safety audits of the property are completed. The service is compliant with Fire Regulations and testing of fire safety equipment is up to date. Personal Evacuation Plans are individualised and available in emergencies.

The kitchen has a food hygiene rating of five. People enjoy dining together or choose to eat in smaller groups in the second dining room. People make daily choices from the menu and alternatives are available. A person who lives at the service told us *“lunch was fantastic but the food is always good here”*.

## Leadership and Management

The RI visits the service to complete statutory Regulation 73 visits and phones staff on a regular basis to ensure they are well supported. A care worker told us *“[RI] is a good man, we can phone him at any time. He asks how we are when he visits or phones, he has made lots of calls recently”*. Arrangements are in place for monitoring, reviewing and improving the quality of the service. The RI talks to people and staff but needs to consult with representatives when he visits. This feedback should be recorded in more detail in the RI’s quarterly visit reports. The six-monthly Quality of Care Review uses information from surveys and quality audits and would benefit from identifying actions needed to improve the service.

The staff are positive about the leadership at the service, a care worker told us *“[Manager and Deputy] are brilliant and I can always go to them for any problems, personal or work related”*. The manager is supportive of the people who live and work at the service and shares their time between care and administration duties. People and their representatives talk to the manager and know how to raise concerns. A representative said *“I have raised concerns with the manager and they were all resolved quickly”*.

Up-to-date policies and procedures support good practice and staff have a sufficient understanding of them. Care workers told us line managers are accessible and supportive, they can request one-to-one discussions at any time and ask for guidance or additional training if needed. However, this is only formally recorded in supervision meetings every six months, the manager told us they will ensure this will be done every quarter and we will check this in the next inspection. Care workers told us they receive annual appraisals and records corroborate this. Staff demonstrate a good understanding around safeguarding. All workers follow appropriate infection, prevention and control measures. Care workers receive mandatory training and can request additional development programmes. A family member spoke positively about the leadership and said *“the manager is really easy to talk to and will say if mum needs anything”*.

Pre-employment checks take place before new employees start work. These include reference checks, photographic evidence, right to work and Disclosure and Barring (DBS) checks. The staff induction programme links to individual learning outcomes and the ‘All Wales Induction Framework for Health and Social Care.’ All staff are registered with Social Care Wales.

Adequate numbers of experienced care staff work on shift to meet people’s needs. All staff have built good relationships with people and understand their individual circumstances.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
73	The provider is non compliant with Reg 73	Achieved
80	The provider is not compliant with Regulation 80	Achieved
36	Care workers were not receiving formal supervision at least once in every three months.	Achieved
35	Only one staff file contained photographic identification.	Achieved
36	Training was not up to date	Achieved

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