



Inspection Report on

The Haven

**The Haven
2a
High Street
Llanelli
SA15 2RE**

Date Inspection Completed

14 June 2022

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About The Haven

| | |
|--|---|
| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | TL Care Homes Limited Liability Partnership |
| Registered places | 28 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | |
| Does this service provide the Welsh Language active offer? | No. The service does not currently provide an 'Active Offer' of the Welsh language. |

Summary

The Haven is divided into two separate areas, one residential and the other for people living with dementia. People can choose where to spend their time, be it in their own rooms or with others in communal areas. When visiting was reduced during the pandemic, people used online video calls to maintain contact with family members.

Care workers treat people with dignity and respect and say they feel well supported by senior staff. They attend training relevant to their roles and say it helps them to support people appropriately. The Responsible Individual (RI), manager and deputy make themselves available for people, relatives, and staff members as much as possible. They review all aspects of the service provided, including how the staff team monitors daily care and support. Good communication channels are evident throughout the home, with prompt referrals to healthcare professionals where necessary.

Well-being

Care workers listen to people and their relatives' opinions about the care and support they provide. Senior staff members obtain information from relatives when people are admitted. This means care plans contain a great deal of important information, including the person's personal preferences and life story, and identify others who are important to them. The manager gives people a copy of the service user guide when they arrive; this provides details of the complaints process should they need to use it. Relatives told us they were confident to raise anything they wanted to discuss with the manager.

There is good sharing of communication within the team and senior staff make prompt referrals to healthcare professionals when necessary. Care workers are aware of the importance of each person's well-being and regularly talk to people and/or their representatives to review any changes to their support needs.

As there have been restrictions on activities and trips out during the pandemic, care workers adapted their support to meet Public Health Wales guidelines, with indoor, individualised activities arranged throughout the period. This means people still do the things that make them happy. The staff team also ensure they chat with people and regularly contact their relatives when they wish. One relative told us, *"It's been a struggle over the past two years, but the home has always kept in touch."*

The home does not currently provide the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. However, some people in the home speak Welsh and some staff members are Welsh speakers.

As far as possible, people are safe and protected from abuse. Care workers have been through the provider's rigorous recruitment process. All care workers receive support, guidance, and training and can access policies and procedures to understand their responsibility to protect vulnerable people.

The provider considers a range of information to ensure they can meet people's needs before admission to the home. This includes obtaining information from external healthcare professionals such as social workers, previous placements, and hospital discharge documents. From this, senior staff develop care records that describe people's support arrangements and requirements. Each person's needs are recorded on care plans: these documents describe how the staff team are to enable people to live as independently as they can.

People receive support as described in their care plans. We saw risk assessments and reviews, monitoring charts for skin integrity and weight loss, and reports from external healthcare professionals. Senior staff regularly review care records, more frequently where support needs change so they remain up to date.

People say the staff team support them well. Relatives told us, "*They've always been good as gold with mum, and us. She is getting the best care she can get.*" People say they like the food on offer and may choose alternatives if they do not like what is available. Care workers encourage people to make choices and decisions about how they spend their time.

People say they feel safe. Care workers have regular safeguarding training updates and are aware of current best practices. They told us senior staff members support them well and are always available for advice if necessary. The home has detailed policies and procedures to manage the risk of infection. There are clear hygiene practices throughout the home and care workers may refer to infection management policies when necessary. All measures are in constant use to ensure people are safe from Covid-19 infections, including the monitoring and testing of all visitors to the home and regular use of personal protective equipment (PPE) by all care workers.

Environment

The Haven is warm and clean, and people say they feel comfortable and happy. Bedrooms are personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos, and items of furniture. Facilities and equipment promote each person's independence as much as possible. The RI and manager agree the home's décor needs updating, as it looks a little dull. The RI tells us this is in hand for the near future.

The environment is safe. Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002, and there are clear instructions displayed in the home on what to do in the event of a fire.

People are safe from unauthorised visitors entering the building, as all visitors are asked to record their visits in the visitor's book when entering and leaving. Care records are securely stored and only available to care workers who are authorised to view them. Employee personnel records and Deprivation of Liberty Safeguards (DoLS) records are securely stored in a locked office.

Overall, the provider has a clear vision of the support it provides, and a positive regard to each person receiving support. The manager has developed a positive culture in the home and is well-supported by the RI.

The manager has regular contact with peoples' family members and professionals involved in their care. People and relatives know how to make a complaint if they need to and are confident the provider would listen to them if they did. Staff meetings give care workers the opportunity to discuss their work and to keep up to date with developments in the service. Employees may discuss any issues they wish to raise in three-monthly confidential supervision meetings and annual appraisals of their work.

People and staff members told us the RI visits the home and talks to them, as is his responsibility to monitor the support people receive, to improve people's lives. However, the RI cannot make available his quarterly reports due to technical issues. We discussed this and the RI will ensure copies are printed and retained in the home from the next visit onwards. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. The staff team ensure they protect all private and personal information. The home's safeguarding policy and procedure is in line with current legislation and local safeguarding procedures. Care records clearly state any risks to people's well-being, and detailed risk management plans help to keep people safe and as independent as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach the manager or RI but would contact external agencies such as the local safeguarding office if they thought they needed to.

The provider ensures there are knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work: these include reference checks and Disclosure and Barring Service (DBS) checks. The provider's twelve-week staff induction programme links to individual learning outcomes and the 'All Wales Induction Framework for Health and Social Care.' Care workers undertake training relevant to the people they support - they say this provides them with a good understanding of their roles and responsibilities and the best ways to support people.

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 |
|------------|--|--------|
| 74 | The Responsible Individual is unable to make available his quarterly regulation 73 reports at the moment due to technical issues with his laptop. We discussed this and the RI will ensure copies are printed and retained in the home from the next visit | New |

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| | onwards. | |
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Date Published 29/06/2022