

Inspection Report on

Elm Lodge

Elm Lodge The Parade Carmarthen SA31 1LZ

Date Inspection Completed

26/09/2023

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About Elm Lodge

Type of care provided	Care Home Service
De sistere d Drevider	Adults Without Nursing
Registered Provider	Integra Community Living Options Limited
Registered places	7
Language of the service	English
Previous Care Inspectorate Wales inspection	20 May 2022
Does this service promote Welsh language and culture?	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

People are happy with the care and support they receive from care staff that are knowledgeable and engaging. Opportunities are provided for people to make choices and decisions and their independence is promoted.

The service is well led by the manager and care staff value the support and guidance provided by senior staff. Staff receive suitable training and supervision to enable them to undertake their role effectively. The Responsible Individual (RI) has thorough oversight of the service and has effective systems in place to monitor the quality of care provided.

The environment is homely and comfortable and meets the needs of the individuals. The atmosphere in the home is calm and relaxed.

Well-being

People's rights are upheld. Their voices are heard and they have control over their day to day lives as much as possible because they are involved in developing and reviewing their personal plans and setting goals. Care staff support them to do what matters to them, including regaining their independence and having an active role in the community. There is a focus on developing social and daily living skills to promote independence and reduce the risk of social isolation when people leave the service.

Care staff are respectful of individual circumstances and needs and encourage people to do what they can for themselves, building their self-esteem and confidence. One person said *"All staff have their own sparks of brilliance.... they tell me I can do it and then I believe it".*

People are supported to maintain and build on relationships with family and friends. They are also supported to attend activities and groups of their choice in the local community. During our visit we saw people making plans with care staff to go out shopping in the local area and to meet with health professionals, whilst others chose to spend time relaxing in their room and communal areas.

The service works collaboratively with external agencies and professionals to promote people's physical and mental well-being. Care staff know people well and recognise changes in behaviour that may indicate a relapse in their health. Additional specialist support and advice is sought in a timely manner. Risk assessments enable people to take positive steps towards independent living and regular reviews keep them as safe as possible in line with their care and treatment plans.

Care and Support

Person centred care is provided by staff that are respectful and engaging. Care staff know people well and have developed positive and trusting relationships with them. Key workers allocate one to one time providing an opportunity for people to talk, plan their goals and outcomes or just to relax. A staff member told us, *"I used to think I had to be doing something but now I know that sitting chatting and listening to people is an important part of supporting them, they have started opening up to me".*

There are opportunities for people to engage in a range of activities both at the service and in the local community. This includes communal meals/eating out, local walks, car boot sales, shopping, cinema trips, volunteering and attending local support groups. People told us they are happy where they live and one person said, *"I can read again here, it's calm"*. 'Your voice counts' meetings provide people with an opportunity to suggest and discuss what they would like to happen.

Up to date personal plans inform care staff on how people would like to receive care and support. Thorough initial assessments and discussions with health professionals ensure new people moving in are compatible with those already living at Elm Lodge. A transition plan is created with ongoing assessment to ensure the care and environment supports their rehabilitation. People are encouraged to be involved in their personal plans and to set realistic and achievable goals that are meaningful to them. The manager is focusing on this area to ensure staff effectively support and encourage people to set goals in line with their Care and Treatment plans.

People receive support to apply for services to promote their future independence, such as housing and one staff member told us, "*They become very independent before they move on but they know we're still here and we can still help*".

Recruitment has been challenging but additional staff have now commenced and there are sufficient levels of staff to support people.

Environment

The service is homely and welcoming. The building is well maintained and there are ongoing repairs and decoration. Systems are in place to ensure improvements are identified and acted upon according to the level of risk. A facilities team visits regularly to ensure risks to health and safety are identified and mitigated in a timely manner.

Regular Health and Safety audits of the property and its contents are completed to ensure people working, living and visiting the home are kept safe. We saw up to date service certificates for gas, electricity and water testing. The testing of fire safety equipment is also up-to-date and fire drills are undertaken regularly. Personal Emergency Evacuation Plans are in place for everyone living at the service.

People receive a 'welcome pack' in their room when they move in, this includes some basic supplies such as toiletries. Each bedroom is personalised with items of their choice and they are encouraged and supported to keep their rooms and communal areas clean.

There is an outside area that is used during the warmer weather which incorporates a smoking shelter, a barbeque, and a planting area. A part time gardener is employed to further develop the outside area with people and a greenhouse is planned for growing more produce. A fitness punch bag has also been erected outside at the request of people living at the service.

People are encouraged and supported to shop and cook for themselves and have designated space in the kitchen cupboards and fridges for storing their food items.

The location of the service promotes achievement of people's independence and outcomes. Shops and services are easily accessed and most are within walking distance. Public transport is also easily accessed.

Leadership and Management

The RI and area manager have good oversight of the service and visit regularly to monitor performance and to gather evidence which goes into the Quality of Care report. This includes meeting with people living and working at the service, undertaking audits and providing surveys for people to complete. The report is detailed and clearly evidences the areas that are working well and areas that require further development.

The Manager is involved in the day to day running of the service and is described by staff as very supportive and approachable. One staff member told us, *"(the manager) recently supported me with personal issues, I cannot thank them enough*", another said, *"It's a nice team, we get on well*". Care staff feel valued and are passionate about the work they do. All staff receive regular one to one supervision and an annual appraisal. This provides an opportunity for staff to reflect on their practice, discuss any concerns and identify areas for training and development. Staff are able to approach the manager on an ad-hoc basis if they have anything they need to discuss. During the inspection we saw that the manager has an open door policy for staff and people living at the service with people calling to the office throughout the day.

Staff recruitment has been challenging and this has been recognised nationwide however the service is now fully staffed and there are bank staff to cover sickness/holidays. Personnel files are robust with the necessary checks and references undertaken prior to staff commencing. These include Disclosure and Barring Service (DBS) and Identity checks. References and a full employment history is also obtained and any gaps in employment are thoroughly explored.

Care staff receive mandatory training and specific training according to the needs of those they support, this includes diabetes training as one person has recently been newly diagnosed with the condition.New staff receive a thorough induction and support to undertake their role. Managers support staff to complete the 'All Wales Induction Framework for Health and Social Care' and register with Social Care Wales.

Key policies are updated and reviewed regularly and hold relevant information. Care staff are aware of the policies and procedures to follow if they believe a person is at risk of harm and are confident to report any such concerns through the correct channels.

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

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