



Inspection Report on

Aberpennar

**Aberpennar Court Care Home
Windsor Road
Mountain Ash
CF45 3BH**

Date Inspection Completed

13/12/2023

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About Aberpennar

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	HC One Limited
Registered places	47
Language of the service	English
Previous Care Inspectorate Wales inspection	15 July 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 told us they feel looked after at Aberpennar. Care staff interact with people, and their visitors, in a warm and friendly way. Personal plans are detailed, and identify care and support needs, and risks to safety. These are reviewed regularly and updated with relevant information. Wellbeing Co-ordinators work at the home every day, arranging a variety of crafts and projects, as well as organising musical acts for people to enjoy.

There is a relief manager in place after the previous manager recently left their post. Staff are safely recruited and appropriately vetted, and we saw training and supervision are up to date. The home appears clean and well maintained. A couple of pieces of equipment requires repair and this is being followed up by management. There are robust quality assurance processes in place, and the manager is receiving support from other service provider managers whilst changes are being implemented in the home.

Well-being

People have opportunities and are supported to make choices about their day to day care. People are encouraged to leave their rooms and be supported by care staff into communal areas for activities and interaction with others. Care staff and wellbeing coordinators told us they were passionate about bringing people together and them having fun. There are options for all meals, which people can see before they choose which to have. There is a 'Resident of the Day' system, which enables people to have a detailed review of their care needs, their environment, and their food preferences every month. Visitors told us communication is good and they are confident to talk to care staff about any issues. There is a formal complaints process in place should it be needed, and complaints are responded to within set time limits.

Time and resources are given to activities and events to promote people's interactions, stimulation, and engagement. There are wellbeing coordinators who work at the home every day, creating lots of opportunities within the service, but also organising plenty of outside entertainers to come into the home. The home also utilises community networks and were having a local school choir come to the home to sing carols.

Care staff, nurses, and management in the home support people to be as healthy as they can be. We spoke to visiting Nurse Assessors who gave us positive feedback on their experiences of the care being given. We saw referrals to external health professionals and advice included in care plans and risk assessments. Medication is stored safely, is administered as prescribed and recorded correctly. Management complete medication audits and respond to any issues that arise.

There are staff members in Aberpennar who speak Welsh and would converse in Welsh with people if they wanted. At present, no one receiving care and support have reported a preference for their service to be delivered in Welsh.

Care and Support

People and their visitors gave positive feedback about the care and support they receive from care workers and wellbeing coordinators in the home. They told us: *“The communication with family is very good, they keep us very involved,” “This is an unbelievable place. I was so ill when I came here and this place completely saved me,” “The staff are good and the food is very good.”*

We saw communication adaptations such as light writers for people who were non-verbal or who need assistance to make their opinions known.

The home is due to transfer from paper care documentation to an electronic care management system in the new year. All care files are being reviewed as part of this change to ensure that only up to date and relevant information is being transferred across. We sampled some care files and found all personal plans and risk assessments to contain required information and people’s preferences for how their care is delivered. Supplementary charts such as food and fluid charts and repositioning records are complete and up to date. Skin care is being delivered, and there is no one in the home with any pressure damage to their skin at present. Reviews are completed monthly as part of a ‘resident of the day’ process, and we saw they contain meaningful consideration of any relevant events that may have occurred since the last review. We observed care staff to follow care plans, and management are reminding staff of person centred care in staff meetings and supervisions.

There are sufficient infection control measures in place. We observed personal protective equipment (PPE) being used appropriately for close contact care. Teams of domestic and laundry staff are employed, and we found the home to be clean and tidy. Processes are followed for safe and effective disposal of clinical waste.

Environment

People live in an environment which enhances their wellbeing and helps them to achieve their personal outcomes. The home is set over two floors, with stairs and lift access for those with mobility difficulties. It is decorated with a homely feel, and people's rooms are personalised with their belongings. There is a conservatory area for activities and entertainers, and a pleasant and accessible outside space that can be used in the good weather.

The home is maintained to a good standard and any issues are responded to by management in a timely manner. On the day we visited, we found some essential housekeeping equipment to be out of order, however staff reported this was being followed up by management and efforts were being made to get them fixed. A maintenance worker is employed to complete regular monitoring checks and small repair or replacement jobs. External contractors are also employed to complete servicing and maintenance of facilities and utilities, such as mobility aids and hoists, the lift, and the fire system. People have personal evacuation plans in place, which detail the support they would require to evacuate in an emergency. Areas containing confidential information, or substances that may be hazardous to health, such as the medication room and laundry, are not accessible to people living in the home. Health and safety, and maintenance of the environment is included in robust quality assurance processes outlined by the provider.

Leadership and Management

Staff enjoy working at the service and gave mostly positive feedback about their roles and the people they support. They told us: *“The care and support we give here is good,” “we want to get people up and doing things,” “We know the changes will be fair, but we are worried about them. We need to have clear talks about what is changing, why and when.”* There is currently a relief manager in post whilst a new permanent manager is being recruited, to provide some stability to the staff team in a period of transition. Work is being done on how staff communicate with each other to promote transparent and clear interactions. Care staff are dedicated to the people in the home and are quick to provide additional support to the team if needed.

People are supported by staff who are safely recruited and vetted prior to starting in their roles. We sampled a selection of staff personnel files and found they contained all the required recruitment information and vetting checks. All staff members are currently working in the home with an up-to-date Disclosure and Barring (DBS) check. Staff training is completed via a mix of e-learning and face to face training courses. Staff compliance with training is monitored as part of quality assurance. One to one supervision sessions are held between staff members and their line managers on a regular basis, enabling any issues or questions to be addressed. Management are also holding consultations with staff regarding changes that are being brought into the home.

There are robust quality assurance processes in place, identifying strengths and weaknesses in the care being provided, and implementing action plans for things that require improvement. Management completes a variety of regular audits, such as medication, care documentation and dining experience. The Responsible Individual visits regularly and completes monitoring reports that focus on progress and future actions. The six monthly quality of care report analyses events in the home and considers feedback from people living in the home, visitors, and staff members.

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
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