



Inspection Report on

Rogerstone House

Newport

Date Inspection Completed

03/05/2022
03 May 2022

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About Rogerstone House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Achieve together Ltd
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Rogerstone House is a care home for adults, which is able to accommodate up to six people. The manager oversees the day-to-day running of this home, along with another small home in the same area. A deputy manager supports the running of Rogerstone House. The home is well run and has a team of dedicated care staff who are supported to carry out their duties by the management team. Care staff describe the management team as supportive and approachable.

People and their representatives are happy with the support they receive. Detailed personal plans are under regular review and clearly inform the care staff of how best to support each person in the areas relevant to them.

The home is clean, tidy and well organised. Infection prevention and control procedures are maintained to minimise the risk of spread of infection.

Overall, care staff are safely recruited but we saw some gaps in the records of those who had been employed for some time.

The Responsible Individual (RI) has overall responsibility for the service. They have good oversight of the running of the home; they visit regularly and produce detailed, robust reports on what is being done well and what improvements are being worked towards.

Well-being

The service promotes individual's rights and encourages them to have choice and control over their everyday lives as much as possible. People and their representatives told us that they are happy with the care and support they receive. People have autonomy over their own lives and care staff know their likes and dislikes. Care workers understand the importance of getting to know people as individuals and encourage them to engage in activities which are beneficial to them.

Individuals receive the support they need to maintain their health and wellbeing. The service assesses people's care and support needs and any associated risks. These are clearly documented in personal plans, which are regularly reviewed. Individuals are supported to access medical and specialist services, as required. Care workers recognise when people need emotional support and provide this with kindness and compassion.

People are encouraged and supported to maintain meaningful relationships with those closest to them. Individuals have their own rooms, which are personalised to their own tastes. People have pictures, music equipment and TVs in their rooms, which gives a homely feel to their surroundings. The management and care staff team have worked creatively together to provide a homely, safe, low stimulus environment.

The service helps to protect people from abuse and neglect. Care staff complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the Wales Safeguarding Procedures and is kept under regular review. People are encouraged to share their views about the service they receive.

Care and Support

People receive the support they require, as and when they need it. Individual's files contain all the required information including risk assessments and personal plans of care. The plans are person-centred and give clear detail to staff on how best to support each individual. Personal plans are kept under regular review and updated as required. However, the views of individuals or their representatives must be evidenced for these reviews. We saw care staff interacting positively with people throughout our inspection visit. Care staff support people with genuine warmth, compassion and dignity.

Referrals are made to external health and social professionals as and when required. People are registered with a local general practitioner (GP). Records are kept of previous appointments with health and social care professionals for reference as required. Detailed daily notes for each person evidence that care staff are providing care and support in line with people's personal plans. Record keeping is accurate and consistent in all areas required to support people to maintain their health.

Key workers are allocated to each person, who are the main point of contact within the care staff team. Key workers know people well and efforts are made to find the most suitable member of care staff for each person. We saw detailed reports which reflect a comprehensive review of people's goals and how they are progressing towards achieving these.

Systems are in place for the safe management of medication within the service. We saw that medication is stored safely and care staff complete medication records accurately.

Infection prevention and control procedures are good. Care staff wear appropriate personal protective equipment (PPE) and wash their hands regularly. Temperatures of care staff and residents are taken daily and regular COVID-19 testing is carried out on staff. We were asked for evidence of a negative lateral flow test result before we entered the property.

Environment

The home is clean, free from clutter and spacious. The layout provides sufficient space to meet people's needs to spend time privately or communally. The communal bathroom and wet room are well sized for the number of people living at the home. The environment is homely, safe, low stimulus and well maintained. A large painting of the current people living at the home has pride of place in the entrance hall. People's bedrooms are decorated to their own tastes and contain personal items.

People and their representatives told us they enjoy living at the home, they find the environment homely, and it meets their needs. The rear garden is well maintained with a level patio and area laid to lawn. There is a woodworking shed in the rear garden, sturdy garden furniture and raised beds which people have been supported to plant variety of bedding plants and produce. The gates to either side of the property are kept locked to provide security.

The home has a five-star rating from the Food Standards Agency which means that hygiene standards are very good.

People benefit from a secure environment; the front door is kept locked. We viewed the maintenance file and saw that all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency. Increased cleaning is taking place due to the COVID-19 pandemic.

Leadership and Management

People benefit from effective leadership and management. The service's statement of purpose accurately reflects the service provided. The manager is supported by a deputy manager with the day-to-day running of the home. Care staff feel valued and supported in their roles. We were told that the management team are very approachable and always there to help or advise care staff when required. Communication between the team is good and care staff enjoy their jobs. Throughout our visit, we saw there was a sufficient number of care staff on duty to support people.

The RI has undertaken regular quality assurance checks by visiting the home to talk to individuals and care staff and review documents. The RI completes detailed and thorough audits of the quality of the support provided as well as the wider running of the home. The reports highlight where the home is performing well and areas for improvement. We spoke to the RI about some additional requirements for these reports which they assured us they would address.

The provider makes necessary referrals to external agencies as required and keeps the regulator notified of relevant matters in a timely manner.

We saw that care staff personnel files are well organised; however, do not all contain the required information. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. We will follow this up at our next inspection. Care staff are confident and skilled in their roles. They complete a range of training courses, including regular refresher courses in important areas such as safeguarding people at risk of harm. The availability of face-to-face training has been impacted by the pandemic; however, we saw plans for all training to be bought up to date over the coming months.

Care staff receive regular supervision with their line manager. This one-to-one support provides opportunity for staff members to discuss any concerns or training needs they may have and for their line manager to provide feedback on their work performance.

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
35	Ensure that all required information is held in staff personnel files	New

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