



# Inspection Report on

**Fern Bungalow Care Home**

**Ferndale**

## **Date Inspection Completed**

31/01/2024

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## About Fern Bungalow Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	PROSPER CARE & SUPPORT LIMITED
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	2 <sup>nd</sup> February 2023
Does this service promote Welsh language and culture?	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

Fern Bungalow offers positive person-centred care and support to people living at the service. Personal plans are sufficiently detailed and regularly reviewed. Medication is administered and recorded effectively. People receive care from a small and stable team of staff, who are familiar with their care and communication needs. Opportunities to undertake a range of activities and hobbies means people can do things that matter to them. The service strives to maintain positive relationships with relatives and various professionals.

The environment is well maintained and suited to the people supported in the service. A range of policies and procedures promote safe practices. Recruitment checks are robust, and supervision is offered routinely. A wide range of ongoing training is available to ensure staff remain sufficiently skilled. Care staff are happy working for the service and feel supported and valued. Both the Responsible Individual (RI) and manager maintain good oversight over the service.

## Well-being

The service supports choice and control. People and their relatives are consulted in the development of plans and completion of reviews. Staff tell us they understand each individual's preferred daily routines and offer flexible support in line with people's wishes. Care staff are familiar with each person's method of communication to encourage choice and decision making. We found activities are focused on individual interests and meals are tailored towards personal preferences. Records indicate people are able to choose how often they speak with and visit family members. Bedrooms are decorated to reflect individual tastes and interests. The RI gathers feedback from people, staff, and relatives to ensure care is provided in a way people like.

Systems are in place to ensure people receive the right care and support. The service liaises with health professionals and manages routine health appointments. Good medication management ensures people remain as healthy as they can be. Care staff ensure dietary needs are understood and followed. Personal plans hold detailed information about people's needs and reviews ensure these remain up to date and current. Risk assessments help staff understand how to support people to remain safe. The care provided on the day of inspection appeared warm, attentive and of a good quality. Sufficient staffing levels are in place to provide timely support and care is provided in line with personal plans.

People feel safe and are protected from harm. Care staff understand their safeguarding responsibilities and their role in protecting people. Staff feel well supported and are confident in reporting any issues or concerns. Ongoing training ensures staff are sufficiently skilled to carry out their duties. A range of policies are in place to support good practice. The character and suitability of staff is checked to ensure they have the necessary skills and approach to care.

People are supported in a safe and well-maintained environment. Access to the property is restricted to authorised individuals. Appropriate security checks and fire safety measures make sure people remain as safe as possible. An ongoing programme of maintenance and repairs ensures the environment remains at a safe standard.

The service does not currently provide a Welsh active offer. The statement of purpose and written guide are not available in the Welsh language. There are a number of staff who are able to speak basic Welsh.

## Care and Support

Plans are detailed and person centred. We viewed a sample of personal plans and found these reflected individual care needs, personal history, preferences, and interests. Supporting documents provide staff with strategies on how to manage any risks or behaviours that may challenge. Tools such as daily monitoring charts and regular reviews are used to track changes in people's health and emotional needs. Professional recommendations are added to plans and followed by staff. Daily care notes we viewed evidence people receive support as described in their plans. Staff tell us they have the opportunity to read plans before providing direct care, so they understand how best to support each person.

Systems are in place to support the safe management of medication. A sample of medication charts we viewed show people receive their medication as prescribed. PRN (as required) medication records show their reason for use and any outcomes. We found medication is safely stored in a locked cabinet. The completion of daily room temperature checks ensures medication remains effective. The overall management of medication is supported by regular staff training opportunities, a range of policies, and regular auditing tools.

Positive care practices within the service support people's overall well-being. During our inspection, we found care being provided by a small consistent team of staff. We were unable to speak directly to people living at the service however we were able to observe care staff provide encouragement, emotional support, and practical assistance. We found a relaxed friendly atmosphere in the service and people appeared comfortable and content. Relatives we spoke with told us – *"X is so happy, so settled"*, *"All the staff are so good"*, *"X enjoys living there"* and *"Staff are helpful and supportive."*

People have things to look forward to. The service understands the importance of regular contact with family members and supports this through weekend visits, regular telephone contact or flexible access to the service. Adequate staffing levels ensure people have the opportunity to participate in regular social activities either individually or within a group. Personal plans outline peoples preferred activities and daily notes we viewed show people access these preferences on a regular basis. Staff tell us activities are arranged flexibly and take into account peoples fluctuating health and emotional wellbeing. One relative told us *"X is out most days."*

## Environment

The service provides a pleasant, comfortable, and homely environment. Bedrooms are decorated to a good standard and communal areas appear warm, well presented, and clean. We saw people have access to furniture, equipment and materials that are appropriate for their needs. Communal areas are generous in size and accessible to support people's mobility. Kitchen facilities can be easily accessed to support independence. There is a well-maintained garden enclosing the building which is utilised in the warmer months.

People are cared for in a safe environment. The service is secure from any unauthorised visitors. Substances hazardous to health are stored safely and storage areas are locked. Gas and electricity safety testing is up to date. The service completes fire drills and testing of fire safety equipment. People have Personal Emergency Evacuation Plans (PEEP) in place, which guides staff on how people should be evacuated in the event of an emergency or a fire. We viewed maintenance files and saw all serviceable equipment has been checked to ensure its safety.

Infection control measures and confidential storage of documentation is well managed. We found all personal and confidential information stored securely. Peoples' personal care records are only available to care staff and healthcare professionals authorised to view them. There is a sufficient supply of personal protective equipment (PPE) within the service. Staff are trained in infection control and hand hygiene and there are up to date policies and procedures in place to support good infection control practices.

## Leadership and Management

People are supported by staff who receive regular supervision and training. The supervision matrix we viewed evidence staff receive regular one to one supervision. These sessions focus on professional development, current issues, and any changes to the service. Newly appointed staff have access to a robust period of induction training, followed by ongoing refresher training to support continued good practice. The training matrix shows opportunities for staff to undertake core and specialist training. Staff tell us they receive sufficient good quality training and are confident they have the right skills and knowledge to assist people.

Recruitment practices are safe, and staff feel supported in their roles. We found recruitment files in good order, containing the necessary information to ensure staff are of good character and hold the necessary skills. Staff tell us they enjoy working for the service and feel able to approach the management team, who they describe as “*amazing*”. Other comments include “*This is the loveliest home I have worked in*”, “*it’s the nicest place I have worked*” and “*I’m really happy working for the service*”. Observations on the day evidenced staff work well as a team and appear supportive of one another. This was confirmed by the staff members we spoke with who commented “*We all support each other*” and “*it’s a lovely team.*”

There are good governance and quality monitoring arrangements in place. Staff attend team meetings to share information and update on any changes to policies or practice. Staffing rotas show there are sufficient care staff to provide the right level of care and support to people, and staff tell us rotas are well managed. RI three monthly visits and six monthly quality of care reviews are completed to consider the quality of support provided. Staff tell us the manager and RI are very visible within the service and have a good understanding of what is happening on a day-to-day basis. Relatives tell us they find staff and management helpful and responsive, comments include “*Communication (with the service) is very good*”. A range of policies and procedures are available to staff to support the day to day running of the service. Internal audits are used to ensure practices remain safe and of a good standard. The service keeps a record of incidents, accidents and any action taken.

### 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
35	The service provider does not complete robust recruitment checks.	Achieved
36	Staff do not complete the required training to undertake their roles.	Achieved
60	The service provider does not ensure the regulator is notified of changes to the environment.	Achieved

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