



Inspection Report on

Greenhill

**Greenhill Care Home
Beaufort Street
Crickhowell
NP8 1AG**

Date Inspection Completed

24/10/2023

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About Greenhill

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Shaw healthcare (Cambria) Limited
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	First inspection since re-registration of the service to reflect new provider name.
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People tell us they are happy with the care and support they receive at Greenhill. Care staff are kind and respectful. They show a genuine interest in getting to know people so they can support them to do things which are important to them. The activities programme is varied, and people are supported to pursue their own interests both in the service and the local community. People and their family/representative have opportunities to contribute to the day to day running of the home.

People are involved in planning and reviewing their care and support needs. Personal plans are detailed so care staff know how people want to be supported. Care staff are recruited, trained, and supported well so they have the knowledge and skills needed to meet peoples care needs.

The responsible individual has good oversight of the service. Reports are produced following regular audits of the service and show what is working well and what needs improving. People feel the management listen to them and are responsive to issues raised with them.

Well-being

People have choice and control over their day-to-day life. They choose when they get up and when they go to bed and where they spend their time during the day. They are offered food choices and can decide if they want to join in activities on offer to them. People are involved in planning and reviewing their care and support needs. They have opportunities to attend regular resident meetings so they can contribute ideas and give their views on the service. Information about what they can expect from the service is available in the Statement of Purpose and guide to the service. Both documents are available in Welsh for people who want it.

People are supported to manage their physical and emotional well-being. Relationships with family members and active involvement in the community is encouraged to promote people's well-being. Care staff ask people what is important to them and try to tailor activities to suit individual preferences. Group activities help to encourage social interaction and support friendships to develop. Care staff contact health and social care professionals promptly when needed. Care plans and risk assessments are detailed for staff to follow to make sure the needs of people are met.

People are protected from abuse and neglect. Care staff are appropriately recruited, trained, and supported to make sure people are kept as safe as possible. They are aware of the process to follow if they are concerned about a person's well-being. Risk assessments are clear for them to follow showing measures to be taken to keep people safe. Policies and procedures are in place to guide staff.

People live in accommodation which suits their needs. Bedrooms are personalised. Signage is in Welsh and English to help people find their way around the home. There is a system in place to make sure all relevant maintenance checks are in place and equipment is in good working order.

Care and Support

People tell us they are happy living at Greenhill. Comments include “*it’s a lovely place*” and “*everyone is very nice here*”. We saw visitors welcomed into the service throughout the day. Some people go out with family members, others enjoy visits in the home. Care staff encourage community and family involvement. A knitting club has been set up and advertised in the service and the community to help encourage local people to be involved. There is a wide range of activities available for people to join in. Care staff work hard to get to know people and speak of the importance of supporting people to continue to do things important to them for example knitting, playing the piano and artwork. People are offered choices of food and drinks. Menus are displayed daily. People are offered an alternative if they do not like what is on the menu. Food options are discussed at the resident’s meetings so people can say if there is anything different, they would like.

People are consulted and involved in planning and reviewing their care and support needs. Personal plans are detailed and include comments from people about how they want their needs met. Risk management plans show how an identified risk should be managed. Care staff are confident in using the handheld devices linked to the electronic care planning system. These allow them to see any essential information about people and changes to their needs are shared quickly within the team. Our discussions with care staff show they know what is important to people and try their best to make sure people receive care as they want it.

People are supported to remain as healthy as possible. Health and social care professionals are contacted in a timely way if people’s care and support needs change. Medication is managed well. Care staff have training and their competency to administer medication is assessed regularly. The management carry out regular medication audits so any errors can be identified and rectified quickly.

People are supported to remain as safe as possible. Care staff are aware of their responsibilities to keep people safe. They know how to report any concerns about a person’s well-being. Policies are in place to guide staff in matters relating to safeguarding. They have training to make sure they have the skills and knowledge to meet the needs of people they support.

Environment

People live in accommodation to suit their needs. Bedrooms are personalised with items important to them. They are encouraged to bring in furniture and personal belongings to help them feel settled and comfortable. People we spoke with told us they have all they need in their bedrooms to be comfortable. There is an ongoing programme of refurbishment. New curtains are on order for the corridors. The manager told us of plans in place to make a separate café area for people to enjoy with other people living in the service or their families.

During our visit, the service was clean and tidy. Infection prevention and control measures are in place. Care staff have training on how to use personal protective equipment and policies are in place to guide their practice. Domestic staff told us they have all the cleaning products they need to promote good hygiene. Regular audits of infection prevention and control take place so issues can be identified and rectified quickly.

Systems are in place to ensure health and safety is maintained. Entrance to the home is by authorised personnel only. All visitors are asked to sign in when they arrive and when leaving. This is so the management and care staff know who is in the building at any time. Regular checks of areas including the fire safety equipment are carried out as well as equipment checks to make sure it is safe for people to use. Any issues identified are quickly rectified.

Leadership and Management

The quality assurance system in place makes sure the service continues to improve for people. People are asked their opinions on the service in many ways including resident/relative meetings, questionnaires, personal plan reviews and discussion with the responsible individual (RI) during their regular visits. Management audits of all aspects of the service take place regularly. A report is produced following a six-month review of the quality of care provided. This shows how the service continues to look at ways to improve for the benefit of people living and working there. There is a system in place to manage any complaints made and to analyse outcomes of any safeguarding referrals. This is to ensure lessons are learnt and any changes can be made to improve if necessary.

Care staff are recruited, trained, and receive regular support in their role. Recruitment records show people do not start work until all the required checks are carried out. There is a reliance on agency staff whilst the provider continues to recruit. As far as possible, the same agency staff are used for consistency, so they get to know people and care staff they work with. Permanent staff and agency staff have an induction to their role. Records show and staff tell us they have regular supervision and an annual appraisal of their work. They feel very well supported by the manager, their team, and the wider management team. Comments from care staff include *"I love it here"*, *"good team support and communication"*, *"never worked with staff who really want to help people"*, *"great manager"* and *"it's a pleasure to come to work"*.

The RI has good oversight of the service. This means they can recognise where more support is needed and make the necessary changes to ensure the service continues to improve.

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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Date Published 23/11/2023