



Inspection Report on

St Anne's Nursing Home

**St. Anne's Nursing Home Ltd
Welsh Street
Chepstow
NP16 5LX**

Date Inspection Completed

22/08/2024

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About St Anne's Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	St Annes Nursing Home Ltd
Registered places	45
Language of the service	English
Previous Care Inspectorate Wales inspection	14 March 2023
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 are very happy living at St Annes, they feel safe and well cared for. Visiting family members are made to feel welcome and are very complimentary about the way the home is managed and the support their loved ones receive. The environment is designed to meet people's needs, it is kept clean, well maintained and benefits from a homely feel. The service has separate dedicated areas for nursing provision and residential care.

Personal plans clearly instruct care staff on how best to support each person in the identified areas. Some improvement is required to ensure people are involved in the reviews of their plans. Since our last inspection, the provider has recruited a number of permanent staff which has had a significantly positive impact on the service delivery. Care staff enjoy working at the home and feel well supported by the management team. Recruitment processes are good, but some improvements are required to evidence people have sufficient language skills to support people.

The manager is suitably experienced and is registered with Social Care Wales (SCW), the workforce regulator. The Responsible Individual (RI) is based at the home and has effective oversight of the management of the home.

Well-being

People are supported to be as independent as possible. Where people are unable to keep themselves safe, the necessary procedures are followed. Appropriate arrangements are in place with the Local Authority to ensure decisions are made in people's best interests, when required. People have access to up-to-date information in a way that works for them. The service has an up-to-date statement of purpose which outlines how the service is run, alongside its core values and ethos. The service supports people to remain healthy and active. We saw people enjoying an organised Tai chi session together. People and their relatives are very complimentary about the service provided, one person told us "*The staff are all courteous and respectful. If I need anything I just buzz, and they come to help me straight away.*" A visiting family member told us "*It is marvellous here; the staff bend over backwards to help everyone. They are really on the ball and know exactly what to look out for to keep people well.*"

People are supported to achieve positive outcomes and have control over their day-to-day lives as much as possible. People choose what time they get up in the morning, what time they go to bed, what they do and where they spend their days. Care records include detailed information on each person's background and their life story. This detailed social history, allows care staff to get to know people better and offers reference points for discussion. There is a positive and open culture within the home, people are treated with dignity and respect. Regular meetings are held for residents and their family members to discuss and be involved in decisions relating to the home. Topics include, upcoming events, choices of décor, activities, and entertainers.

People are supported to maintain positive relationships with their loved ones. Visitors are made to feel welcome at the service, and staff encourage people to socialise with other residents within the home. People told us they had made good friendships with others living at the home. The accommodation is maintained to a high standard and supports people to maintain their well-being. People are kept safe from harm. The service has a safeguarding policy which is aligned to current guidance. Care staff are trained in the safeguarding of adults at risk and know what to look out for, and how to report any concerns.

Care and Support

People's care preferences and needs are recorded clearly in their personal plans. The plans evidence what the person can do for themselves in each identified area before informing care staff how best to support them. Plans are reviewed regularly to ensure they reflect any changes as they occur. People or their representatives are not always involved in reviewing their plans. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. Potential risk areas are clearly identified and planned for to keep people well, whilst continuing to promote their independence.

The care staff team are well organised, they receive support and guidance from nurses and the management team. Effective shift handovers ensure staff are well informed of any changes in people's conditions and what they need to monitor to support people's well-being. We observed good care practices throughout the day of our inspection. People receiving support to mobilise around the home or transfer from one place to another were supported with compassion and given constant reassurance. Care staff are skilled at supporting people at times of distress or increased anxiety. Call bells are responded to promptly and sympathetically. People enjoy a sociable meal experience, varying dietary needs are well catered for and staff provide calm encouraging support as required.

Care records are completed to evidence people are being supported as described in their personal plans. Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP) who visits the home every week to review residents who require it. The home has a positive relationship with the GP. All appointment records and outcomes for review are recorded in the care notes. People are encouraged to maintain a healthy weight as part of a healthy lifestyle.

Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance. Systems are in place for the safe management of medication. Care staff support people with their medication, which helps to maintain their health.

Environment

The environment supports people to maintain their well-being and achieve their desired outcomes. The layout of the home, together with the provision of aids and adaptations, helps promote independence. The home is kept clean, light, and well maintained. Colourful murals are painted on the walls in different areas of home, these are both stimulating and help people to orientate themselves. A large artwork of the local Chepstow castle is being completed in the conservatory. People have a choice of where to spend their time, with the conservatory a quieter, calmer space, and the main lounge a more vibrant setting. People's bedrooms are personalised to their own taste, people have family pictures and ornaments in their rooms.

The home is well equipped and spacious. Furniture and fittings are all in good condition. Communal bathrooms and shower rooms contain specialist equipment to support people with mobility needs, as required. The home has a fully equipped hair dressing salon, a local hairdresser visits every week. PPE such as gloves and aprons are situated tidily throughout the home, to support good hygiene practices. Potential environmental risks are assessed, and measures put in place to manage the identified risks. Regular audits are carried out on the environment to ensure safe standards are maintained.

The front door is kept locked, and our identity was checked on entry. Care staff follow procedures to ensure safety is maintained. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms are completed, 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 them to leave the premises safely in the case of an emergency. The home has a rating of five from the food standards agency which means food hygiene standards are very good.

Leadership and Management

People benefit from effective leadership and management at the home. The manager oversees the day-to-day running of the home, supported by the deputy manager. There is a clear structure of responsibility. The management team know the people living at the home well and are supportive of care staff. The RI is based at the home and has effective oversight of the management of the service.

We saw there were enough staff to support people calmly without being rushed in their duties. Since our last inspection the provider has managed to fill most vacancies with a successful recruitment campaign. A significant reduction in the use of agency staff has improved consistency of care for people. Staff told us they enjoy their jobs, feel valued, and well supported by the management team. One care worker told us *“I am really happy here, there is always someone to go to if I have any queries. We have a nice management system and very good communication, so we all know what is going on.”* Another care worker said, *“I like it here very much, I love caring for people, the manager is very approachable and helpful. Teamwork is very good; we all help each other.”* Communication is good within the staff team and with other agencies. We saw care staff following the principles of person-centred care by placing people at the forefront of their care.

Recruitment processes are overall good, the staff files are well organised, and contain information, including Disclosure and Barring Service checks and professional registration with SCW, the workforce regulator. We identified a shortfall in assessing staff's ability to speak English fluently at our last inspection. We did not notice any concerns with staff's linguistic ability during our visit, but there is still insufficient evidence of this being considered during the recruitment process. While no immediate action is required, this remains an area for improvement, and we expect the provider to take action.

Care staff receive one-to-one supervision which provides them with the opportunity to discuss any concerns or training needs they may have and allow their line manager to provide feedback on their work performance. Care staff complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm.

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.

Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
35	The service provider must ensure there is evidence of satisfactory linguistic ability for the purposes of providing care and support on all staff members file.	Not Achieved
16	The service provider must ensure when three monthly personal plan reviews take place the individual and any relative/representative are involved.	Not Achieved
36	The service provider has not ensured all staff working at the service have received a suitable induction relevant to their role.	Achieved

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