



## Inspection Report on

**Stradey Park House**

**61 NEW ROAD  
LLANELLI  
SA15 3DP**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

15/10/2019

**Welsh Government © Crown copyright 2019.**

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: [psi@nationalarchives.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk)*  
*You must reproduce our material accurately and not use it in a misleading context.*

## **Description of the service**

Stradey Park House is situated in the town of Llanelli. The service provider registered with Care Inspectorate Wales (CIW) to provide a care home service for eight people, is Stradey Park Care Homes Ltd. There is a manager in post who is registered with Social care Wales (SCW)

## **Summary of our findings**

### **1. Overall assessment**

People who live at Stradey Park House told us that they are happy with the care and support provided. The home is comfortable and the environment meets the needs of people living there. We observed that care workers know people well and were responsive to their needs. People have opportunities to take part in activities that interest them. Care workers and management demonstrate a commitment to providing a good quality service and they have good care planning and quality assurance systems in place to help them achieve this.

### **2. Improvements**

This was the first inspection of the home under the Regulation and Inspection of Social Care (Wales) Act 2016.

### **3. Requirements and recommendations**

Section five of this report sets out our recommendations to improve the service. These include recommendations in relation to information about the service and maintenance.

# 1. Well-being

## Our findings

Practices and processes in the service support people to be well both physically and emotionally. People using the service indicated being happy with the care and support they received. One person told us “*I love my home*”. We observed they could make choices about day-to-day matters such as how to spend the day and what to eat and drink. We observed that people had opportunities to take part in activities in the home and in the community. The physical layout of the home and people’s own rooms provided them with an environment in which they could be comfortable and pursue their own interests.

We found that staff knew people extremely well and were concerned about their well-being. We observed that people living at the home looked comfortable in their surroundings and in their communication with care workers. In addition, people were supported to maintain relationships with relatives and to have friends and acquaintances in the community. There was documentation in the home that gave an overview of their life history, their likes, dislikes and routines and outlined how people’s care and support was to be provided.

In addition to the care and support provided by care workers at the home, people were supported to access support from a range of external health professionals. We saw evidence that people and their representatives had been involved in the planning and delivery of the service provided at the home. We also examined minutes of the resident’s meetings, these show that on a regular basis, people talked about their experiences at the home and expressed wishes in relation to activities they wished to take part in.

We saw that the care and support people received was monitored and reviewed in a timely way. We observed that people were protected from the risk of abuse or neglect. People who lived at the service knew who to approach if they had any concerns and care workers were familiar with procedures to follow if they became aware of any issues.

In addition to people’s own care documentation, the service provider had policies and procedures in place that further instructed staff as to how the service was to be delivered.

The records we examined, our observations on the day of the inspection and the feedback received from people showed that the care and support was delivered as it should be. We therefore conclude that people receive the care and support they need to stay as healthy as they can be and to do things that make them happy.

## **2. Care and Support**

### **Our findings**

People can be assured that they will get the right care at the right time. Discussions and observations during our inspection showed that care workers had an excellent knowledge of individual's needs and were able to anticipate needs and respond to them. We saw that there was care documentation in place for each person. This consisted of personal plans detailing how people should be supported, risk assessments, a personal profile (containing people's life history, likes and dislikes) and monitoring charts. These described how the care and support should be provided and enabled care workers to record what care had been provided. Our observations on the day of the inspection reflected people's care documentation and what people told us they liked. This included plans in relation to nutritional needs. We saw that these plans were detailed and observed that the meals and drinks provided at the home were in line with the plans. We also noted that records were reviewed on a regular basis. In addition to the care and support delivered by the service provider, we saw that people were referred to appropriate health and social care professionals when their needs changed and to manage ongoing health conditions. In addition, people were supported to attend routine health appointments. Based on the above, we conclude that people receive right care at the right time in the way they want it.

The service provider has mechanisms in place to ensure people are safe and protected from neglect and abuse. Discussions with people who use the service and with staff showed that they knew who to approach if they had any concerns. We observed that the service provider had ensured that where restrictions were placed upon an individual, the relevant agencies were involved and relevant authorisations were in place for example the Deprivation of Liberties Safeguarding (DoLS). In addition, we saw that the service provider had a policy in relation to safeguarding vulnerable adults and that staff had received the relevant training. Overall, people are safe and protected from abuse.

Systems for medicines management are in place. We saw where medication was stored, observed staff administering some medication and examined records. We saw that medication was stored securely and that it was administered to people as per their individual medication plan. The medication administration records we examined were fully completed and indicated that all medications had been administered as prescribed. We noted that the service provider had policies and procedures in place. Furthermore, we saw that staff had received medication training and that

their competency had been assessed. Overall, we concluded that there are safe systems in place for the management of medication to ensure people receive the right medication at the right time

### **3. Environment**

#### **Our findings**

People's well-being is uplifted from having access to a clean, comfortable and personalised living environment. The accommodation was located on two floors. A chair lift gave access to those who needed it to the first floor. People also have access to a pleasant forecourt area at the front of the property when weather permits. The area had seating where plants pots are on display for people to enjoy if they wish. We noted that the furniture, furnishings, artwork, photographs and keepsakes on display in the different parts of the house reflected the needs and interests of the people who lived there. People had access to a number of communal areas in which they could socialise. We also saw that people moved about the home freely during the inspection. The manager informed us and we saw that the smaller lounge nearer the kitchen was mostly used as people liked to see what was going on. The second lounge was at the front of the home and was used less frequently. We were told that this lounge was mainly used for entertaining guests when they visited, holding care reviews with other professionals or for quiet time when people choose. We found that the home had good arrangements in place to ensure all records were stored securely. Based on our findings, we conclude that people's well-being is enhanced by having access to a pleasant environment that is a relaxing place to live in.

The home's environment is safe and secure. Upon arrival at the home, we found the entrance to the home to be locked and our identity was checked before entering the property. We had sight of the home's health and safety records and saw that there was a process in place to ensure safety checks by external contractors are carried out when required. We also saw that the service provider carry out regular checks. These included gas, electrical, fire and water checks. In addition, we saw that people had a personal emergency evacuation plan (PEEP). We carried out a visual inspection of the home and found it to be mostly hazard free. However, we found areas in need of attention, which included the grouting in the shower room, a lock needed replacing on the electric cupboard, the flooring leading to the garage needed repairing and wear and tear to the paintwork in the home. We discussed maintenance requirements with the RI and recommended that an ongoing maintenance programme be implemented to address these areas. We did observe that the tiling in the kitchen was in the process of being replaced. In relation to food hygiene we noted that the Food Standard Agency (FSA) gave the home a five star rating (very good). Based on the above we concluded that overall the service provider identifies and mitigates risks in order to ensure people's safety and security.



## **4. Leadership and Management**

### **Our findings**

People are provided with accurate information about the service. A Statement of Purpose and Service User Guide accurately describes the service provided, states how the service will be provided and states that the arrangements to support the delivery of the services need to be available. We found that the Statement of Purpose contained all necessary information required. We concluded that people are provided with sufficient accurate information about the service to make informed choices.

People can be assured that staff have the necessary knowledge, competency, skills and qualifications and they are supported and developed. Discussions with people, care workers and examination of records showed that there was an established team in place with the majority of members having been in post for several years. There was a sufficient number of care workers on duty at all times. We saw that care workers hold the qualification recommended by Social Care Wales (SCW). Furthermore, we found that the service provider had arrangements in place to ensure that all care workers were supported and developed. They told us that they were supported by the RI, manager, and by colleagues. One team member we spoke with told us that they couldn't wish for a better RI and manager, another that they felt supported and are always kept up to date. The records we examined showed that care workers had received regular supervisions, annual appraisals, attended team meetings and had accessed regular training. We therefore conclude that staff are fully equipped in order for them to make positive contributions to the wellbeing of people using the service.

The home has arrangements for care workers recruitment and induction. We examined three personnel files and found that the relevant checks had been carried out including obtaining criminal disclosure checks, full employment histories and references prior to them starting in their post. We also saw that newly recruited care workers had received a full induction. We concluded that people are as safe as they could be and that the service provider is meeting legal requirements in relation to recruitment and induction.

The service provider has sound arrangements in place for monitoring the quality of care and support provided by the service. The manager described the quality assurance measures in place and provided us with documentary evidence. These included quarterly monitoring visits by the responsible individual and a quality of care review. We noted that these covered all aspects of the

service delivered to include outcomes for people, feedback from people and health and safety matters. The last quality assurance review we saw was dated July 2019. We concluded that people receive a service from a provider committed to provide a good service and who has processes and procedures to ensure that there are regular reviews of the actual care and support delivered at the home.

## **5. Improvements required and recommended following this inspection**

### **5.1 Areas of non compliance from previous inspections**

Not applicable, this was the first inspection of the home under the Regulation and Inspection of Social Care (Wales) Act 2016.

### **5.2 Recommendations for improvement**

- Consider implementing an ongoing maintenance programme.

## 6. How we undertook this inspection

This was a full inspection undertaken as part of our inspection programme. We made an unannounced visit to the home on 15 October 2019 between 9:30 am and 16:45pm.

The following regulations were considered as part of this inspection:

- The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.

The following methods were used:

- We considered the information held by CIW about the service.
- We reviewed the home's Statement of Purpose (SoP) and compared it with the service we observed. The SoP sets out the vision for the service and demonstrates how, particularly through the levels and training of staff, and so on, the service will promote the best possible outcomes for people they care for.
- We undertook tour of the home to consider the internal and external environment.
- Discussions with the manager and care workers.
- We spoke with people living at the home.
- We looked at care documentation for three people.
- We looked at three personnel files.
- We considered staff supervisions, appraisals, induction and training.
- We considered records relating to the home's internal auditing records.
- We considered of the home's policies and procedures.
- We observed care practices and the routines at the home.

Further information about what we do can be found on our website:

[www.careinspectorate.wales](http://www.careinspectorate.wales)

### About the service

Type of care provided	Care Home Service
-----------------------	-------------------

<b>Service Provider</b>	<b>STRADEY PARK CARE HOMES LTD</b>
<b>Manager</b>	<b>Rachel Edwards</b>
<b>Registered maximum number of places</b>	<b>8</b>
<b>Date of previous Care Inspectorate Wales inspection</b>	<b>11/07/2017</b>
<b>Dates of this Inspection visit(s)</b>	<b>15/10/2019</b>
<b>Operating Language of the service</b>	<b>Both</b>
<b>Does this service provide the Welsh Language active offer?</b>	<b>This is a service that 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.</b>
<b>Additional Information:</b>	

**Date Published 19/02/2020**