



# Inspection Report on

**Heol Don Care Home**

**HEOL DON CARE HOME  
HEOL DON  
CARDIFF  
CF14 2AU**

## **Date Inspection Completed**

15/01/2020

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## **Description of the service**

Heol Don Care Home is situated in the residential area of Whitchurch, Cardiff, with good links to local amenities and services. The home provides personal care for people with and without dementia care needs and general nursing care and accommodation for up to 78 people.

Heol Don Care Home is owned and operated by Bupa Care Homes (ANS) Ltd, and has nominated a responsible individual (RI) Sarah Hedges who has overall responsibility of the service. The home has appointed a suitably qualified manager who is registered with Social Care Wales and oversees the day to day running of the home.

## **Summary of our findings**

### **1. Overall assessment**

People are happy with the service they receive, and receive person centred care by staff who understand their needs. People do the things that matter to them and are provided with choice in all aspects of their lives. Management within the home is effective and committed to continually improving the service they provide. Staff are recruited safely, well trained and fully supported to undertake their roles. People are cared for in a modern, warm and welcoming environment that is well maintained and promotes their well-being.

### **2. Improvements**

This was the first inspection since the home re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016. Any improvements will be reflected at the next inspection.

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

Section five of this report sets out our recommendations to improve the service. These include the following:

- Environment.
- Medication practices.
- Care documentation.
- Call bells.
- Staffing.

# 1. Well-being

## Our findings

People can be assured that they are treated with dignity and respect. We saw evidence that people were treated as individuals by staff who had a clear understanding of their needs. We saw staff providing care with dignity, respect and patience. We witnessed a care worker supporting a distressed person, taking time and skill to engage with the person who then became more settled.

We viewed care documentation which was person centred and clearly highlighted personal preferences, likes and dislikes of the person being cared for. We saw that routines within the home were individual, with some people receiving full support while others were supported to be independent with tasks. People were supported to engage in social appropriate to their choices and abilities. We saw that social needs were met by care staff as well as the activity co-ordinator who arranged extensive social activities and events within the home, community and further afield. We saw evidence of an activity rota that was given to all residents for them to be fully informed of activities on offer.

People were cared for in single rooms which benefited from en-suite facilities. People were encouraged to personalise their rooms to make them more comfortable and homely.

We conclude that people are supported to have control over their lives.

People can be assured that they get the care they require without delay. We saw staffing levels were appropriate to meet the needs of people using the service, and staff had a good understanding of the needs of the people they cared for. We viewed a selection of care files and saw that they were in good order; thorough, robust and had been regularly reviewed.

We saw that referrals had been made to external professionals and services in a timely manner and any instructions had been fed into the care plan and were being followed.

We viewed the medication storage and administration and found these to be safe and robust with Medication Administration Record (MAR) requiring some improvements, but these improvements were made immediately following our first visit.

We viewed food menus within the home and saw a varied choice of meals were on offer.

Staff had a clear understanding of modified diets and Heol Don had a range of pureed meals that were shaped to look like the food to make them more appealing to people. We conclude that people physical and emotional needs are met appropriately.

People can be assured that they are safe. People were cared for in a suitable environment that was free from hazards and had equipment to maintain the safety and independence and people using the service. We saw that all staff had undertaken safeguarding of adults training and refresher training was also given regularly. Heol Don had a robust safeguarding policy in place and were making safeguarding referrals to appropriate agencies when required. We saw that safeguarding referrals were stored centrally with outcomes recorded and these referrals were monitored as part of the quality assurance process. We saw that the home had appropriate policies and procedures in place to ensure

the smooth running of the home, and people and their relatives were fully engaged with regularly. We conclude that people are protected from abuse and neglect.

## 2. Care and Support

### Our findings

People can be confident that their individual circumstances are considered.

We saw that all people had their own personal routines and chose when to get up in the morning, when to go to bed at night and how they spent time in between. All care documentation examined was person centred and individual to the person being cared for, with likes and dislikes clearly recorded.

Staff we spoke with had a good understanding of the needs of the people they cared for and were committed to promoting independence and offering choice. We observed lunch time within the home and saw that menu's with food choices were clearly displayed, but people were also offered verbal and visual choice at the time of service. We were told by kitchen staff that further choice was always available if people didn't want any of the choices on the menu.

We saw that people had a choice of five activities per day and were encouraged to participate if they wished. Heol Don employed three activity co-ordinators, who between them arrange activities every day. One person we spoke with told us "*there is always something going on here, and if you want to go that fine and if you don't that also fine, we make our own choice*". We saw evidence that social engagement was provided in group's and one to one sessions as per the needs and preferences of the individual.

We conclude that people are encouraged to have autonomy over their own lives.

People can be assured that they get the care as early as possible.

We examined a selection of care files of people using the service and found them to be thorough, robust and reflective of the person receiving care. We saw personal plans were reviewed regularly, but any updates were recorded on the update sheet accompanying the care plan. We recommended that the care plan document is updated as with many changes the document may then become inaccurate. This recommendation was actioned immediately and when we returned we were able to see that documents were being updated when any changes were made. We saw that referrals were made to external agencies and any guidance or recommendations was reflected in the personal plan and followed appropriately. We spoke with a visiting professional who told us "*I have no issues with the care being provided here, the staff are very helpful and know the needs of the residents very well*".

We found staffing levels at the home were sufficient to meet the needs of people using the service, and were in line with those set out in the statement of purpose, but we noted that on the first day of inspection call bells were taking some time to be answered. We addressed this with the manager and when we returned this was no longer an issue and we were told additional staff had been employed to assist with the answering of calls bells.

We viewed practices within the home and saw staff providing care with dignity and respect with clear knowledge of the needs of the people they cared for. One person we spoke with told us "*I am very happy with the care I receive here. The staff are very good and there are things going on that I enjoy*." We also spoke to a visiting family member who knew the home very well and spoke about the changes the home had gone through over the years

and said *"I am very happy with the care my mother gets and also the support they give me as a family member, they have gone above and beyond and any issues are resolved quickly"*.

We examined medication processes within the home and found them to be safe and robust. We audited a selection of medication and found the quantity to match the recorded figure in the book. We examined the Medication Administration Record (MAR) charts and on the first visit found some missing signatures and the effects of PRN (as required) medication not being recorded. When we returned we found that MAR charts were completed correctly and the effects of PRN medication was being recorded.

We conclude that people's well-being is promoted by the care they receive.

### **3. Environment**

#### **Our findings**

People can be assured that they live in an environment that meets their needs.

Heol Don is a purpose built facility that is set over two floors and broken into four units, Cardiff and Caerphilly on the ground floor and Conway & Caernarfon on the first floor. We found the environment to be clean, modern, warm and welcoming and well maintained, but during our second visit we noted some damage to the wall in the first floor dining room. We discussed this with the maintenance staff who were aware of the issue and began repairing the damage on the day of inspection.

Heol Don benefited from spacious communal areas including spacious lounges, spacious dining rooms, a hair salon, a family room and private dining room. People had access to ample bathrooms and toilets within the home, which were clean and contained appropriate equipment to maintain safety and independence. We did note that toilet rolls were not kept in sealed containers in bathrooms and toilets which can pose an infection control risk. We discussed this with the manager who assured us that this issue is being discussed by senior managers within the organisation.

People were cared for in single en-suite rooms and were encouraged to make the rooms as personal as possible. We viewed a number of rooms during inspection and saw that they were clean, warm and personal to the person occupying the room.

We conclude that people live in a home that promotes their well-being.

People live in a safe environment.

Heol Don had a welcoming reception area which was manned during the day time and ensured people were authorised to access the building. On arrival we were asked to sign the visitor's book and our identification was checked.

We conducted a tour of the building and saw that there were handrails in situ and appropriate flooring for use of wheelchairs and walking aids. The home was extremely neat and tidy with no clutter and was tastefully decorated throughout.

All windows had appropriate restrictors in place and all harmful chemicals were locked away safely and securely. All residents had a Personal Emergency Evacuation Plan (PEEP) in place, which is a plan on how people should be evacuated in the event of an emergency or a fire and we saw that the home kept records of fire alarm testing and evacuation drills.

We spoke to the maintenance staff at length and saw electronic records that all serviceable equipment had been maintained and serviced and that gas and electricity safety testing was up to date. We saw that all residents had access to equipment needed to maintain their safety and independence at all times.

We conclude that people's safety is maintained within the environment.

## 4. Leadership and Management

### Our findings

People benefit from the leadership and management arrangements.

Heol Don benefited from a manager who is registered with Social Care Wales and an RI who had good oversight of the service. We spoke to the manager at length during inspection and saw documentation of the RI visits being completed and quality assurance monitoring taking place.

We viewed a selection of policies and procedures within the home and found them thorough, robust and easily accessible to staff when required. Heol Don had had a clear complaints policy in place and were recording and responding to any complaints raised. A family member we spoke with told us that they had made a complaint and had been *“totally satisfied with the response, which was quick. I am confident that my mother is cared for in the best place”*.

We saw evidence that Deprivation of Liberty Safeguards (DOLS) applications, safeguarding referrals and regulation notices were submitted appropriately which indicates that the home understood and was fulfilling its legal requirements. Safeguarding referrals were stored centrally with outcomes recorded which allows the home to monitor the referrals for themes and trends.

We conclude that leadership and management is effective.

People can be assured they are supported by people who are safely recruited.

We examined a selection of staff personnel files and found them to contain all required information including identification and a full employment history. We saw that pre-employment checks including references and Disclosure and Barring Service (DBS) certificates were applied for before employment was offered. These checks are important as they determine the suitability of a person to work with vulnerable people. We saw there was a system in place to ensure that DBS certificates were renewed every three years.

We examined the staff training statistics and saw that they were 98.8% completed. We examined the staff supervision gaps and saw that all staff received supervision four times per year which is important as it is an opportunity for any practice issues to be raised and the conversations formally recorded. The majority of staff we spoke with told us that they were happy working at Heol Don and felt well supported, but two staff members told us that they felt *“undervalued”*. We discussed this with the manager on the day of inspection and given assurances that all staff were valued and this message would be conveyed across the staff team.

We conclude that staff are well trained and supported.



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

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

This was the first inspection since the home re-registered under the Regulation and Inspection of Social care (Wales) 2016.

### **5.2 Recommendations for improvement**

- Toilet rolls to be in sealed containers.
- Damage to wall in dining room to be repaired.
- Calls bells to be answered swiftly.
- Care plan original document to be updated when needs change.
- All medication administered to be signed for.
- Effects of PRN medication to be recorded.
- To ensure that all staff feel valued.

## 6. How we undertook this inspection

This was a full inspection completed as part of our annual inspection programme. This inspection was the first post RISCA registration inspection. Two inspectors visited the service unannounced on 11 December 2019 arriving at 10:00am and leaving at 7pm. One inspector returned unannounced on 15 January 2020 arriving at 09:30am and leaving at 2:30pm.

The following regulations were considered as part of the inspection:

- The Regulated Services (service providers and Responsible Individuals) (Wales) Regulations 2017.

The following methods were used:

- A tour of the building.
- Discussion with manager.
- Observations of practices within the home.
- Observations of medication administration processes.
- Viewing a selection of policies and procedures.
- Discussion with visiting family members.
- Discussion with visiting professionals.
- Discussion with 10 residents.
- Discussion with 12 staff members.
- Viewing of 11 resident files.
- Viewing of eight staff personnel files.
- Viewing the training and supervision matrix.
- Viewing of the maintenance file.
- Questionnaires received from residents, family members and staff.
- Viewing of information held by CIW including notifications and statement of purpose.
- We used the Short Observational Framework for Inspection (SOFI). The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.

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
Service Provider	Bupa Care Homes (ANS) Limited
RI	Sarah Hedges
Registered maximum number of places	78
Date of previous Care Inspectorate Wales inspection	This was the first inspection since the home re-registered under the Regulation and Inspection of Social Care (RISCA) Act 2016.
Dates of this Inspection visit(s)	11/12/2019 and 15/01/2020
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Working towards.
<b>Additional Information:</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.	

Date Published 09/03/2020

No noncompliance records found in Open status.