



Inspection Report on

Southern House Nursing Home

Southern House Nursing Home

18 Water Street

Abergele

LL22 7SH

Date Inspection Completed

11/03/2020

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Description of the service

Nursing and personal care for 35 adults is provided at Southern House Care Home which is located in Abergele. 34 people were resident in the service on the day of the inspection.

Chestnut House Nursing Home Limited is the registered provider and Sandeep Gupta is the Responsible Individual (RI)

The manager is registered with Social Care Wales (SCW).

Summary of our findings

1. Overall assessment

People are treated with care, respect and dignity and staff understand the importance of recognising people's individuality. There are opportunities for people to socialise with one another and participate in different activities. The staff group are caring, motivated and receive training to ensure their personal development and the provision of care and support is relevant and up to date. There are effective systems in place to oversee and improve the service which enable the health and safety of residents to be protected.

2. Improvements

The home was re-registered under the Registration and Inspection of Social Care Wales Act 2016 (RISCA) and this was their first inspection under the new legislation. Any improvements will be considered as part of the next inspection.

3. Requirements

None

1. Well-being

People feel listened to and are treated with dignity and respect. We saw staff spend time with people, discuss the support needed and listen to the wishes and requests of people. Staff told us *'Residents are encouraged to be as independent as they possibly can and regular residents meetings are held so that any issues can be raised and addressed'*. Relatives told us staff are *'never too busy to stop and help or advise me on a query'* and *'I would recommend Southern house to anyone and have done so.'*

People living in the service are offered warmth, encouragement and emotional support in their day-to-day care. The staff approach seen and heard throughout the day was respectful and caring, indicating people have positive relationships with staff. Observation of staff practice demonstrated their understanding of each person and the support provided reflected this knowledge. When care and support needs change additional advice and support is requested from professionals.

People live in a service which protects them and where they can feel safe and secure. A safeguarding policy and procedure directs staff and they receive training to ensure their understanding and confidence in this area. Policies are useful and inform staff of actions that need to be taken. Contact with relatives and friends is supported.

People live in an environment which is clean, well maintained and kept safe due to the servicing of equipment. Refurbishment is planned and ongoing and it is intended that further attention will be given to include aspects around the environment to support people living with dementia. There is a secure patio area to the rear of the building, used by people in the warmer weather. Bedrooms are decorated to the preference of the individual and personalised with items of importance to them.

2. Care and Support

People can feel confident that care is provided in line with their assessed needs as care plans are accurate and up to date. Pre admission assessments take into account people's health, personal preferences and routines. This valuable information informs the personal plan which show actions required to support the individual. Plans are reviewed regularly to ensure they are effective. Staff use an electronic system to document support but not always at the time it is provided. An icon describes how the person feels emotionally. This useful information provides all staff with a visual aid, enabling them to adapt their approach to best support the person.

Care and support is provided in consultation with people and takes into consideration their wishes and health needs. We observed staff involving people in their care. Time was taken to attend to personal hygiene. People were told what was to happen before a task was carried out. Staff listened to the person and offered reassurance where it was needed and support was provided sensitively. Individual and group activities are held each day but two residents told us they would like more. The activity worker also spends time with people who remain in bedrooms but, it is not always possible to ensure each person is given daily quality time. The 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. One staff member said *'Improvements have already started in the home to create a quiet area and to try and introduce more Welsh words for non Welsh staff to learn to help with communication with Welsh speakers.'*

People are supported to access healthcare and other services to maintain their ongoing health, development and well-being. Charts are maintained to record intake of diet and fluid, re positioning and other tasks. Pressure care, weights, and falls are documented and any changes reported to the nurse. Health professionals are contacted for advice where needed. Two health professional's said there is *'excellent clinical leadership from the lead nurse'* and were positive about the clinical care from the nursing staff saying they were thorough and had *'excellent judgement'*. Designated staff are appointed as champions in continence, falls, infection control, tissue viability and mental health. Training provided by the local health board is allocated according to speciality.

Mechanisms are in place to safeguard people living in the service. Staff are appropriately trained and understand safeguarding processes. Deprivation of Liberty Safeguard (DoLS) applications are made in peoples best interests. Residents have families or friends who speak on their behalf. Reviews with health professionals provide people with further opportunities to raise any concerns they may have.

There are safe systems in place for the management of medicines. Medication training is provided and competency assessed annually. Internal and external medication audits are completed. A review of prescribed medication is currently being carried out.

3. Environment

Care and support is provided in a location and environment with facilities and equipment that promote achievement of people's personal outcomes. The service is bright, airy and refurbishment is ongoing. Corridors are free from clutter and lighting in corridors is good. The décor is well maintained but visual clues to assist with orientation are not evident throughout the service. Communal areas provide people with opportunities to find a quiet space or socialise. There are different types of seating offering choice and comfort to suit different abilities. Bedrooms are personalised and based on people's individual preferences. A staff member commented we '*always endeavour to maintain a homely environment for the residents. Standards are very good*' and a relative said '*it's always nice and clean*'.

Effective systems are in place to maintain and service equipment and facilities. A variety of hoists are available to assist with transfers and the movement of individuals and are serviced regularly to ensure their safety. A level 5 food hygiene rating (the top rating) was awarded to the kitchen at the last environmental health inspection. Attention is given to fire safety in order to reduce risks to people living in the service. Personal Emergency Evacuation Plans (PEEP) are completed and reviewed monthly. Audits of areas of the service are completed monthly by the manager. Any issues are discussed with staff at the time. If issues affecting the whole staff group are identified, they are discussed during group supervision sessions. This positive approach offers staff a reminder of good practice. Most recently the importance of promoting rigorous hygiene procedures was discussed. The manager and one of the nurses attend link meetings for infection control. As a consequence of these meetings, the role of housekeeper has been established. The housekeeper explained a part of their role is to oversee maintenance and cleanliness. Each day the domestic worker attends to routine cleaning and the housekeeper deep cleans one bedroom. This thorough routine ensures standards are maintained throughout the service. They check and identify areas needing attention and report their findings to the maintenance worker for attention. Two maintenance workers are employed and attend to day to day repairs, health and safety checks and decoration.

4. Leadership and Management

There are effective systems in place to ensure the smooth operation of the service and ensure a sound foundation to provide high quality care and support for people living in the service. The manager has social care experience and the deputy is a nurse, the combination is valuable as it reviews the operation of the service holistically. The regional manager supervises the manager and carries out regular inspections of the service. Actions for improvement are followed up. Details are shared with the RI to ensure effective oversight of the service. The RI visits the service on a regular basis and a report is compiled showing the areas reviewed. Systems for assessment, care planning, monitoring and review ensure care is delivered consistently and reliably. Quality and audit systems review progress and inform the development of the service. Resident meetings provide people with the opportunity to voice opinions. Staff meetings enable staff to reflect on practice and enable group discussions to take place in order to improve practices. One staff member commented *'staff work well as a team to maintain high standards and ensure the fundamentals of care are delivered effectively.'*

Information is easily accessible and provides people with a clear understanding of the service provided. A statement of purpose describes the service and what is available. A written guide provides people with details of the support staff will provide and the facilities offered. Individual records are kept securely and policies and procedures place people at the centre of the service and provide direction and guidance for staff.

People are supported by a service that provides appropriate numbers of staff who are recruited, trained and supported in a way which improves outcomes for people living in the home. Checks of staff suitability are carried out before they begin working at the service. Disclosure and Barring Service checks are repeated every three years and the personal identification number (PIN) of nursing staff is checked annually. Staff files viewed contained required information. Newly appointed staff follow The All Wales Induction Framework for Health and Social Care (AWIF), supporting new workers during the induction stage of their employment. The training programme show staff receive core training which is regularly refreshed. Specific training relating to peoples individual needs is also provided. One staff member commented they had *'Enough support to do my job. Training opportunities to keep up to date with evidenced based practice and to revalidate'*

Staff levels are strong and kept under review and people benefit from the flexibility of staff. Staff work both nights and days, to adapt to the changing needs and circumstances of individuals using the service. Staff have one to one supervision with the manager and the deputy completes clinical supervision. Meetings are successful in developing staff and worthwhile as outcomes for residents are improved. Staff comments included *'The support I have to do my job is excellent'*, *'Manager supportive and approachable'* and *'Can discuss any concerns, ideas I may have'*

5. Improvements required following this inspection

None

6. How we undertook this inspection

We, Care Inspectorate Wales (CIW) carried out an unannounced inspection on the 11 March 2020 between the hours of 8.30 a.m. and 6.10 p.m. This was a full, scheduled inspection reviewing all four quality themes.

The Regulated Services (Services Providers and Responsible Individuals) (Wales) Regulations 2017 were considered during the inspection.

The following methods were used:

- Observing staff interaction and engagement with people living in the service.
- Speaking with residents and staff.
- We read three personal plans and a sample of corresponding care and support charts.
- We read four staff files, staff rotas and the staff training programme
- We sampled policies and procedures, service records and audits

Questionnaires were sent and returned, completed by four residents, two relatives, two visiting professionals and five staff. Comments have been included in the report.

Feedback was given to the manager during the inspection and the RI by telephone following the inspection.

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

www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	Chestnut House Healthcare Limited
Registered Service	Southern House
Responsible Individual	Sandeep Gupta
Registered maximum number of places	35
Date of previous Care Inspectorate Wales inspection	This was the first inspection since the service attained registration under The Regulation and Inspection of Social Care Act (Wales) 2016
Dates of this Inspection visit(s)	11/03/2020
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service
Additional Information:	

Date Published 03/08/2020