Inspection Report on

Rose Cross

ROSE CROSS RESIDENTIAL HOME
BRENIG ROAD PENLAN
SWANSEA
SA5 7BE

Date Inspection Completed

23/05/2019
Description of the service

Rose Cross Residential Home is located in the residential area of Penlan in the outskirts of the City of Swansea. The service is owned by the City and County of Swansea and the manager is Gayle Brown who is registered with Social Care Wales (SCW). Rose Cross Residential Home provides residential and respite care for up to 33 people aged 55 and above some of whom may have dementia care needs.

Summary of our findings

1. Overall assessment

People live in a positive environment where they are encouraged to make choices and make decisions whilst protected from harm. People are provided with limited opportunities to be involved in constructive therapeutic activities at the home and in the community. We found that people are seen as individuals whose choices, likes and dislikes are taken into account. Staff are professional well-trained and motivated.

2. Improvements

No areas of non-compliance were noted at the previous inspection.

3. Requirements and recommendations

Section five of this report set out our recommendations to improve the service and the areas where the care home is not meeting legal requirements. These include the following:

- Storage of equipment.
- Developing a quality assurance policy and process.
- A review of activities at the home and in the community.
- Further develop Welsh-English bilingual signage at the home.
- An audit of staff files.
1. Well-being

Summary

People are provided with a good standard of care and support, which focuses on maintaining their health and well-being. People are provided with opportunities to make choices, be active and achieve fulfilled lives. We observed people to be content and comfortable in their surroundings. People are listened to and cared for by staff who understand their individual needs.

Our findings

People are safe and protected from abuse and neglect. Staff spoken with were clear about their responsibilities for protecting the people they looked after. They were confident about the action they would take if they had any concerns about a person’s well-being. Training records showed the staff had appropriate training and management had the clear oversight of this as the training matrix clearly identified, which training had been undertaken and what was needed and review dates. Policies relating to keeping people safe including the safeguarding policy were available at the home. Discussions with the deputy manager confirmed his understanding of the process to follow when it was felt a person lacked the capacity to manage their own safety in line with Deprivation of Liberty Safeguarding (DoLS) legislation. We saw risk assessments in people’s care records, which were reviewed regularly to ensure that any risk to a person was minimised. Relatives we spoke with told us that they felt their relative was “safe” and “well cared for”. This shows that people are safe and as far as possible protected from harm.

People mostly do things that matter to them. We saw that activities and entertainment were displayed at the entrance to the dining rooms in each unit. Activities were displayed weekly and included entertainers coming in to the home as well as craft sessions etc. Different groups such as choirs, schools and singers attended the home. Records showed that people had recently taken part in a variety of activities such as one-to-one chats and attended a class at the home. We saw photos of people enjoying activities and celebrations such as barbecues and other celebrations. However, some of the most important activities are those, which include people in ordinary life such as making the bed and washing the dishes. This type of activity was not witnessed during this inspection. The home does not employ an activities coordinator specifically but a senior care worker undertakes this role and arranged the entertainment and activities at the home. Staff told us that people living at the home “don’t tend to take part in activities in the community”. This was confirmed by people living at the home, who told us “we don’t do much” and “we don’t do a lot”. One relative commented “they don’t tend to do much when we are here”. We recommend undertaking a review of activities at the home and in the community. The evidence shows that people are sometimes positively occupied but this would benefit from reviewing and implementing the conclusions from this review.

People contribute to and enjoy safe and healthy relationships. This is because we saw constructive relationships between people living at the home and staff. This contributed to the homes relaxed and pleasant atmosphere. One relative told us “they are so happy that their relative is well cared for” and “staff are friendly and welcoming to all”. People were supported by staff to develop new relationships and maintain existing ones. We observed that people were content in the company of others living at the home and staff told us that
the needs of people living at the home were compatible. People approached and spoke with staff confidently about their wishes and aspirations. We were told that some people received regular visits from relatives and others were supported to contact relatives by phone where visits were not possible. People have safe and positive relationships.

The home is working towards providing an active offer of the Welsh language. One person told us they enjoyed speaking with other residents in the communal areas. We were told that there was one Welsh speaking member of staff and at present there was one Welsh speaking resident in the respite service. Records showed that Welsh language versions of key documents were available at the home. We observed staff use Welsh language terminology and there were a limited amount of bilingual signage throughout the home. We recommend that bilingual signage is reviewed and any actions implemented. We found that people’s communication needs were set out within the care records, which included an assessment of the preferred language. Care workers appeared confident in communicating with people anyway they could understand. People’s communication needs are recognised and understood.
2. Care and Development

Summary

People are safe and as well as they can be because they receive proactive preventative care and support to maintain their independence. People are supported by competent staff that have a good understanding of what is important to people, how best to support them and treat them with dignity and respect.

Our findings

People are treated with kindness and compassion in their day to day care. We saw positive interactions that were genuine and warm between members of staff and people living at the home. We saw people were comfortable in their surroundings and with the staff that supported them. One person told us “the staff are wonderful” and another told us “they treat me well”. We found when speaking to staff, that they had a good knowledge and understanding of people, their history, what is important to them and how best to support them. Records showed that staff had taken time to get to know people well and there was visual evidence seen by us of staff interacting well with people, which demonstrated that they knew what was important to them and how best to support them. We can conclude that people living at the home have positive relationships with staff built on mutual trust and respect.

People’s health and well-being is maintained. Records showed that people had regular access to health and social care professionals. We looked at a sample of four people’s care records, which indicated that referrals had been made in a timely manner and clear records were kept of all appointments. These included the general practitioner, community nurse, physiotherapist and community teams. Records showed that information was recorded within the documentation in a clear and easy to understand format, which was person focused, proactive and responsive. Therefore, people receive the right care, which meets their assessed needs.

Team working is evident, which results in a staff team which is alert to people’s changing needs and moods and who have the confidence and skills to respond positively. Discussions with staff demonstrated they were happy in their roles and they told us they were well supported by the manager, the responsible individual and their peers. They told us “the manager has been really supportive” and another commented “I feel valued and supported because I’ve been through a rough time recently”. They went on to tell us that the standard of care at the home was excellent. It was clear from conversations with us that there was good morale at the home and the pride in the care that they provided for people living there. We observed positive communication and interaction between staff and residents with both staff and residents stating that they had positive relationships with the manager and the responsible individual. People told us “we all get on well like one big family”. People’s lives are enhanced by being supported by staff who have a focus on providing care and making proper provision for people’s health and welfare.

People are offered a wide range of home-cooked and nutritious meal choices. We observed people during a lunchtime meal and saw the care workers assisted people in a relaxed and dignified way. They gently encourage people to make choices and checked whether they were enjoying their meals. People commented, “it’s my favourite”, “that’s tasty” and “that
looks lovely”. There was an efficient and well organised system for serving meals, which ensured that people received their meals when still hot as meals were brought from the kitchen to separate dining rooms in mobile hot cupboards. The staff created a sociable atmosphere by enabling general conversation to flow and discussing what people had planned for that day. Staff told us that people’s dining experience had improved and it provided the opportunity for people to interact with other people and encouraged companionship. We can conclude that people have a positive dining experience at the home.

People are given medication at the right time and in an appropriate form. All medicines were appropriately stored and staff who administered medication had undertaken training in administration of medication. We saw that medication administration records (MAR) were accurately completed with no gaps in signatures. We saw records of the temperature of the fridge for medication was stored. Controlled drugs were stored correctly and we checked that these had been administered and recorded correctly. Regular audits of medication had been completed. Therefore, people are supported to be as safe and healthy as they can be.
3. Environment

Summary

People are living in a safe, secure, warm and well maintained home. However, issues with regards to the storage of equipment at the home need to be addressed. The home had a relaxed positive atmosphere where people who live in the home were treated with respect as individuals.

Our findings

People are supported in a well furnished and comfortable home, which reflects their individual tastes. This is because we saw that the home was decorated to a good standard with staff assisting people living in the home to ensure there was a personal touch. People’s bedrooms were personalised with personal possessions and memorabilia. We looked at several bedrooms at the invitation of the occupants and we saw that they took great pride in their environment and their belongings. We were told by one person “I have everything I need here” and another said “it’s lovely here”. We conclude that people feel uplifted and valued because they are supported in a personalised environment that is appropriate to individual needs.

People can be confident that appropriate steps have been taken to protect them from risk. When we arrived at the home we were asked to introduce ourselves and to show our personal identification. We were asked to sign the visitors’ book with the time of arrival and time of departure and the purpose of our visit. The Care Inspectorate Wales (C.I.W.) registration certificates and employer liability insurance certificates were clearly displayed. There were appropriate prevention and protection measures in place in the event of fire.

We saw that effective safe systems of work in relation to fire were in place and staff had fire safety training. This included a fire risk assessment and we saw evidence of personal emergency evacuation plans in place for people who use the service. People therefore, are supported in a safe and secure environment.

People cannot always be confident that they are cared for in an environment with equipment that promotes achievement of their personal outcomes because the storage of equipment needs to be addressed. This was because we found that suitable facilities for the storage of equipment, which was easily accessible to staff was not available during our visit. We found that many of the communal bathrooms and toilets were unavailable due to being used for storage of equipment such as mattresses, hoists and other equipment. Some mobile hoists and wheelchairs were also stored on the landing and corridors at the home. We discussed this matter with the deputy manager and the Responsible Individual (R.I.) who assured us that this will be addressed as a matter of priority. Care workers spoken with were clear about the process for reporting maintenance issues and told us that they were generally dealt with quickly. Testing and servicing of appliances was kept up to date including the hoists and portable electrical appliances. Therefore, people experience living in a home where some bathrooms and toilets are not currently available due to storage of equipment issues.

Confidentiality is maintained. We saw the care records were stored in locked cabinets in a locked office and these were only available to staff who were authorised to access them.
Employee personnel records were securely stored in the manager’s office. We find that people’s privacy and personal information is well protected.

People’s well-being is enhanced by having access to a pleasant and stimulating environment. The front and rear gardens were well maintained with adequate seating and tables on a patio with access from the rear of the home. Whilst walking around the building we noted that the environment was clean, bright and had a relaxing ambience. We saw communal areas where people can socialise and meet with visitors. At the time of the inspection we saw a number of visitors spending time with their relative and one commented “the home is clean and tidy, we can’t fault it” and another told us “she is happy”. We found people living in the care home can access an environment, which provides both stimulation and reassurance which adds to their sense of well-being.
4. Leadership and Management

Summary

People can be assured that there are clear leadership and management systems in place and the manager, deputy manager and responsible individual are visible and accessible. Staff training is good and there is a low turnover of staff, which provides continuity for people using the service. However, quality assurance measures need to be further developed and embedded in the service.

Our findings

The statement of purpose provided people with good information about the home and was current and had recently been reviewed. We saw the service user guide and we were informed that a copy was given to each person on admission. Both these documents were available in English and in Welsh versions. We asked a relative about whether the information had been useful and they said they had been happy with the amount of detail provided. Therefore, people can access information to inform their choices.

We found that staff are valued, supported and given clear direction. There are suitable procedures in place for training and supporting staff. Staff we spoke with told us they felt valued and supported by the management team and they could approach the manager, deputy manager and responsible individual at any time. There was evidence showing that regular team meetings were held and staff told us they felt comfortable in raising any concerns they had during these meetings. Records showed that meetings were held regularly with an agenda and a record of minutes. From the records viewed, we saw that training was regular, appropriate and ongoing. Therefore, people’s safety and well-being is enhanced by regular supervision and appraisal of staff.

We found that some quality assurance measures were in place and the views of staff and people living in the service were evident. Relatives and health and social care professionals, had expressed their opinions and views in order to enhance the service. We were shown a template for the quality of care review, which had been created by the R.I. and we were assured that this would be sent to us once completed. We were also shown a newly implemented ‘monthly performance report’ and ‘records of quality observation visits’. However, the home did not have a quality assurance policy and procedure, which would guide the manager about ensuring the appropriate quality assurance processes were in place. We recommend that this be developed as a matter of priority. The responsible individual is partly based at the home and undertakes a monthly review of the service and writes a record of these findings in the monthly performance report. We saw that this covered all areas of the service such as training, staffing, supervisions, appraisals, complaints and other areas. Records showed that any concerns or complaints that had been raised had been dealt with in a timely manner. We saw that letters had been sent to complainants outlining the outcome of the investigation and any action to be taken. We can conclude, that people are benefiting from a service that is looking to improve.

People can be assured that staff members who support them have mostly been through a robust recruitment process. We examined four personnel files, these demonstrated that the required checks, clearances and information had been conducted and held on the file. However, one of these files was missing some of the required documentation. This was
discussed with the deputy manager and the R.I. who agreed to confirm with us that the required documentation was put in place. The supervision and appraisal records for four members of staff were also checked and were seen to be within the required timescales. Staff confirmed with us that they received regular supervision from managers and we saw supervision records, which were well recorded and covered many areas. We conclude that staff have mostly been through a robust and timely recruitment process.

People can be assured that attention is given by the manager and responsible individual to ensuring the safety of people living in the home. We saw a programme of health and safety checks that the responsible individual undertook and records confirmed this took place meaning there was good management oversight of health and safety. We saw risk assessments covered all areas of the home and certificates relating to the servicing of hoists, passenger lift, gas and electrical safety and portable appliance testing (P.A.T.) of all appliances throughout the home. Policy and procedures were in place, which focused on people’s welfare such as safeguarding, confidentiality and health and safety. People benefit from a service, which sets high standards for itself and is committed to constant improvement.
5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None.

5.2 Recommendations for improvement

We have advised the registered person’s that improvements are needed in relation to storage of equipment (Regulation 48 (e)) in order to fully meet the legal requirements. A notice has not been issued on this occasion, as there was no immediate or significant impact for people using the service.

We expect the registered person’s to take action to rectify this and it will be followed up at the next inspection.

We recommend the following:

- The service should develop a quality assurance policy and process and this should include an auditing process.

- A review of activities at the home and in the community and its conclusions be implemented.

- The service should further develop its Welsh-English bilingual signage at the home.

- Staff records should be audited to ensure all the required recruitment documents are in place. (This was a recommendation from the inspection on 11/07/17).
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 22 May 2019 between 9.00 a.m. to 4.00p.m. and 23 May 2019 between 8.30a.m. to 2.30p.m.

The following methods were used:

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.

We spoke to people living at the home during the day, four relatives, two healthcare professionals and five members of staff.

We looked at a wide range of records. We focussed on the staffing rota, complaints file, statement of purpose, medication policy, staff training, the quality of care review, recruitment records and four people’s records.

Further information about what we do can be found on our website:
www.careinspectorate.wales
## About the service

<table>
<thead>
<tr>
<th>Type of care provided</th>
<th>Care Home Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Provider</td>
<td>City and County of Swansea</td>
</tr>
<tr>
<td>Manager</td>
<td>Gayle Brown</td>
</tr>
<tr>
<td>Registered maximum number of places</td>
<td>33</td>
</tr>
<tr>
<td>Date of previous Care Inspectorate Wales inspection</td>
<td>30/08/17</td>
</tr>
<tr>
<td>Dates of this Inspection visit(s)</td>
<td>22/05/2019</td>
</tr>
<tr>
<td>Operating Language of the service</td>
<td>English</td>
</tr>
<tr>
<td>Does this service provide the Welsh Language active offer?</td>
<td>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 significant effort to promote the use of the Welsh language and culture.</td>
</tr>
</tbody>
</table>

**Additional Information:**

**Date Published** 05/08/2019