Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Forest View

Abertillery

Date Inspection Completed

19/12/2024

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About Forest View

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Riverwood Housing Ltd
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	19 April 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People receive good quality care and support at Forest View. Support staff know people well and understand their needs. We saw support staff being attentive, caring and respectful. People have opportunities to take part in a range of meaningful activities and community events and are supported to maintain relationships with family and friends.

Each person receiving a service has a personal plan which is individualised and reviewed regularly. Staff recruitment practices are robust. Staff receive regular training and supervision to enable them to perform their duties.

People live in a suitable environment which is safe and meets their needs. Bedrooms are personalised and offer space and privacy. The relevant health and safety checks are up to date.

The responsible individual (RI) regularly visits the service to seek people's views and evaluate the quality of the service. There are effective quality assurance systems in place to monitor and review the care delivery.

Well-being

People have choice and control as far as practically possible. People or their advocates are fully involved in care planning and the review process. Their personal preferences are detailed in personal plans of care. This ensures people receive person-centred care and support. Care staff encourage people to be as independent as possible and support them to develop skills to further their independence. People have their own personal routines and engage in activities of their choice within the service and the community. The RI engages with people using the service and seeks their views as part of quality assurance processes.

People are encouraged and assisted by support staff to be as healthy as they can be. People's likes and dislikes, and allergies are known. The service assesses people's care and support needs and any associated risks to their health and well-being. These are documented in personal plans, providing guidance for staff on how to support individuals with their needs. People have access to GP services and appointments with health and social care professionals are arranged. People are appropriately referred to professionals due to any change in their health. There are systems in place for receiving, storing and administering medications.

There are systems in place to help protect people from abuse and harm. Training ensures support staff are appropriately skilled, for example around how to manage medication safely, delivering person centred care and supporting people with any behavioural needs. The service ensures staff are fit to work at the service, and regular supervision and appraisals support continued development. Incidents and accidents are logged, and appropriate actions taken by the service. Ongoing quality assurance audits ensure systems remain effective and improvements are identified and addressed.

People live in a home that is safe, secure and homely. There is a sign-in process to enter and leave the premises. The home is presented and maintained to a high standard. The service is clean, clutter free and comfortable throughout. Health and safety building checks are completed and documented routinely.

Care and Support

People experience a good standard of care and support. They have developed positive relationships with staff, who support them with kindness and sensitivity. People are encouraged to express themselves and be as independent as possible. They have opportunities to follow their interests and try new things.

Each person receiving a service has a detailed personal plan. A person-centred approach to care planning ensures people are central to the care and support they receive, their personal wishes are valued and supported. Personal plans contain practical information guiding support staff on the best ways of providing care and support. They also contain risk assessments which help mitigate risks to people's health and safety. Support staff complete daily recordings documenting care and support provided as well as other information such as people's emotional wellbeing. We saw positive interactions between support staff and people throughout the inspection. Care and support is provided in a dignified and respectful manner and people or their representatives are consulted and involved in their care planning. People receive support to access meaningful and beneficial activities of their choice. People are happy with the service they receive.

Appropriate referrals to health and social care professionals are made with recommendations acted upon by the service. Mental capacity assessments and best interests' assessments are completed. Deprivation of Liberty Safeguard (DoLS) authorisations are sought where people lack mental capacity to make decisions about their care and accommodation.

Arrangements are in place for storing, ordering, and administering medication which is stored securely. Monthly audits of medication take place and these accurately record if any medication issues have been identified during the month. The service promotes hygienic practices and effectively manages infection prevention and control procedures.

Environment

People enjoy a homely environment. The location, design and size of the premises are as described in the statement of purpose. The premises, facilities and equipment are suitable for the provision of the service. People's well-being is enhanced by living in an environment that is clean, safe, and suitable for their needs. The service provider continues to invest in ongoing renovations and updating of the environment. Their individual rooms are spacious and personalised. Communal rooms are comfortably furnished and nicely decorated.

Health and Safety measures are in place to keep people as safe as possible. The service has a range of health and safety checks conducted on a regular basis. For example, routine servicing of utilities such as gas and electric take place. Fire safety equipment is tested both internally and by external contractors and all staff have fire safety training. People living at the service have a Personal Emergency Evacuation Plan (PEEP) in place, which guides care staff on how to evacuate people in the event of an emergency.

Leadership and Management

The Statement of Purpose (SoP) and guide to services clearly states what people can expect, and the service reflects their contents. There are governance arrangements in place to support the operation of the service and ensure continued quality care and support. The RI has clear oversight of the service. The RI completes regulatory visits seeking feedback from people, their representatives, and staff.

Staff retention is good, with a number of staff working at the service for some time. There are good staff recruitment practices in place. We viewed a sample of newly appointed staff and found the required pre-employment checks had been completed. This included Disclosure and Barring Security (DBS) checks and gaining satisfactory references. Previous employment histories are explored as part of the selection process. This enables the service provider to make a decision about the fitness of workers at the service. Support staff are supported to register with the workforce regulator, Social Care Wales. Support workers know people well. They know what and who is important to them. This results in people having good relationships with those who support them.

Newly appointed staff complete an induction programme which includes training and shadow shifts. Support staff receive regular supervision, and appraisals are completed annually. This provides an opportunity for care staff to discuss any concerns they may have and for management to provide feedback on their work performance. Staff training records indicate support staff have access to a variety of training opportunities, and complete refresher training in a timely manner. The training programme includes topics such as moving and handling, infection control, dementia awareness and safeguarding adults at risk. Staff meetings take place, promoting discussions about people's experiences and any planned changes to improve the service.

The provider of the service checks people are happy with the quality of care and support and looks for ways to improve. The provider visits regularly to oversee progress and developments, to complete checks and to meet with people who live there and with staff. We saw clear reports that show what they saw in the home, what people have fed back and what actions have been taken as a result. Management at the service regularly check the quality of care provided.

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	

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