



Inspection Report on

Rosewood

Swansea

Date Inspection Completed

17/05/2024

Welsh Government © Crown copyright 2024.

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 You must reproduce our material accurately and not use it in a misleading context.

About Rosewood

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group Ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	14 February 2023
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

People are happy at Rosewood, which has a warm, welcoming atmosphere. They are supported by familiar staff who have a good understanding of their individual needs and preferences. These are set out within detailed risk assessments and personal plans. People enjoy spending time with others and taking part in various activities. Care staff help people set and achieve personal goals that increase their independence and enhance their well-being. The service upholds people's rights and promotes their health and safety.

People live in homely accommodation that has suitable facilities to meet their needs. The service makes continuous environmental upgrades, and a newly refurbished laundry room has improved standards of hygiene and infection control. Maintenance and repairs are being monitored more closely, ensuring utilities and facilities remain safe. People can easily access the private garden, which is due to be developed.

The service has robust systems for recruiting, training and supporting staff. Staff are motivated in their roles and work well as a team. Managers are approachable, driven and committed to making positive changes that will improve people's experiences. The Responsible Individual (RI) regularly assesses service standards and drives forward improvements.

Well-being

People's rights are upheld. Care staff communicate with people effectively to help them make everyday choices. People's preferences and routines are outlined within personal plans and supported by care staff. This helps give people as much control over their day-to-day lives as possible. The RI observes and gathers feedback from people during formal visits. People can influence the care they receive and environmental changes. The service follows correct procedures to ensure people are not restricted unlawfully. Staff complete training in relation to the Mental Capacity Act (MCA) and Deprivation of Liberty Safeguards (DoLS).

People receive good continuity of care from a stable team of staff. Care staff actively promote people's health and well-being, ensuring they have access to the relevant specialist services. People maintain a suitable diet and consistently receive their prescribed medication. Care staff closely monitor people's mental well-being. People pursue their own interests and often spend time in the community. Keyworkers help people achieve personal goals, which they review monthly. Risk assessments and personal plans are up to date, detailed and easy for care staff to follow. Updates regarding people's health and well-being are communicated effectively amongst the staff team.

There are systems in place to help keep people safe. The quality of the service is regularly monitored by the RI. The service has enough staff to ensure people receive the right level of care and attention. Care staff know how best to support people. They complete a range of mandatory and specialist training, which includes safeguarding adults at risk. Staff are safely recruited and supported by an open and responsive management team. The service has up to date policies and procedures to support safe practice. Action has been taken to improve environmental standards and maintenance arrangements, thereby minimising infection risks and keeping utilities and facilities safe.

People can relax in comfort in accommodation that is well furnished and presented. There are some personal touches to help people identify with their surroundings. People benefit from constant environmental upgrades. Some rooms have been completely renovated to a high standard and further upgrades are planned. Managers are passionate about and committed to increasing the sensory stimulation within the home and garden. People can access community facilities easily.

Care and Support

People are content in their home where they enjoy the companionship of others. People appeared comfortable as they spent time together and made use of their preferred leisure items. They sang along enthusiastically to well-known songs with prompts and encouragement from care staff. Care staff anticipate people's needs well, responding promptly to verbal requests and body language cues. Each person has an allocated keyworker who helps them set and achieve personal goals. Care staff spoke with pride about the progress people have made. For example, people are more confident spending time in the community and their verbal interactions have increased. Care recordings are very well detailed and provide a clear picture of how people have spent their days.

The service develops detailed personal plans that outline people's backgrounds and care and support needs. Appropriate risk assessments are also completed to ensure care staff promote people's independence in a safe way. Keyworkers review people's activities and personal plans every month, which exceeds legal requirements. Care staff maintain contact with the representatives of those who are unable to contribute their views. Any restrictions people face are identified within personal plans and supported by the required DoLS authorisations.

People are supported to keep healthy. Care staff ensure people have access to the medical and specialist services they need. They carefully track people's medical appointments, recording details of the outcomes and any advice given. Guidelines from professionals are available for reference within people's care records. Records show that care staff assess people's mental health and well-being every day. They have in depth knowledge of people's health needs and provide the right care and support to help people maintain a suitable diet. People's weight is also monitored in line with their personal plans. The service stores and administers medicines safely. Records show that people consistently receive their prescribed medicines at the right time. Medication audits are routinely carried out by a designated member of staff. We were told that people's use of 'as required' medication has reduced since moving into the home.

People enjoy a range of activities both individually and as a group. Their hobbies and interests are reflected within personal plans. We saw people going for a drive with care staff and walking to a nearby coffee shop. Records show they have recently enjoyed train journeys, car racing events and outings to Porthcawl and Folly Farm. We also saw photos of people enjoying a musical themed day and celebrating special occasions. One person told us they are looking forward to a day trip they have planned with their keyworker. Arrangements are also being made for people to enjoy a holiday together at the end of the summer.

Environment

The home is located near shops and public transport links, so people can spend time in the community easily. A car is also available for use, although this is restricted if there are minimum staffing levels, or the car is loaned to another service. The home is well presented and has the necessary facilities to promote people's well-being. The design and location of individual rooms support people's needs and interests. People have ensuite shower rooms and access to a communal bath. We observed some homely touches to the décor, including personalised artwork in the entrance hall. A sensory board has also been hung on a corridor wall to provide more stimulation in this area. Although generally untended, the peaceful garden is accessible to people and has a pleasant outlook. We saw people walking safely around the garden paths.

The service promotes a good standard of hygiene and infection control. We observed all parts of the home to be clean and hygienic. The laundry room has been fully refurbished since the last inspection. Furniture has also been rearranged so people can use this room to complete laundry tasks more easily. The home has a good supply of personal protective equipment (PPE) and suitable arrangements for disposing of general and clinical waste. The kitchen and communal bathroom have been refurbished to a high standard. All staff complete training in relation to infection control, food safety and the Control of Substances Hazardous to Health (COSHH).

People benefit from continuous environmental improvements. Work to upgrade the conservatory has been approved and a new shower has been ordered for one person's ensuite. There are also plans to replace the flooring throughout the home whilst people enjoy their summer holiday. Where possible, people make decisions regarding paint colours and furnishings. The deputy manager spoke passionately about enhancing the décor further and increasing sensory stimulation. For example, there are plans to display a large wall map so people can visually track their travels using photographs. A sheltered decking area will be created in the garden to enable people to enjoy sand and water activities during most weather. The attic space is being renovated so it is suitable for use as a storage area.

The home and its facilities are safe and properly maintained. Equipment and utilities have been serviced and inspected within recommended timeframes. There are ongoing works to improve fire safety and a new fire risk assessment is due to be completed by an external company. Personal emergency evacuation plans (PEEPs) can be accessed quickly and easily. Staff complete fire safety and health and safety training. A new system has been introduced for logging and tracking maintenance requests. Senior staff can view updates regarding planned works and communicate directly with the company's maintenance department. Staff told us works are generally completed promptly. A maintenance officer attends the home periodically to complete routine safety checks and general maintenance.

Leadership and Management

The home has a strong leadership team consisting of a deputy manager and newly appointed senior care worker. The support they provide to staff on a personal and professional level was described as “*seamless*” and “*a real constant*”. The deputy manager told us they can talk through any queries with the RI or other service managers. The service has a clear policy for dealing with complaints. The RI oversees the running of the home effectively. Formal visits are carried out every three months, which inform six-monthly quality of care reviews. The RI sets actions to drive improvement based on people’s experiences and the findings of internal audits. Reports show that people have become more independent with meal and laundry tasks and enjoyed trying new activities. The service is being provided in line with its statement of purpose; a key document that explains what the service aims to provide and how.

The service has a stable team of staff. Rotas show that people are supported by consistent numbers of staff, with absences covered by other team members. There are clear on-call arrangements, so staff can access support easily when needed. Managers also carry out spot checks during night shifts. We found staff to be motivated in their roles, describing a positive culture within the service and strong teamwork ethic. One staff member said, “*Everyone helps everyone*”. Staff are recognised for their hard work through ‘Employee of the Month’ awards. They go through a robust recruitment process before starting work, including a Disclosure and Barring Service (DBS) check. New staff complete a six-month probation period, during which they receive formal supervision every month. These sessions consider their relationships with others, training requirements and understanding of policies and procedures. All staff are registered with Social Care Wales (SCW).

The service has clear policies regarding the support and development of staff. Staff complete a range of mandatory and specialist training. The programme is being expanded to include training in relation to skin integrity and diabetes. Managers have a clear system for tracking staff’s completion of training, and compliance rates are high. Staff told us they have promotional opportunities and “*Training is great, always really good*”. Staff are kept updated through shift handovers and team meetings. These give staff the opportunity to discuss people’s well-being and any feedback gathered during monthly keyworker reviews. They also cover health and safety matters, safeguarding procedures and other incidents. Staff receive annual appraisals and two-monthly supervision following their probationary period. This exceeds legal requirements. Staff understand their role in protecting people and know how to report concerns through safeguarding and whistleblowing procedures. We saw relevant contact numbers displayed on a noticeboard in the office.

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. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

44	There was a significant delay in works being carried out to address the potentially dangerous issues identified during an electrical inspection.	Achieved
56	The layout, ventilation and condition of the laundry room is compromising standards of hygiene and infection control.	Achieved

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 09/07/2024