



Inspection Report on

Woodside House Residential Home

**Woodside House Nursing & Residential Home
Penrhiwgoch Baglan
Port Talbot
SA12 8LN**

Date Inspection Completed

13/08/2024

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About Woodside House Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Mishael Care Home Ltd
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	24 May 2023
Does this service promote Welsh language and culture?	This 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.

Summary

People and their relatives are satisfied with the care and support they receive at Woodside House Residential Home. Care staff treat people with kindness and respect which has enabled them to build positive relationships with the people they support. Residents have choice and control over their lives and are supported to be as independent as possible. People have their own personal routines and do the things that matter to them both in the community and at the service. There is information available for staff to understand how to best meet people's care and support needs. Care documentation is thorough and considers people's individual needs and how they are best met. People live in a homely environment that is warm, clean, and suitable to meet their needs. The building is safe and people have their own space.

Staff are available in sufficient numbers and have the skills to adequately provide support to people. Care staff are knowledgeable, respectful, and caring. Safety equipment is in place and health referrals are made to promote peoples' health and well-being. Improvements have been made to community activities for people and support for staff through full staff records and staff receiving core training.

Well-being

People are treated with dignity and respect. Care staff have a good understanding of people's needs and engage with people in a positive way. Care staff encourage people to work toward fulfilling their personal goals and well-being outcomes. People told us they get on well with staff and commented, *"The staff are lovely" and "They take good care of me."* Records show people are offered choices to make everyday decisions. A relative confirmed this by telling us *"We have no complaints at all, she's happy there and is able to do the things she wants."* The Responsible Individual (RI) told us they regularly speak with people who live at the home and their families about what is important to them and how to best support them. Staff told us they feel valued and well supported by the management team.

People get the right care and support. Records reflect referrals are made to a variety of healthcare professionals such as psychiatry and community nursing. This is also confirmed by comments from a visiting healthcare professional who told us they are satisfied with the care at Woodside House. People are happy and receive support from professional staff who know them well. Care staff levels are good and a consistent team ensures people do not wait for their care.

People can do things that matter to them and feel valued in society. Records show people are supported to take part in various activities that are important to them. Regular house meetings take place to capture people's views and feedback from people is also sought as part of quality assurance processes. People and their families told us they are supported to do as much as they want.

People are safe and protected from abuse and neglect. The service provider has safeguarding policies and procedures, which are aligned to current legislation and national guidance. All care staff receive training in the protection of adults at risk of abuse and staff demonstrate a sufficient understanding of their role and responsibilities. People living at the home tell us they feel safe and secure.

People live in suitable accommodation, which overall supports and encourages their well-being. People's bedrooms contain personalised items of their choice and are suitably furnished. They have facilities, which encourage their independence and enables them to have private time. Woodside House is a welcoming environment where people feel part of the local community. People enjoy the company of each other and are well respected by staff.

Care and Support

People get the right care at the right time. The staff at Woodside House have developed positive relationships with people. Staff have a good understanding of people's needs and provide support with kindness, compassion, and care. People we spoke with were positive about living at Woodside House. People are at the centre of care planning and are included in assessments and reviews of their needs. Care documentation is thorough and contains the required information. Personal plans of care clearly highlight people's needs and how these should be met. We saw evidence that staff at the service work closely with external professionals and apply any advice or guidance into personal plans of care.

People can do things that matter to them when they want to do them. We saw a range of activities available which are meaningful to people. People told us they enjoy taking part in a variety of activities. Activities include bingo, gardening, quiz, one to one sessions with staff and '*Name that tune*.' People are also supported to get involved in the running of the home by taking part in ordinary tasks of daily living. Records show people have access to local community facilities.

People enjoy a positive dining experience. We observed people during a lunchtime meal and saw care workers assist people in a relaxed and dignified way. Most people ate their meals at dining tables which had tablecloths, placemats, cutlery and condiments in place. Some people ate their meal at cantilever tables in the lounge. Staff assist residents in a respectful and dignified way and are aware of people's dietary requirements. There was no menu displayed for people to choose what to eat but they were verbally told what was on the menu. Where people do not like what is on the menu, an alternative is offered. Where people wish to dine alone or eat in their rooms this is respected and facilitated by the staff.

The service has safe systems for medicines management. There is an appropriate medication policy and procedure in place with regular audits completed by senior staff. This consists of regular stock checks and monthly in-depth audits. Medication administration records are accurate and records of the disposal of medicines is completed. The audit process identifies mistakes and shows appropriate action taken. Staff who administer medication complete training and have competency reviews. The medication cabinets are secured in a locked room. As and when required medication is appropriately administered in line with instructions.

Environment

People live in an environment that meets their needs. Woodside House is a detached house located in a residential area of Baglan that has local amenities and transport links. The home is set over three levels and benefits from communal space that enables people to spend time alone or with the company of others if they prefer. There are enough bathrooms and toilets within the service which are clean and in working order, there is a kitchen with separate dining room and lounge. There is a large external garden area which is organised with seating and areas of interest but there are areas which are tired looking and need attention which was discussed with the manager.

The property is mostly well maintained, warm, welcoming, and clean. The property appeared clean throughout. There is a system of monitoring and auditing in place but this requires strengthening. We discussed with the manager the need to ensure that health and safety monitoring was strengthened and a programme for renewal and development of the property is put in place. People are cared for in bedrooms which are comfortable, decorated to their taste and contains personal items but some could be further personalised. People are free to access their rooms or communal space as they wish and are encouraged to make their bedrooms as personal as possible. Some bedrooms do not have privacy locks on the doors. We discussed this with the manager who agreed to address this immediately.

People can be assured they live in a safe environment. On arrival we found the main entrance secure, we were asked for identification and to sign the visitors book before being permitted entry to the home. The environment is homely and mostly clutter free with hazards reduced as far as possible. Harmful chemicals are locked away safely. Safety checks to the building include gas and electric and repairs are completed without delay. There is a fire safety risk assessment in place and all residents have a Personal Emergency Evacuation Plan (PEEP) which is important as this document guides staff on how to evacuate people in the event of an emergency.

Policy, procedure and application of hygienic practices are in place to reduce risks of infection. Staff demonstrate an understanding of infection control and the use of personal protective equipment (PPE). Staff wear appropriate PPE and follow correct procedures. The home is clean and tidy. Staff maintain appropriate standards of hygiene. Oversight and auditing of infection control measures are in place and the home has sufficient stock of PPE.

Leadership and Management

There are arrangements in place for the smooth running of the service. The manager is well regarded in the service and has support from the senior team. The manager is visible in the service daily. Care workers were complimentary of the manager and senior team. The manager completes regular walk arounds in the service and spot checks and there is effective communication with the RI. We viewed the statement of purpose (SOP), which accurately reflects the service and describes what support they can provide. We looked at a selection of policies and procedures and saw these are reviewed routinely and updated to reflect any changes in legislation.

Systems are in place to regularly check on the quality of care and support. People are asked their views in different ways including questionnaires, face to face visits and telephone calls. We saw the quarterly RI visit reports evidence feedback discussions with people. The quality of care review was also seen and meets legal requirements. Team meeting records include important information for staff. People are given information about the service which includes details of how to complain if they are not happy. Complaints to the service are taken seriously and dealt with effectively. Arrangements in place for auditing of care requires strengthening to ensure robust recording of care that is undertaken by staff. We discussed this with the manager who assured us this would be addressed immediately.

The service provider has oversight of the financial arrangements and investment in the service. The RI assured us the service is financially sustainable to support people to be safe and achieve their personal outcomes. The RI told us that *“Continuing investment is ongoing within the home, resident’s bedrooms are decorated on discharge and decorated prior to new admissions.”*

People are supported by care staff who are safely recruited, feel supported in their roles and receive training to ensure people’s needs can be met. Documentation to evidence safe recruitment was available, this includes identification checks, full employment history, reference checks and up to date Disclosure and Barring Service (DBS) checks. We saw a training matrix which shows staff are up to date with mandatory training. Staff records are up to date with supervision and appraisals. We spoke to care workers who are all happy in their work and were very complimentary of the support they receive and the training they have completed.

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	
21	People are not always supported to join in with community activities and to fulfil their potential and do things that matter to them and make them happy. Ensure individuals are supported to fulfil their potential and do things that matter to them and make them happy.	Achieved
35	Staff records were incomplete. Ensure there is a full record of the staff who are caring for people at all times.	Achieved
36	Not all staff receive core training appropriate to the work to be performed by them. Ensure staff receive training appropriate to the work performed by them.	Achieved

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