

# Inspection Report on

**Three Cliffs Care Home** 

Three Cliffs Care Home Penmaen Swansea SA3 2HQ

# **Date Inspection Completed**

26/11/2024



## **About Three Cliffs Care Home**

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Heart of Wales Care Ltd
Registered places	51
Language of the service	English
Previous Care Inspectorate Wales inspection	28 November 2023 & 30 November 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**

Three Cliffs is a vibrant home with a friendly atmosphere. People have developed strong bonds with care staff and enjoy socialising with others in a safe, comfortable environment. The home is clean and appropriately adapted and maintained. Indoor and outdoor areas are regularly upgraded and well-presented overall.

Personal plans are kept up to date and provide a detailed overview of who people are. Care staff provide people with timely support and complete care recordings to a consistently high standard. People's rights are promoted as care staff support them in the least restrictive way. They understand what is important to people and anticipate their needs and wishes well.

The home has a stable team of staff who are confidently led by senior nurses and a motivated manager. Staff receive the required training and support to undertake their roles effectively. Nurses and managers monitor and assess standards by carrying out formal and informal audits. The Responsible Individual (RI) oversees the running of the home to ensure people experience a quality service.

#### Well-being

People are treated with dignity and respect by a team of caring, passionate staff. A relative told us "I feel part of family there". Care staff value people as individuals and support them to do what makes them happy. The manager leads by example, placing people at the heart of decision-making. People and their representatives have influence over the service people receive, although their views could be better reflected within care records. The service follows Deprivation of Liberty Safeguards (DoLS) procedures to ensure people are not restricted without lawful authority.

The service promotes people's physical and mental well-being. People take part in various indoor and outdoor activities and enjoy regular interaction with others. One relative told us their loved one "seems really happy... much more sociable now". Care staff communicate effectively as a team and have access to up to date personal plans outlining how they can safely meet people's care needs and preferences. People receive appropriate support with their medication and care staff make prompt referrals if people need to access health services. Relatives told us they are satisfied with the quality of care and support people receive. Comments include "They're brilliant" and "I know he's safe there".

There are systems in place to help protect people from harm. The home is secure and properly maintained. It is fully staffed which allows people to experience good continuity of care. The service recruits and trains staff appropriately. One person told us "It's very safe here". Managers are open and responsive to feedback. A relative commented "All concerns I've had have been addressed". Managers report concerns regarding people's welfare and follow advice from the Local Authority safeguarding team and other professionals. There are effective systems of audit in place to help drive improvement, which the RI oversees.

The home has good facilities which cater for people's care and support needs. People relax and socialise with others in the various lounge and dining areas. The manager is committed to making best use of communal areas, so people can move freely and safely in a comfortable yet functional environment. Care staff monitor people's movements closely and discreetly. Recent environmental upgrades have been made, although people would benefit from additional sensory stimulation.

#### Care and Support

People receive a consistently good standard of care and support. Care staff are visible and attentive to people's physical and emotional needs. We saw care staff supporting people with kindness and sensitivity, acknowledging what mattered to them most. Their calm approach and effective support strategies have a positive impact on people's emotional well-being. People have formed friendships and enjoy spending time together doing things they enjoy. The service offers a minibus service to help families get to the home. Relatives told us care staff are considerate of their well-being and are caring and compassionate when interacting with people.

The administrator is working with care staff to organise and deliver a range of activities. The manager told us this temporary arrangement has helped strengthen teamwork and given people opportunities to enjoy meaningful activities at the best time; something the home hopes to continue with its long-term activity arrangements. Care staff support people to remain active by going for walks and completing games and exercises in-house. People have quality one-to-one time with staff and enjoy regular music-based activities.

Care staff support people in a way that encourages freedom of movement. We saw people moving freely between lounge areas under staff supervision. Care staff complete safeguarding and DoLS training and use the least restrictive options when supporting people. Bedrooms have safety locks that prevent others entering people's rooms whilst allowing easy exit. The manager oversees DoLS applications closely and works with people's representatives to ensure decisions are made in their best interests. We also found DoLS requirements to be accurately reflected within personal plans and supported by legal authorisations.

The service carefully assesses people's needs and develops comprehensive personal plans outlining how care staff can support people to achieve their goals. A staff member told us "We take time to get to know people and get as much information as possible". Personal plans are regularly reviewed, although the review process could be strengthened to better capture people's views and/or input from their representatives. Relatives told us they have opportunities to discuss people's care. One relative said, "I get phone calls regularly from staff". Care staff keep detailed recordings of the care and support they provide, which aligns with people's personal plans. Staff communicate well as a team. Care staff record any new health concerns in a diary for nursing staff to review and action. Records show that people consistently receive their prescribed medicines, which are stored safely.

#### **Environment**

People live in a safe environment. A keycode system prevents unauthorised access to the building and helps keep people safe as they move around. There are organised maintenance systems with clear lines of communication, so any repairs are logged and completed in good time. The service employs two maintenance officers to complete general repairs and upgrades plus routine health and safety checks. External contractors are used to complete specialist works. Recent upgrades include replacing the flooring and redecorating first floor hallways. We saw care staff using equipment to support people in a safe, calm and confident manner. Records confirm that specialist equipment is serviced and inspected within recommended timescales. The home has limited storage space, and some work is needed to ensure equipment is easily accessible and stored safely.

The home is clean and fresh with a current food hygiene rating of 5 (very good). We found private and communal rooms to be clean and hygienic. There is a designated outbuilding which has the required space and equipment to provide an efficient laundry service. Laundry staff follow a flow system to prevent cross contamination of clean and dirty items. There are plans to implement a dosing system as recommended by the water board to minimise legionella risks and prevent the temporary closure of bathroom facilities. There are also plans to convert two bathrooms into shower rooms, which the manager told us will better support people's needs and preferences.

The accommodation is furnished and decorated to a good overall standard. We observed people to be at ease in their surroundings. One person said, "It's nice and bright here – it has a very good ambience". The layout of communal rooms helps staff observe and support people as they go about their daily activity. Lounges are generally bright and spacious with views of the garden or seafront. Unused communal areas are currently being redesigned to maximise the space available to people. The environment includes some signs and colour contrasts to help people orientate to their surroundings. There is scope to increase stimulation and promote the Welsh language and culture further by creating distinct sensory areas and displays.

Care staff support people to spend time outdoors. For example, people who like to be active enjoy frequent walks along the coast. The home has an enclosed garden, which people used during their summer fete. A pub has been created in a separate building within the grounds, so people can meet for family parties and afternoon tea. The pub has been thoughtfully decorated and furnished in a traditional style.

#### **Leadership and Management**

The manager runs the home with the support of a well-respected deputy manager and clinical lead. The manager is passionate about trying new ways of working that will enhance people's experiences. Relatives and care staff have confidence in the nursing and management team. A relative said, "Senior nurses are fantastic – I know that they will support me". We found morale to be good as staff reported to feel valued in their roles. They said, "Every day is different... It's a nice place to work" and "It feels good to come to work every day to give someone hope and make them smile again". The home operates in line with its statement of purpose; a key document that explains what people can expect from the service.

The quality and safety of the service is monitored by the Head of Region and RI. A staff member told us the RI is "very helpful and involved and knows most of the staff". The RI completes meaningful assessments of the service, taking into account any complaints, the findings of internal audits and feedback from those living and working at the home. A staff member told us "Complaints and issues are dealt with promptly and fairly" and a relative said, "We have no complaints or concerns whatsoever". Families have opportunities to meet with managers and share their views about people's experiences during relative meetings.

The service operates with appropriate numbers of staff. The manager keeps staffing levels under review, taking into account the number and changing needs of people living in the home. Staff are allocated to work in designated areas, providing people with good continuity of care. One person told us "There are staff around and they are all very nice". Rotas show that planned staffing levels are consistently maintained. The service recruits and retains staff well as most staff have been in post for at least a year or more. Many staff have been employed via a sponsorship scheme and are supported to complete the required training and registration with Social Care Wales. The home offers a transport service to help staff travel to and from work.

The service vets, trains and supports staff appropriately. Staff records contain the required pre-employment information. The home's training programme includes courses relating to dementia, pressure ulcer prevention, moving and handling, infection control and health and safety. A staff member told us "The training is very good here". Staff consistently reported to be satisfied with their opportunities to learn and develop. Comments include "Managers help staff progress" and "If ever I need help to understand something they are more than happy to help". The RI monitors staff training statistics to ensure they remain consistently high. Staff receive formal, individual supervision every three months plus annual appraisals. These meetings allow staff to reflect on their performance and set and review learning and development goals.

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 inspection	N/A

31	Restrictive practices have been implemented without legal authorisation or evidence of best-interest decision-making.  The least restrictive options must be consistently promoted in the provision of care and support. Staff must understand their responsibilities under Deprivation of Liberty Safeguards (DoLS), ensuring the principles are reinforced in practice and accurately reflected in care documentation.	Achieved
44	Facilities are not available in accordance with the service's statement of purpose.  The provider must ensure the premises is suitably equipped and that individual rooms allow both privacy and freedom of movement. Suitable systems must be in place to ensure priority works are completed without delay.	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 <u>Feedback surveys</u> <u>page</u>.

**Date Published** 08/01/2025