



Inspection Report on

Pentre House

**Pentre Road
Pentre
CF41 7DJ**

Date Inspection Completed

02/12/2024

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About Pentre House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rhondda Cynon Taff County Borough Council Adults and Children's Services
Registered places	29
Language of the service	English
Previous Care Inspectorate Wales inspection	16 November 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 receive excellent care and support at Pentre House, helping them to experience extremely positive well-being. The service takes very good measures to help people make their own choices and have control over their day to day lives. People get the right support at the right time, helping them stay as healthy as possible. Systems are in place to protect people from abuse and neglect. People have good care documentation to support staff to meet their needs. The service offers a balanced diet and varied menu. Infection control measures help manage and reduce the risk of transmission of potential sources of infection. The management and storage of medication is safe and thorough. People live in an excellent environment which supports them to meet their needs and enhances their well-being. The service takes the correct measures to ensure the home environment is as safe as possible. The service is very well-managed, benefiting from a strong and dedicated management team who lead by example. Care staff are recruited safely, are appropriately trained, and are generally positive about the service and service manager. The service provides the required information to the public.

Well-being

People experience extremely positive well-being at Pentre House. The service takes very good measures to support people to make their own choices and have control over their day to day lives. People are consulted with regularly through resident meetings, being supported to complete pre-meeting questionnaires to ensure all views are gathered. People take part in interview panels for new staff, which is extremely innovative and enables the service to have people's views when deciding on new staff. Where people have difficulties making their own decisions, the service works closely with families, and professionals where relevant, to ensure decisions are made in people's best interests. Deprivation of Liberty Safeguard (DoLS) applications are made where people lack mental capacity to make decisions about their care and accommodation. The service has excellent relationships with relatives more generally, keeping them informed, updated, and involved in their relatives' care. Friends and relatives can visit when they wish and tell us they are made to feel extremely welcome.

People get the right support at the right time, helping them to stay as healthy as possible. Issues with people's health and well-being are reported and referred to the relevant health professionals in a timely manner, with records showing the service following relevant guidance. Personal plans are very detailed and kept under review. People receive their prescribed medication as directed. Meal options are balanced, and dietary needs are understood. Infection prevention and control measures help reduce the risk of the spread of potential infections.

People live in an environment which significantly enhances their well-being. Pentre House is a purpose-built home over three floors catering for older people and their associated needs. An ongoing programme of refurbishment is being completed to a very high standard. Bedrooms are comfortable and personalised. There are a number of communal areas for people to use, with a garden patio to the front of the building. Mobility aids and adapted equipment are in place to help people where needed. The home is clean and well-maintained.

Systems are in place to help protect people from abuse and neglect. Staff know their safeguarding responsibilities and how to report issues if needed. Staff tell us if they were to raise an issue with the management team, they are confident it will be responded to. Recruitment meets regulatory requirements, with regular staff supervision and training supporting continued development. Incidents and accidents are logged, with records showing actions taken by the service. Access to the service is restricted to authorised individuals. People's families told us they feel people are safe there. Quality assurance audits ensure systems remain effective and improvements are identified and addressed.

Care and Support

People receive excellent care and support at Pentre House. We saw people were very relaxed in their environment, with care staff being calm and respectful in their interactions and spending quality time with them. Care staff know the people they support very well and told us information about their needs, which corresponded with people's care files. People appear well presented and well cared for. People and their families were extremely positive about the service, telling us *"it's nice living here – the staff are great"*, *"oh yes, I feel very safe here"*, *"I get everything I need – if you want something, they'll get it"*, *"it's absolutely wonderful"*, *"they're really proactive – everything gets sorted"* and *"the staff are fantastic – they're always checking they're ok"*. Visiting professionals told us *"they keep you updated"* and *"they're respectful of people"*.

People have good care documentation to support staff to meet their needs. The service assesses a range of information before people move in. Personal plans are person-centred, outcome-focused, and contain detailed information about the type of care and support people need and how they like to be supported. Accompanying risk assessments are in place where needed. Plans are reviewed regularly and updated following any significant occurrences or changes in need. They are reviewed with people and their representatives. This is an improvement acted upon since the last inspection. Daily recordings and supplementary monitoring charts detail people's progress and help evidence changes in care needs.

The service offers a balanced diet and varied menu. Kitchen staff work with care staff to ensure people's dietary needs are met. A variety of food options are provided, and people can request alternatives. Food appears appetising and portion sizes appropriate. People have drinks to help keep them hydrated throughout the day and are supported at mealtimes when required.

Infection control measures help manage and reduce the risk of transmission of potential sources of infection. Staff are aware of and understand their responsibilities, with access to a supply of appropriate personal protective equipment (PPE). Domestic staff complete daily cleaning schedules, including deep cleaning of rooms. Laundry routines help reduce the risk of infection. Appropriate clinical waste facilities are in place throughout the service.

The management and storage of medication is safe and thorough. Medication is stored securely and can only be accessed by authorised staff. Trained care staff administer medication as prescribed, with records reflective of this. A medication policy is in place. Medication is audited routinely to ensure stocks are correct and to identify any issues.

Environment

People live in an excellent environment which supports them to meet their needs and enhances their well-being. Pentre House is a three-story building, located centrally in the village of Pentre. The service is extremely well-presented. An ongoing schedule of refurbishment has been completed to a very high standard. While not all areas have been refurbished as yet, those that have significantly enhance the service from its original design and give people an outstanding environment to live in. The service is extremely creative and innovative in its choice of décor, with people being closely involved in choices made. The service is clean and tidy, with no evidence of unmanaged malodours. The main entrance is secure from unauthorised access, with visitors required to sign in before entry and upon leaving. A stairlift and lift are in place for access between levels. Bedrooms are a good size, many with ensuite toilet facilities. Rooms are personalised to people's preferences and, where people have made choices around the décor of the room, have been decorated to a very high standard. The service has three lounge areas, where people can choose to spend their time, as well as a visitors' lounge – these are comfortable, spacious and tidy. There are sufficient toileting and bathing facilities. A large dining area is located next to the kitchen, where people have meals. The kitchen facilities are appropriate for the home and achieved a Food Hygiene Rating of 5, which means they are 'very good'. A patioed garden area is located to the front of the home with seating available. The inspection visit took place prior to Christmas – the quality and presentation of Christmas decorations were exceptional and extremely professional.

The service takes the correct measures to ensure the home environment is as safe as possible. Fire exits are clear of clutter and obstructions. There are no obvious trip hazards. Daily cleaning and laundry duties are maintained. There are fitted window restrictors in all bedrooms and bathrooms viewed. Hazardous substances are stored in locked cupboards. Maintenance of the service is managed by a maintenance person and the Local Authority's Corporate Estates team. Maintenance records confirm the routine completion of utilities testing, such as electrical items, gas and water facilities. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal evacuation plans are in place and are accessible in the event of an emergency.

Leadership and Management

The service is very well-managed, benefiting from a strong and dedicated management team who lead by example. Governance, auditing and quality assurance arrangements support the smooth running of the service. These processes are used to self-evaluate and identify where improvements are needed. The Responsible Individual (RI) maintains oversight of the service, undertaking the legally required three-monthly service visits to meet with people and staff, and completing six-monthly quality of care reviews to assess the service and identify required improvements. The service is open and transparent, making the legally required notifications to Care Inspectorate Wales (CIW). Policies and procedures provide guidance to care staff around their roles and responsibilities. Care staff understand their roles around key areas of care, such as safeguarding and infection prevention and control. The service gathers the views of people and their representatives to help inform the running of the service.

Care staff are recruited safely and are appropriately trained. The Local Authority's Human Resources department ensures all required regulatory checks are in place before new care staff begin work. Staff files show the correct recruitment arrangements are followed and contain all legally required information, such as proof of identity and employment references. Disclosure and Barring Service checks are undertaken. Care staff are registered with the workforce regulator, Social Care Wales. New staff complete an induction and a probation period to ensure their performance is satisfactory. Training records show staff have up to date training in core areas of care. Staff told us they feel well trained and can perform their duties safely and effectively.

Care staff are generally positive about the service and feel supported by the service manager. They told us "*I love my job*", the "*managers are great*", "*I've worked in other homes, but this is the best*", and "*I love it here*". Many of the staff team have been in post for some time, helping facilitate continuity of care and consistent support. The service has been able to successfully recruit new staff and lessen its reliance on agency staff over the last year. Care staff have regular supervision and a yearly appraisal, which supports their performance and professional development. Staffing levels are worked out based on the level of need of people, with the rota showing target staffing levels being achieved.

The service provides the required information to the public. The Statement of Purpose sets out the service's aims, values, and how it delivers support. A written guide contains practical information about the service and the care provided. Information about the Local Authority's complaints process is available if needed.

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	
16	Reviews of personal plans do not include a review of the extent to which the individual has been able to achieve their personal outcomes.	Achieved

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