

Inspection Report on

Parklands

Parklands Care Home Newport Road Bedwas Caerphilly CF83 8AA

Date Inspection Completed

14/11/2023

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About Parklands

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	HC One Limited
Registered places	38
Language of the service	English
Previous Care Inspectorate Wales inspection	[24 January 2022]
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies, and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are happy with the care and support they receive at Parklands Care Home; we saw people actively engaged in a range of activities that had been developed to meet the needs of people in the home. People have positive relationships with their care staff and speak warmly about living in the home. We saw people were attended to quickly, with warmth and respect. Care staff provided positive reassurance and interaction throughout our inspection visit.

People's wellbeing is considered when planning updates and maintenance of the environment. People enjoy personalised private spaces and benefit from comfortable communal spaces. There is a Welsh Corner in the communal lounge which provides opportunity for people to interact and engage with the Welsh language, and people speak positively about this.

The service benefits from the day to day management of the manager and deputy, and there are clear procedures and policies in place to support the oversight and governance of the home. Care staff hold the manager in high regard and told us they are supported in their roles.

Well-being

People can access the right information, when they need it, in the way they want it and use this to manage and improve their well-being. People contribute to the decisions that affect their lives or have representatives that can do this for them. People's representatives speak highly of the home and people's quality of life. We found that people were consulted on a range of topics to ensure that the opportunities provided for recreation in the home matched people's interests. We saw people being consulted about the home, the environment, and their activities. The service ensures that feedback shared is considered by the leadership and management, and acted upon

People are treated with dignity and respect and treat others the same; care staff provide reassurance and care in a dignified and sensitive way. People's individual circumstances are considered; preferences for décor in bedrooms were considered through the home's Sunshine Scale to ensure that people's private space is comfortable to each person. The communal spaces are busy and provide lots of opportunities for people to socialise. We saw people enjoying a show and tell session where they were encouraged to bring an item to the group and explain its importance. People's cognitive abilities were fully considered as part of this activity, and the wellbeing co-ordinator ensured high levels of sensory feedback and facilitation throughout to ensure that all people had the opportunity to engage.

The wellbeing co-ordinator has a focus on people's physical and mental health, as well as their emotional well-being. We saw people taking part in several activities throughout the inspection, which included movement, music, discussion, and touch. People speak highly of the activities the wellbeing co-ordinator has planned. Some people told us about the activities committee they are a part of, to help ensure that the planned activities suit people's interests. People are encouraged to remain as healthy and active as they can. We saw some people had clear social roles within the home, such as the activities committee, or dignity in dining champions who ensure that mealtimes are a positive experience and provide feedback to the management to support those who can't feedback as readily.

People are protected from abuse and neglect; the home has robust policies and procedures to endure people are safeguarded, and these are monitored and reviewed by the management. We heard people expressing their wants and needs throughout the inspection visit; care staff and management responded quickly to address any issues and provide reassurance.

Care and Support

People benefit from the care and support they receive. Care staff and people are familiar, and we saw people enjoying spending time in the company of the care staff and reassured by their presence. Care staff are warm, caring, and empathetic, and provide care and support to people in a timely manner.

People have personal plans to ensure that care staff have the correct information and guidance to provide care and support in a way that works for the person. People are involved in the development of the personal plans through initial assessments and ongoing reviews. People's wellbeing outcomes are considered as part of the assessment and planning process, and there is evidence of review to show how the service is supporting people to achieve their wellbeing outcomes. We found that although all information in the personal plans sampled was relevant, there were some instances of repetition and in some plans people's rich social histories had been missed or were difficult to find due to the layout of the paperwork. The responsible individual (RI) is addressing this and the service is implementing updated paperwork to ensure that people's preferences, social histories, and wants and aspirations are centre to the personal plans. We look forward to seeing these updates at our next inspection.

Risks and specialist needs are considered in the assessment and planning process, we saw that people's ongoing health and wellbeing needs are considered and monitored to ensure that they maintain a good quality of life. Nursing staff and care staff work to ensure that people's personal plans are updated as a result of reviews. People are supported to be as independent as possible. Where people are unable to keep themselves safe, the necessary procedures are followed. Appropriate arrangements are in place with the Local Authority to ensure decisions are made in people's best interests, when required. The management ensures that people's physical, mental, and emotional health and wellbeing are monitored and that action is taken when risks are identified. There are clear processes in place to enable the nursing staff to have clear oversight of specific health risks such as wound and pressure care, as well as falls. The manager ensures that all accidents and incidents are recorded, reviewed, and monitored to ensure people's safety. The service promotes hygienic practices and effectively manage infection and control procedures, and there is a clear system in place to ensure the safe handling and storage of medicines.

Environment

The home consists of two floors, with space for residential and nursing care to be provided. People have personalised bedrooms where preferences on colour and décor are identified using the Sunshine Scale, which is a tool developed by the provider to identify people's preferences and needs. We saw people had decorated their bedrooms with their photographs, and trinkets which are important to them. The management of the home listen to people's feedback and ensure action is taken when needed. We were told about windows and doors being replaced and updated in the lounge and conservatory after people told the RI about draughts.

The home has a large communal area for the dining room and lounge, which is enhanced by additional seating in a conservatory; this is also due to be updated. The space is light and clean and has ample seating for people to sit together socially and with family or representatives. People benefit from specialist seating to support their health needs, and these are being upgraded. The communal seating area overlooks a spacious garden with ample seating for people to enjoy outdoor space when the weather permits. There is a Welsh Corner with reading resources and imagery to support people to access and enjoy the Welsh Language within the home.

There are communal bathrooms, toilets, and showers for people to use, and two bedrooms benefit from en-suite facilities. Housekeeping staff ensure that the communal and private spaces are clean and clear of clutter; the management is working with the housekeeping team to ensure that shift patterns further support the cleanliness of the home and are making change rotas are updated to reflect the needs of the home. Although clean and bright, the communal spaces are similar colours, with little to no variation which could make it difficult for people to differentiate spaces. The RI and management are seeking to adapt the spaces to enhance their visual impact and make it easier for people to navigate the space. We look forward to seeing these updates at the next inspection.

The environment is safe for people using the service; the manager ensure that all health and safety checks are completed in line with recommended timelines. There are clear policies and processes in place to support the management of the environment and equipment being used. The service has a very good (five star) rating with the Food Standards Agency, kitchen staff ensure that people receive high quality meals, prepared safely.

Leadership and Management

There are clear oversight and governance arrangements in place to support the smooth running of the service. The RI completes regulatory visits to the home and reports on their findings, including ensuring feedback from people, staff, and families/ representatives. The RI produces quality of care reports which highlight identified patterns and trends and provide analysis of these. We saw that trends highlighted are discussed with management, and appropriate action is taken as a result of this. This process is supported by the daily oversight of the home by the management team.

There are enough care staff and nursing staff on duty to support people effectively. We saw that rotas accurately reflect people's level of need and are displayed in the home as well as electronically to ensure all staff have up to date information about their working patterns. Care staff are suitably recruited, trained, and supported to carry out their duties. The service follows safe recruitment processes in line with the regulations. We identified some minor gaps in care staff disclosing previous employment in health and social care settings, however these were addressed immediately by the administrative team, and more robust systems were implemented as a result of this.

The service has a number of qualified and trained staff, and care staff speak highly about their opportunities for learning and development within the organisation. We saw high percentages of training compliance, as well as systems to monitor and plan learning and development opportunities for care staff. Care staff and nurses receive regular support and supervision sessions to enable them to reflect on practice and discuss any areas for development as well as achievements. The support and supervision paperwork we sampled show that staff across the team are supported to reflect, and that support for staff wellbeing is considered by the manager. Care staff speak highly of the manager and deputy manager, and the impact they have on the running of the home, as well as staff and people's wellbeing.

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

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Date Published 06/12/2023