



Inspection Report on

The Haven

**31 Haven Road
Haverfordwest
SA61 1DU**

Date Inspection Completed

13/02/2025

About The Haven

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	14
Language of the service	English
Previous Care Inspectorate Wales inspection	4/9/23
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People living in The Haven appear happy and fulfilled. They speak highly of care staff and the support they provide. The service is currently waiting to recruit a manager and the RI (Responsible Individual) is providing regular support, together with another manager from within the service. The RI oversees the running of the home and is committed to making changes that will improve people's experiences. The home is clean and spacious and has facilities that promote independent living.

Care staff respect people for who they are. People are content in their home, where they are fully involved in planning and reviewing their care. The service has a good relationship with professionals and regularly updates them about people's progress. Care staff actively promote people's mental and physical health. They support people to follow their own interests and develop their daily living skills. People are encouraged to share their views about the service.

There is a strong sense of teamwork amongst staff, who are committed to achieving the best possible outcomes for people. Staffing levels are kept under review to ensure they remain appropriate. Care staff are suitably recruited and trained. They are familiar with the home's policies and procedures and can access these easily. Written information about the home and its services is available.

Well-being

The Haven promotes people's health and well-being. Care staff have good knowledge and understanding of people's individual needs and are committed to supporting people to achieve their own goals. The service carries out assessments to ensure the home is suitable before people move in. People's individual needs are outlined within detailed risk assessments and personal plans. Care staff support and encourage people to lead a healthy, active lifestyle. They ensure people have access to the medical and specialist services they need. People receive the right level of support with their medication. They have opportunities to develop their independence and take part in individual and group activities. People are also supported to maintain important relationships.

People are consulted during the development and review of their personal plans. This allows them to have choice and control over the care and support they receive. Personal plans account for people's care preferences and routines. The service follows Deprivation of Liberty Safeguards (DoLS) procedures to ensure any restrictions people face are lawful. Care workers treat people as individuals and support them to do as much for themselves as possible. People are encouraged to speak up about their experiences during regular house meetings. Their views are also sought during the service's quality assurance processes. People have ready access to documentation about the home.

The service has systems to help protect people from harm and abuse. There are clear policies and procedures to support safe practice. Care staff are familiar with the home's safeguarding policy. Staffing levels are reviewed and adjusted when needed, to ensure people receive the right level of care and support. Staff are safely recruited and provided with a good range of training to support them in their roles. They have opportunities to discuss any incidents or concerns during staff meetings or their formal, individual supervision. The RI is open and responsive to feedback.

People live in clean, spacious accommodation which is maintained to a high standard. The service promotes a good standard of hygiene and infection control. People have opportunities to relax or socialise with others in communal rooms. The home has a large garden where people can enjoy spending time if they wish. There are good facilities to support people's independence with daily living tasks. The service manages environmental risks well and furniture and furnishings are of a good standard. Regular health and safety checks are carried out. The RI monitors the environment during formal visits.

Care and Support

People receive a good standard of care and support. The service assesses people's needs before they move into the home and involves people in planning and reviewing their care. We found risk assessments and personal plans to include clear information about people's backgrounds, the goals they would like to achieve and the strategies for supporting them. People's care and support arrangements are reviewed regularly. The service shares detailed reports of people's activity and progress with key professionals. People consistently told us they receive good support from care workers. Care staff are clear about how to manage risks and deal with incidents. We saw policies and support plans to guide them with this. Care staff spoke enthusiastically about the achievements people have made.

The service encourages people to lead an active, healthy lifestyle. Care staff support people to attend routine health appointments. Records also confirm that prompt referrals are made to medical and specialist services when there are concerns about people's health or well-being. People receive appropriate support with their medication, which is audited regularly and stored safely. Care staff support people to maintain a healthy diet and to exercise regularly. Strategies are discussed during staff meetings to ensure care staff use those that are most effective. People are encouraged to go out for walks and take part in other types of physical activity, such as swimming and bowling. Care staff support people to plan a healthy menu each week. We observed good stocks of food, including healthy snacks, such as fresh fruit.

People follow weekly planners which support them to develop their skills and do things they enjoy. They vary in structure depending on people's individual needs and wishes. People socialise with one another during regular group activities, which include art and craft sessions and movie nights.

Environment

People live in spacious accommodation that has the facilities to meet their needs. The Haven can accommodate up to fourteen people and is set over two houses and two bungalows located on the same site. All areas are accessible and well maintained and decorated. The design and layout of people's rooms reflect their individual tastes. Communal rooms are well furnished and comfortable, offering a welcoming space for people to relax and socialise in if they wish to. People living in both houses and the bungalows can easily socialise with one another and take part in any activities which are taking place. We saw leisure items in communal rooms for people to use as they wish, such as PlayStations and music centres. People freely access the kitchens and laundry rooms with staff support and following risk assessment. People can enjoy spending time in the large garden if they wish. People are kept as safe as is possible and the service has measures in place to reduce health and safety risks. Access to the service is restricted by locked gates, opened with permission via an intercom system. People can leave the home freely however, following appropriate risk assessment. Visitors to the home ring the bell and are invited into the home. They are also requested to sign the visitors' book on entry and exit. Environmental records show that gas and electrical systems have recently been inspected and deemed satisfactory. Fire safety equipment has been serviced within the last year and personal emergency evacuation plans are available. Any matters requiring maintenance attention are rectified quickly. We saw that chemicals are stored securely and access to rooms containing hazards is restricted. The RI reviews the premises during formal visits to the service and ensures any planned works are completed. Records show that staff complete training in relation to health and safety.

Leadership and Management

Good governance arrangements are in place to ensure the smooth running of the home. People are familiar with the RI and appear very comfortable sharing their thoughts and feelings. The RI assesses standards on a formal and informal basis; this involves speaking with people about the service they receive and analysing records and data. The RI produces reports about the home's performance following three-monthly formal visits and six-monthly quality of care reviews. Actions for improvement are also set and reviewed. The feedback gathered indicates that people have fulfilling experiences.

The service has an up-to-date statement of purpose that outlines its aims and objectives and explains how these will be achieved. We found this document to accurately reflect the service being provided and outcomes being achieved for those living in the home. The provider has invested in the service, ensuring the necessary resources are available for it to run smoothly.

The home has a stable team of staff. This means people consistently receive support from care staff they are familiar with. Records show that staff undergo the required pre-employment checks, including a criminal check via the Disclosure and Barring Service (DBS). Care staff told us they feel part of a motivated team that has an appropriate mix of skills and experience. Staff told us that they have had opportunities to develop, taking on new responsibilities and progressing to more senior positions.

Staff told us they enjoy their jobs and find them rewarding. They receive all mandatory training in addition to a range of training in specific areas, such as positive behaviour management (PBM) and management of epilepsy to effectively meet people's individual needs. Care staff told us they feel they are adequately trained and supported to carry out their roles to the best of their ability. Care staff receive regular formal supervision, at least every three months, and told us that opportunities for informal support are readily available from the RI, senior staff and their colleagues. Care staff told us they know how to report concerns about people's welfare and believe these would be acted upon promptly. The service has a clear, up-to-date, safeguarding policy.

Staffing rotas demonstrate that sufficient staff are on duty to meet the needs of people using the service. This helps ensure people receive the right level of support from appropriate numbers of staff. We found that staff are recruited in a safe way. Staff records contain the required pre-employment information, including Disclosure and Barring Service (DBS) details.

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	
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