



Inspection Report on

Reene House

**Reene House
Reene Court
Lliswerry
Newport
NP19 0RJ**

Date Inspection Completed

08/10/2024

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About Reese House

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Elysium Healthcare No. 3 Limited
Registered places	16
Language of the service	English
Previous Care Inspectorate Wales inspection	10 October 2023
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 are supported to achieve their chosen well-being outcomes at the service. Plans and approaches are reviewed frequently alongside people and those important to them, to ensure they are fit for purpose. Where changes are necessary to support people's emotional, physical, and mental well-being, the manager and wider staff team take timely and effective action.

Staff at the service hold people in high regard and speak passionately about seeing people achieve good well-being. People are treated with dignity and respect, and their opinions are considered and valued by the staff in the service.

The service is well presented and provides a warm and pleasant atmosphere for people to spend their day. People are able to visit the local area to engage in hobbies and interests and are supported to do this in line with their preferences.

There is good oversight of the service by the manager and lead nurse. Information gathered at the service is frequently reviewed and analysed, and action is taken to address any areas of need, or to build on areas of strength. People and staff told us they are supported well by the manager. Their new Responsible Individual (RI) has recently undertaken visits to the service.

Well-being

People know and understand what care, support and opportunities are available to them in the service. They are consistently consulted about their care and support and contribute to the decisions affecting their lives. Resident meetings take place frequently enabling people to share their opinions and thoughts on the running of the service. People are informed about changes in leadership and opportunities to get involved with activities and events in the wider provider group. Meeting minutes are kept in the lounge with easy access for people to read at their leisure. The service ensures information about services to support and enhance people's well-being is readily available so people can access the right information when they need it and use this to manage and improve their well-being. People are protected from harm and abuse. The home has a clear policy for safeguarding people, in line with current legislation and best practice. We saw posters and contact information for people to raise concerns or make complaints, as well as information and contact details for independent advocates. The manager works collaboratively with people's advocates to improve their quality of life and takes action when needed.

The service focuses on supporting people's physical, mental, and emotional well-being. People have access to the right care and support as early as possible. The service's nursing staff support people to remain healthy, and take action when people need to ensure people have access to the right support from the right professionals. There are strong links with wider services such as the local authority and local health board, who are complimentary about the standards of care and support in the service. The service supports people to manage their medication, and when appropriate, enables people to manage this for themselves. There is a robust structure in place to support the oversight and governance of medication, which is managed by the nursing team who receives competency training in this area.

People do the things that make them happy. We spoke to people who told us they feel well looked after in the service. One person told us about their role as representative for the service, and the meetings they attend with the wider provider group. The representative role enables people to share their views about the service, and any changes they feel would improve service delivery and support their well-being.

Care and Support

People told us they are happy and feel safe and well cared for. One person told us “*Staff are so caring.*” Staff and resident engagement is positive, and supportive. People are confident to approach staff to ask for support when they need it, and staff respond with kindness and respect. There is a new activity co-ordinator in post since the last inspection. They work collaboratively with people to plan and design activities to meet people’s hobbies and interests. We saw a notice board to inform people of the up and coming visiting entertainers, including Tina Turner and Elvis impersonators. There is good variety in the activities scheduled, including pamper sessions, and sessions to support people to develop their skills. People speak highly about the activities on offer and engage as and when they choose. Some people told us the service would benefit from increased numbers of drivers to support them in the community. The manager has taken this feedback on board and has already increased the number of staff who drive and continues to recruit for this. We saw people frequently do the things that matter to them and are supported to develop in a multitude of areas. The staff team celebrate each person’s success, understands the effort, and time it takes to improve and support people’s well-being and quality of life. One person told us about their role to oversee the service’s recycling, an area that is important to them, and which helps them feel valued for supporting the environment and contributing to their community.

People are supported to plan and contribute to their own care and support. Personal plans are developed alongside people and reviewed frequently by nursing staff. 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. People’s feedback on their progress and future plans are captured to help guide support staff in how best to care for them. Plans identify people’s needs as well as areas of strength, and provide clear, person centred context to enable staff to understand people’s needs, and perspectives. This helps staff to foster understanding and supportive relationships with people in the service. We observed very good rapport and relationships throughout our visit.

Environment

There is a positive and welcoming atmosphere in the service. People live in a home that best supports them to achieve good well-being. One person described the service as “*Second to none*.” The environment is clean and clear, providing plenty of communal space for people to spend time socialising, or engaging in activities at their leisure. Signage within the environment is bilingual. Since the last inspection, the dining area has moved to the conservatory overlooking the garden, and the previous area has made space for joint activities. The garden is spacious, offering plenty of seating areas for the warmer months, as well as a smoking shed. People use the garden area at their leisure. The lounge area has been decorated for Halloween, which people told they were pleased with. We saw people’s arts, crafts and photos displayed, as well as poetry written. People appear at ease in the environment and can move around the service freely.

Bedrooms are spacious, offering a welcoming and safe space for people to spend time as they choose. Bedrooms are equipped with ensuite bathrooms and decorated and organised in line with people’s tastes. People are supported to maintain their private bedrooms and encouraged to participate in housekeeping in these areas.

The service has employed a skilled and qualified staff member to oversee the daily maintenance of the service, enabling them to take timely action as when issues arise. There are frequent checks and audits of the environment to ensure it is safe and suitable for people’s needs. There is an ongoing schedule for maintenance work as well as decorating and updating facilities such as the boiler and laundry room. The service is routinely inspected by external professionals to ensure all utilities are safe and compliant with current legislation and best practice.

People’s safety and security are a priority in the service. There are CCTV cameras in the communal areas which are clearly signposted and outlined in the service policies and procedures. There is a locked door policy in the home to ensure nobody enters the service without permission. However, people can leave the service with or without support depending on their needs, and some people have their own fobs for the front door. There are robust risk assessments in place to support people to in this area.

Leadership and Management

People experience good health and well-being outcomes as a result of the leadership and management in the service. The manager carries out regular reviews and audits within the service to ensure processes are suitable and supportive of people's well-being. There are governance arrangements in place to support the smooth running of the service. A handover took place between the previous and new RI for the service to ensure continued effective oversight and governance. There have been visits to the service by the RI to seek feedback from people, their representatives, and the staff. There is oversight of the delivery of the standard of care and support, as well as the environment. The manager is well supported in their role and receives supervision from senior management within the provider group. There are effective structures in place to ensure the service is delivered to a high standard, and action is taken to address any areas of need.

There are enough staff on duty to support people effectively. We saw staff respond to people's requests and undertake all required duties during our inspection. Staff receive frequent support and supervision, and feel they are able to approach the manager when needed. We spoke to several staff who spoke highly about their roles, the service, and the management team. A staff member told us *"I love it here."*

Staff are suitably recruited, trained, and supported to carry out their duties. We observed highly skilled staff supporting people with warmth and respect. The service has high levels of compliance with training, and a report is prepared each month to highlight any areas of need. Staff receive support and opportunities to develop within the service. Supervision paperwork evidences opportunities for staff to discuss their development, with comments on competency and confidence from line managers in place. The manager has a strong focus on staff well-being as this has a direct impact to the quality of care and support provided. The service involves people in identifying staff for awards each month based on their training, actions, and work within the service. The manager has recently nominated staff for a wider award for their practice to celebrate their achievements in supporting a person to socialise within the service. The service follows safe recruitment practices, with staff supported to register with their relevant professional bodies such as Social Care Wales the workforce regulator, as well as the Nursing and Midwifery Council.

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

35	Must ensure that all required records are kept for staff employed at the service.	Achieved
15	The service provider must prepare a plan for the individual which sets out how on a day to day basis the individual's care and support needs will be met.	Achieved
36	The service provider must ensure that any person working at the service receives appropriate supervision and appraisal.	Achieved

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