



Inspection Report on

Woodcroft

**Woodcroft Care Home
Abergele Road
Rumney
Cardiff
CF3 1RS**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

14 March 2022

Welsh Government © Crown copyright 2022.

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.*

About Woodcroft

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Hafod Housing Association Ltd
Registered places	60
Language of the service	Both
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since registration under the Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Woodcroft provides a warm and welcoming environment where people are happy and able to lead fulfilled lives. Care and support is provided by a well-trained, compassionate staff team. People's health is monitored and support is provided to improve this where possible. Activities and engagement is a focus within the service, providing opportunities and stimulation.

Policies, procedures, documentation and systems are in place to evidence the home is run smoothly, considering the safety of people and visitors. The day-to-day running of the home is the responsibility of the manager who is enthusiastic, experienced and well regarded.

The service provider has an interim responsible individual (RI) who has been nominated to have oversight of the service and evidence 'quality of care' provision. They have undertaken their duties with due diligence while the service provider recruits a person to appoint as the RI on a permanent basis.

Well-being

People have control of their day-to-day life and are encouraged by the care staff to make choices and remain as independent as possible. Outcomes for people are good, both on a health level and social level. Families and people themselves are complimentary about the service and tell us how the service has made a positive difference to them, in one case, supporting a person who was considered end of life to improve, thrive and gain independence in order to move back to their own home. Where people lack capacity, advocates or family representatives are consulted to help make decisions; this is mostly around more complex decision making. We observed people having support from patient staff to make daily choices around care and activities.

Residents meetings, surveys, reviews and engagement with the manager and RI allow people and their families opportunities to give feedback on the quality of the care and service. When things need addressing, this is done in line with clear procedures. People contribute to their care planning and are routinely involved in reviews, especially when changes in care needs occur.

Activities are provided that encourage engagement of residents, but people can choose not to take part. The environment is considered to support good interaction, stimulation and activity. People enjoy the freedom to move around the area where they live, using various seating areas, small kitchens, sensory rooms and communal spaces as well as outdoor space. We saw people engaged in meaningful activities and appearing very happy.

The safety of the environment is routinely monitored and maintained, with immediate action taken if issues are identified. Care workers and support staff receive appropriate training around keeping people safe, and know how to raise concerns if they believe a vulnerable person is at risk. Entry to the home is monitored. Each floor presents as a small care home, with additional security measures taken to allow entry and exit of the living area. Hygiene standards are maintained, kitchens are clean and safe, and food is produced and stored to meet the 'Food Standard Agency' requirements. People who need support with finances are protected from abuse due to procedures and audited recording in place.

Care and Support

People living at Woodcroft comment on the care workers and the support they receive very positively. Relatives who visit comment on the warm welcome they receive and tell us they are kept informed. We were told “*staff are kind,*” “*they’re good here,*” and one family member told us “*they saved my mum’s life.*” Carers are observed engaging with people with warmth and understanding. People, including those who lack capacity, are monitored, encouraged and helped to participate in activities. Details such as helping someone to take food into the garden to feed the birds, providing a gentle neck rub or helping someone find their misplaced phone show the genuine care provided. Care workers are patient. There is a relaxed atmosphere and people are seen to be calm and smiling.

Detailed assessments of people’s needs take place, including the person’s preferred language to communicate. This information, and that provided by the local authority care plans, form the basis of care plans in the home. People or their families are consulted to ensure as much information is gathered as possible so care staff can be informed of how best to support a person. People’s wishes, including their preferences about end of life care, are recorded. Risk assessments are in place to support people to be as independent as possible. Care plans are reviewed regularly, involving the person or their representative.

Daily records are detailed, including an at-a-glance tick form to show if people have received appropriate care, identifying any tasks people have been able to do independently. These document that care is provided in accordance with the care plan but lack some consistency around the recording of outcomes. Records and charts are maintained around people’s dietary needs, including weight and toileting records. Alternative methods of monitoring a person’s weight are being explored for one person who is cared for in bed. People have good dining experiences to promote healthy diet intake. On the day of inspection we observed people sat at nicely laid dining tables with a suitable atmosphere provided through background music. Care workers supported good communication and provided sensitive support for those who needed this to eat. Hot, home cooked food was served to people, providing appropriate portions. Condiments and drinks were available. The cook is involved in residents’ meetings so people can influence the menu and give feedback on the quality of food.

Medication records viewed are accurate. Medication stock control, storage and administration is safe. People receive support from health professionals as required, with care taken by the service to make appropriate referrals. People who lack capacity are referred to the Deprivation of Liberty Safeguard services in the local authority to ensure they have appropriate representation.

Environment

The reception to the home is welcoming with a coffee area that people and their families tell us they enjoy using. They also appreciate the refreshment facilities in this area. Other small kitchens throughout the home allow people and their visitors to access refreshments. Corridors have a variety of points of interest and seating areas, and are wide to support people to easily move around the home. The home has a 'Pub' where people can have a drink and book a meal so visitors can meet with their relatives to enjoy shared time. Relatives tell us this is very good. Care staff tell us they see residents who lack capacity benefit from visits to the home's 'Pub' as they don't get as anxious as when they go into the community. A well-equipped sensory room is available to support people allowing quiet, relaxed time to maintain and improve well-being. The home provides accommodation over three floors, each floor having a secure entry system to keep people safe.

Routine testing and maintenance of the environment and equipment takes place. Audits, detailed records and certificates show careful consideration of people's safety. Fire safety measures are taken, including training of staff, drills and equipment checks. On the day of inspection we found several rooms where nurse-call cords were tied up, so they would be out of reach of a person if they needed to use them. This was immediately rectified. We also found doors to cleaning cupboards unlocked, which could pose a risk to people. This was also addressed immediately and staff reminded of the procedures to follow. Some areas of the home have marked paintwork; this has been identified by the provider and forms part of the ongoing maintenance plan for the service. Water has been getting into one part of the building but this is being addressed. A recent environmental health visit confirmed food management to be of a good standard, with only minor improvements identified. The service has completed the identified minor work.

Bedrooms are appropriately furnished and benefit from en-suite bathrooms. Where people are cared for in bed, they have appropriate equipment. Items that are important to people are displayed in their own room, but other items such as prams and dolls are available in communal areas to support people who need access to these for their well-being. Communal areas provide places of interest for example, a traditional style sweet trolley. These areas are seen being used for group activities such as cinema mornings. The building has an outdoor space on each floor, with those on upper floors having suitable balustrade to keep people safe.

Leadership and Management

There is an interim RI who has oversight of the service. They visit the service to consult with people and care workers to assess the 'quality of care,' and required reports are produced around this. The service provider has additional measures in place through a quality assurance team. Their visits help to inform plans to improve the service, in addition to the RI's visits. Policies and procedures are in place, regularly reviewed and updated. These are detailed and support care workers to understand how to carry out their work, including medication administration and keeping vulnerable adults safe. A 'Statement of Purpose' and 'Service User Guide' are in place to inform people what to expect of the service.

A manager has responsibility for the day-to-day running of the service. They are experienced and passionate about providing a service where people are offered opportunities to engage in meaningful activities. The manager is commended by care staff for their leadership. A deputy manager supports the manager. On the day of inspection we found care staffing levels to be good. The service provider has planned to introduce a different staffing format that will provide additional support staff, including activity co-ordinators and receptionists on weekends. Systems are in place to monitor all aspects of the service. Where suggestions, concerns or complaints are received, these are addressed and measures taken to correct any issues identified. Robust records are maintained when the service is dealing with people's money.

Personnel files have relevant documentation, with evidence that care workers are recruited safely. Care workers receive supervision meetings with their line manager and these are recorded. Professional development is considered as part of these meetings, with training needs identified if required. The management team track the training needs and ensure this is provided. Training includes face-to-face meetings. Additional bespoke training is provided through refresher training as part of whole staff meetings. Access to training has been difficult during the current pandemic, this includes some specialist care training. People are not at risk due to this as the manager has ensured trained, experienced staff support with specialist care, such as catheter care. Department meetings take place. Communication is good throughout the home.

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

Date Published 05/05/2022