



Inspection Report on

Oak Alyn Hall

**MOLD ROAD CEFN-Y-BEDD
WREXHAM
LL12 9US**

Date Inspection Completed

02/04/2019

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Description of the service

Oak Alyn Hall is a care home located close to the village of Gwersyllt in the county of Wrexham. The service is registered with Care Inspectorate Wales (CIW) to provide personal care for up to 22 people.

The registered provider, S & S Care (UK) LTD. have appointed Mr. Sukhbir Sahota as the responsible individual (RI). There is a manager in post who is registered with Social Care Wales (SCW).

Summary of our findings

1. Overall assessment

People live in a comfortable and homely environment and are cared for by kind and competent staff. Staffing levels are satisfactory and staff treat people with respect. People told us they are happy living at Oak Alyn Hall. Relatives spoken with were pleased with the care their relatives receive. There are opportunities for people to participate in both individual and group activities, and people have things to look forward to. The home is well managed; records, policies, procedures and general administration are highly organised and well maintained. There are good internal auditing systems in place.

2. Improvements

Since our previous visit, the home has had a new passenger lift, a new stair lift, new dining room chairs and new armchairs in the small television lounge. The service's position regarding the 'active offer' in relation to the Welsh language has now been included in the home's statement of purpose, ensuring people are clear about what is offered. Menus, event information and signage is now provided bilingually throughout the home. The correct address and telephone number of CIW is now included within the home's statement of purpose.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. These include:

- Reducing the number of double rooms the home offers from two to one.
- Ensuring bags and protective gloves are appropriately stored.

1. Well-being

Summary

People experience warmth, belonging and have good relationships with care workers. People are able to join in with a range of activities and have things to look forward to. There are also opportunities for them to enjoy individual activities of their choice.

Our findings

People experience warmth and belonging. People spoken with told us of the positive relationships they have with the people who care for them. This was confirmed by relatives spoken with and by our observations, as we saw care workers talking to people in a warm and friendly manner. We saw that people shared humorous banter and chatted to one another in a relaxed way. We observed care workers being supportive and encouraging towards people as they assisted them in their daily routines. Care workers spoke with genuine fondness of people living at the home. One resident told us people can choose the times they get up in the mornings and the time they have breakfast; they felt it was like *'home from home'* with everything being very relaxed, unrushed and calm. This shows that people feel settled, feel they belong and have positive relationships.

People feel safe and protected from harm or neglect. We spoke with people who found themselves in need of residential care as they were unable to care for themselves at home and others who had become frail due to medical conditions but did not need nursing care. All had felt worried at home and expressed how moving into Oak Alyn Hall had helped them to feel safe and protected. They valued having trained care workers close at hand who could support them and assist them in their day-to-day lives. They felt they received good care and better access to medical support whilst at the home. One person told us *'I am safe here.'* Another told us *'I feel safe here; it's a good feeling.'* We found people were confident in the staff team who supported and cared for them and this ensured they felt safe and protected from harm.

People are encouraged to be involved in communal activities and have opportunities to socialise with people. A range of activities were offered. These included a visiting entertainer, prize bingo, quizzes, summer barbecues, religious services and numerous seasonal activities. People told us about a person's birthday party, when the theme was the 60's and everyone dressed in clothes of the era. All the people spoken to told us that they had thoroughly enjoyed themselves at the party. People had enjoyed a Valentines meal where the menu had a Valentines theme. Christmas festivities included a visit from a local choir who sang carols. A hairdresser visited weekly and people can also have their own hairdresser should they choose to. The home has a tuck shop run by one of the residents with staff assistance. Easter celebrations were being organised and several people had made Easter bonnets. We were told that people living at Oak Alyn Hall are able to put forward their ideas and suggestions for activities during residents' monthly meetings.

People also enjoy individual activities; one person enjoyed gardening and together with a maintenance man, regularly tends to the garden. People go out with family and friends; one person enjoyed regular weekend visits to a local social club with friends often returning in the early hours, just as they would have done had they been living at their own home. Another person told us they often went shopping, out for walks or to local cafes with friends or family. We saw that people freely move around the home socialising with others or attending activities. The home have access to a car and care workers are able to take people out in small groups or individually to local places of interest, shops and parks. We found that people enjoyed the activities provided and have events and activities to look forward to.

2. Care and Development

Summary

People's care and support needs are assessed prior to admission and their life history documented. Their personal plans are comprehensive, with care and medical needs assessed and risk assessments in place. All areas of care are regularly evaluated and reviewed. People are supported to be as healthy as they can be; they are treated with respect and are provided with a nutritious diet.

Our findings

People are consulted about their care needs prior to admission and throughout their stay at the home. We saw pre admission assessments detailing information in respect of each person's care needs; these included physical, psychological, medical and social needs. There were letters on people's files confirming that, based on the pre admission assessment, the home were able to meet their needs. We saw that people's assessed needs were then developed into a personal plan covering their physical wellbeing and personal care. We viewed four peoples' care files and saw that, where possible, they and their relatives had contributed to their assessment and personal plan. There was regular reviewing of needs and care provision, generally on a monthly basis, but more often if needed. People signed review documentation to confirm they have been involved in the review process. Staff were able to explain individuals' likes and preferences with regard to care and support needs. The detailed information gathered prior to admission, during development of personal plans and at reviews demonstrates that individuals and their representatives are consulted and participate in the process and are fully involved in making decisions that affect their lives.

People have access to health care services and are supported to be as healthy as they can be. Whilst reviewing the personal plans of four people living at the home we saw references made to the range of medical services each individual receives, including GP, District Nursing Services, Community Psychiatric Nurses (CPN), opticians and hospital services. The manager explained the proactive services of the local health centre whose staff visit the home both weekly and monthly to see their patients. This ensures people are seen regularly and any health issues or changes in health are quickly noted and action taken. A relative, when talking of medical assistance, told us '*If needed it is sent for straight away.*' We found that people are as well as they can be because they receive proactive, preventative care.

People benefit from a healthy diet with a good choice of foods available to them. We saw that the main meal is generally served at lunchtime in the main dining room, although people told us that they were able to eat in the dining room or their rooms depending on their preference. We later met a person who was eating her meal in her room as that was her choice. Daily menus are displayed on each table. The dining room is a light and airy room and tables nicely laid making the dining experience pleasant. Mealtimes were seen to be relaxed and unrushed. We spoke with people living at the home who told us the food

was very good, with plenty of choice. We saw the cook had a high visible presence as they spoke to each person before the meal to request their preferences and during the meal as they checked people in the dining room had what they wanted and asked if they would like more. At teatime a wide range of meals were provided as people's choices differed greatly; the cook was happy to accommodate everyone's preferred options. The home also serve people morning hot drinks and biscuits and afternoon hot drinks and cakes, scones or snacks. Cold drinks were seen to be available throughout the day and supper provided in the evening. The cook told us that special diets can be catered for. The choices provided on the menu are determined by the people living at the home who discuss all food provision during the residents meetings. Based on our findings we concluded that people's nutritional needs are being recognised and met.

We found that the administration, storage and recording of medication to be satisfactory. We were shown the medication room, which was found to be well organised with medicines stored safely. We randomly checked one person's controlled drugs, which tallied with the balance shown in the register. We observed medication being administered as required. The senior carer wore a tabard stating she could not be disturbed as medication was being administered and people did not approach her. The medication of one person needed to be administered at a different time to other people and the person giving out the medication was careful not to forget to do this at the correct time. Eight people including the manager had received training in respect of medication in March 2019. The manager informed us that only trained people are allowed to administer medication. The pharmacist, who supplies the homes medication, visits the home and audits the medication storage and administration and the home's staff complete daily audits. One person required oxygen therapy and we were told that all staff have been trained in respect of this. Spare oxygen cylinders are appropriately stored within the home. We found every effort is made to protect people through the safe administration and storage of medication.

People benefit from having sufficient numbers of staff to allow them to have personalised care in a relaxed manner. We saw staff interact with people in positive way offering warmth, encouragement and emotional support. People were treated with kindness and we saw staff taking people into the dining room in an unrushed manner, working to the pace of each individual and chatting happily with each person as they worked with them. People spoken with felt staff were kind, caring, very friendly and supportive towards them. Relatives spoken with echoed this and explained they can visit at any time and are always made to feel welcome. People spoken with were pleased with the care provided. We examined the staff rota, and observed care and support being provided which enabled us to conclude that staffing levels at the time of our visit met the needs of the people living at the home. We observed a person with complex needs being cared for appropriately; staff were aware of the person's needs and confidently delivered the care required. People benefit from a service where there are enough staff on duty to meet the varying needs of the people who live at the home, and where those staff interact positively with them.

3. Environment

Summary

People living at Oak Alyn Hall benefit from being cared for in a comfortable, clean and homely environment. Relevant regulatory safety checks have been completed to ensure facilities and equipment are maintained and safe.

Our findings

People live in pleasant, clean and homely accommodation. They are able to personalise their bedrooms, which were seen to be comfortable with furniture and fittings of a good standard. We toured the building, which contained sufficient internal space to meet people's needs. The communal lounges and dining room contained ample, comfortable seating and provided space for people to socialise or welcome visitors. People's bedrooms contained their personal belongings such as photographs and ornaments which created a sense of identity. Relatives spoken with confirmed they were able to support their family members to personalise their rooms and bring belongings from home. People told us they were happy in the home and relatives we spoke with described it as a "*warm and welcoming*" environment. We found everywhere to be clean and homely

During the inspection, we saw that red bags and protective gloves were left out in a bathroom; we pointed out to the manager that appropriate storage solutions should be sought for these items. We discussed the possible risks to people that could occur should these items not be stored away appropriately. We were informed the items would be moved and following the inspection were informed they had been stored appropriately. During our tour of the building we came across one bedroom with a slight malodour; we discussed this with the manager who explained about the care and support needs of the occupant. It was evident the home are meeting this person's needs and we were told that currently the carpet is shampooed daily as necessary and the room well ventilated. The manager has suggested to the person living in the room that the carpet is removed and an easy to clean floor covering be fitted; however, the person would prefer the carpet to remain and therefore cleaning staff are continuing to maintain their tough cleaning schedule in order that the persons choice is respected.

People are cared for in safe, secure and well maintained surroundings. We examined records that confirmed regular checks and servicing were carried out on fire safety equipment and systems, electrical installations, water temperatures and water hygiene. The home has a personal evacuation plan for every resident in the event of fire or emergency. We observed the home was secure from unauthorised access, as upon our arrival the main door was locked. We rang the doorbell in order to enter, were asked for our identification and to sign the visitor's book in line with fire procedures. We found people are cared for in a safe and secure environment.

At the time of re registration it was recommended that the number of double rooms the home offers is reduced from two to one. The manager agreed to discuss this with the responsible individual to ensure compliance.

4. Leadership and Management

Summary

Overall, the home is well managed. The manager is highly organised and efficient. There are systems in place to regularly check service provision and safe practices. Staff recruitment is robust with supervision and training carried out to a good standard.

Our findings

People are clear about what the service provides. A statement of purpose and service user guide is available for people considering a move into the home. This sets out the services' vision and values and provides full details of the services offered. The statement of purpose submitted at the time of re-registration required amendment as the name of the responsible individual was incorrect. At the time of writing this has been now been amended. People and their relatives spoken with were clear about what the service could provide. We concluded that people have the information they require to enable them to make an informed decision about moving into the home.

People receive care and support from staff who are vetted and who receive training and supervision. We inspected the files of four members of staff and saw evidence to show that they had been checked by the Disclosure and Barring Service (DBS) prior to their employment and that a current DBS check for all those staff had been issued within the last three years as required. The staff files consisted of application forms which contained details of staff members' qualifications, previous education, employment history and references. We found two references available in all staff files we reviewed, one reference being in respect of a persons' previous employment. New staff complete an induction programme. We were provided with details of the programme which included the principles of care, dementia, challenging behaviour, hydration in older people, diabetes, pressure area care and prevention, infection control and safeguarding. We saw that all four staff in the sample inspected had received infection control training and the home had infection control procedures available. Care workers attend supervision sessions regularly in line with regulatory requirements with their line manager. We saw in supervision notes, training needs were discussed and identified and there is a training agreement in place with each staff member. Records of annual appraisals were available and had been signed by the manager and the staff member concerned. Staff receive relevant and appropriate training in order to carry out their role. We saw records and were told the majority of staff either had Qualifications and Credit Framework (QCF) or National Vocational Qualifications (NVQ) or were working towards recognised qualifications. We were provided with a training matrix, which indicated training completed, ongoing and booked. People benefit from a service where staff are supported and trained.

People using the service can be confident the provider will respond positively to feedback and critical incidents. During the inspection we had been informed of an issue reported by a relative, which was competently dealt with by management in line with appropriate

procedures. We reviewed records concerned with the disciplinary issue and saw that the home had acted professionally and according to employment law. People told us they knew who to go to if they had any concerns or wished to discuss anything relating to their care and support; but stressed they did not have any concerns. Relatives spoken with felt any issue brought to the attention of the manager would be quickly attended to and positively dealt with. People are able to express any concerns or feedback they may have and can be assured they will be dealt with within the services' procedures.

Prior to the inspection, we received a concern regarding several issues relating to the management of the service. These related to the manner in which a disciplinary issue was handled, poor infection control procedures, care plan audits and availability and poor staffing levels. During the inspection we reviewed disciplinary procedures, infection control procedures and the training provided and found no evidence to support the concern. Staff who needed to have access to people's personal support plans were seen to have complete access to them as required during their working day and it was noted there was regular review of the plans. The concern stated there were poor staffing levels; we looked at staffing rotas and spoke to people, their relatives and staff. We found no evidence to support the concern and saw that during times of staff absence, sickness or annual leave, the manager, existing staff or staff from one of the other services owned by the Provider covered any staffing deficit. We could find no evidence to support the concern.

5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

There were no areas of non-compliance.

5.2 Recommendations for improvement

We recommend the following:

- Reduce the number of double rooms the home offers from two to one. This was recommended at the time of re registration.
- Ensuring bags and protective gloves are appropriately stored. Bathrooms should be regularly checked to ensure these items are not left lying around.

6. How we undertook this inspection

This was a full inspection undertaken as part of our inspection programme. This inspection was carried out under the new regulations – Regulation and Inspection of Social Care (Wales) Act 2016. The unannounced inspection took place on 02 April 2019 between 09:25 and 17:20.

We received a concern prior to the inspection and the themes highlighted in the concern are covered in the above report: The handling of a staff disciplinary issue, staff approach, lack of choice, care plan audits and availability, poor infection control procedures and poor staffing levels. We could find no evidence to support the concern.

The following methods were used to carry out this inspection:

- We reviewed documentation held on the system regarding the service before undertaking the inspection.
- We spoke to five people living at Oak Alyn Hall and six relatives.
- We spoke with the manager and two senior care staff.
- We look at a wide range of records. We focussed on four personal plans and associated documents, four staff files, training and supervision records, health and safety records and a selection of policies and procedures.
- We looked at the administration, recording and storage of medication.
- We toured the premises, viewing communal areas and a number of people's bedrooms.
- We observed how care and support was provided and the interaction between people living at the home and staff.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	S & S Care UK LTD
Manager	Susan Burton
Registered maximum number of places	23
Date of previous Care Inspectorate Wales inspection	11 April 2017
Dates of this Inspection visit	02/04/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The service has made considerable efforts towards providing an active offer of the Welsh language. The service's position in relation to the Welsh language active offer, is clearly stated in their Statement of Purpose.
Additional Information:	

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