



Inspection Report on

Conifers Care Home

**Stryt Las
Ruabon
Wrexham
LL14 6RB**

Date Inspection Completed

15/05/2019

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Description of the service

Conifers Care Home is situated within quiet and peaceful surroundings in Ruabon in the County of Wrexham. The registered provider is Hayes Healthcare Limited and they are registered with Care Inspectorate Wales (CIW) to provide accommodation and personal care to a maximum of 27 older people. The company has appointed a responsible individual to oversee the service. There is a manager appointed and registered with Social Care Wales.

Summary of our findings

1. Overall assessment

Further continued and positive changes implemented by the registered persons, which have resulted in enhanced outcomes for people using the service.

Continued improvements to the way the home is managed have been clearly identified, however some further work in regard to the development and implementation of auditing systems would further benefit and promote people's well-being.

2. Improvements

- Access to the home has now been limited to one entrance from the public road.
- Some health and safety recommendations have been successfully implemented.
- Some infection control recommendations have been successfully implemented.
- A full time activities co-ordinator has been employed.

3. Requirements and recommendations

Section three of this report sets out our recommendations to improve the service and areas where the registered person is not meeting legal requirements. These include:

- The implementation of auditing tools and processes to enable the registered manager to more clearly monitor internal processes and systems to sustain improvement.
- To review lessons learned following incidents to inform future practice.

- To use supervision and management support as an effective system to review and document staff performance and agree targets, which are then monitored and reviewed.

1. Well-being

Summary

People are happy living in the home and staff relationships with people are positive and caring. People have autonomy to make choices and do things that matter to them. People's changing needs are well supported. People are effectively safeguarded and access to and from the home is secure.

Our findings

People are well protected from abuse, harm and neglect. We reviewed the internal records in relation to people's safeguarding. We saw that the quality of information provided was robust and comprehensive. Where it was unclear if matters should be reported externally to the local safeguarding board, the registered manager completed an external referral to be sure, meaning that people's protection is taken very seriously and that their safeguarding is a priority. When we visited the home, the door was locked and we had to ring the bell to gain entry. We were asked for identification and also to sign the visitors book, meaning only people with a valid reason to be in the home were allowed access. We reviewed the services safeguarding policy. This was comprehensive and robust and gave staff clear instructions on how to deal with safeguarding matters, demonstrating that safeguarding was seen as everyone's responsibility. People can be confident that they will receive a service, which takes steps to prioritise and maintain people's safety and security.

People can do things which matter to them. We reviewed the staff rota and identified that a full time activities co-ordinator had been employed at the home so people had a range of activities to access on a weekly basis. We saw signs around the home telling people what the planned activities were for the forthcoming week, enabling people to effectively manage their time. We spoke to a person living in the home in regard to how they spent their time, and they told us: "*There is always enough to do.*" We saw people were able to choose where to spend their time and with whom, there were plenty of communal areas for people to access and we saw people could also stay in their rooms if they preferred. Outside seating areas were secure, safe and very well maintained, and people could come and go as they chose, using these areas to socialise or enjoy the weather. People benefit positively from enhanced well-being when they have things to look forward to and choices about how and where to spend their time.

People have control and are enabled to have their individual identities and routines recognised and valued. We saw staff delivering care to people with warmth and affection. They spoke to people by name, made them aware of what was about to happen and treated people with dignity and respect. Care staff always asked the person before they delivered care, meaning the person was involved and consulted at each stage about how

care was delivered. We saw staff asking one person if they would like a blanket, the person said they would, the staff member immediately left and came straight back with a blanket. The staff member rechecked that the person was happy before they left, demonstrating that people had control and were involved in their day-to-day care. People can be confident of receiving a service where individual needs and preferences are recognised and effectively supported.

2. Leadership and Management

Summary

The registered manager demonstrates a clearer over-sight of most aspects of the service. This over-sight would now benefit positively by the implementation of robust paperwork, review and further auditing measures. Practices to ensure people are effectively safeguarded following incidents is a key priority.

Our findings

People receive care and support from a service, which is committed to quality assurance and improvement. We reviewed actions taken and the recording and auditing for incidents within the home. One incident documented that care had not been carried out in line with a person's plan after their needs had changed. Whilst we saw that the person's plan had been updated, it was unclear if this information had been communicated to staff in a clear and timely way. We discussed this with the registered manager who was knowledgeable about the incident. We asked how the registered manager was sure that this information had been communicated correctly to care staff. The registered manager told us that another member of staff had stated that this had happened, however, the paperwork we reviewed did not fully support this. We recommended that the registered manager should implement a process to enable them to check key information had been effectively communicated, which in turn would further improve their over-sight and support the smooth running of the service.

We asked to see staff supervision in relation to an incident within the home to review how matters concerning staff practice were discussed. The supervision had been archived however, the registered manager stated that they clearly remember that these matters of practice had not been raised in a supervision. We discussed this further and recommended that such matters should always be recorded and discussed in supervisions so staff are aware when and how improvements to practice should to be made. Supervision documentation will then allow the registered manager to further support and enhance staff practice and enable them to assess and review the quality of improvements made.

We saw that for another incident, clear appropriate actions had been taken by the registered manager, including external reporting and taking advice in a multidisciplinary way to safeguard a person's needs. As a result of the incident, new risks had been identified and highlighted for the person, which we saw were also outlined within the person's care plan. These enabled staff to manage these risks effectively and carry out safe and up to date care for the person. For a further incident, we saw that internal policy was followed, in response to an allegation and immediate action was taken to safeguard the person and investigate the allegation fully.

We asked the registered manager if they implemented any lessons learned following incidents, to inform future policy and planning. The registered manager stated that this was not in place but agreed that the implementation of this process would further help to support them to learn from incidents and in turn, make improvements to future practice.

In conclusion, clear improvements had been made to the management over-sight of the home, which demonstrated the registered provider and registered manager were driving continued improvement as well as demonstrating a willingness to learn through the implementation of new processes and practices to further meet the needs of the people they support.

3. Improvements required and recommended following this inspection

3.1 Areas of non compliance from previous inspections

<ul style="list-style-type: none">• Registered person – general requirements (regulation 10(1)) The registered provider and the registered manager shall, having regard to the size of the care home, the statement of purpose, and the number and needs of the service users, carry on or manage the care home (as the case may be) with sufficient care, competence and skill.	<p>This non compliance has been met</p> <p>Management oversight at the home has improved and appropriate actions have been taken in response to events and incidents, which positively affect the running of the home and the people it supports.</p>
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3.2 Recommendations for improvement

- The registered manager should maintain clear oversight of the home, as well as further implementing auditing tools and processes to enable them to monitor information to effectively drive continued and sustained improvement.
- The registered manager should ensure lessons learned are identified following incidents and this information is used to further drive improvement, update internal policies and procedures and inform future practice to further support people's individual needs.
- The registered manager should ensure supervision and management support is an effective system to review and document performance, and leads to agreed targets, which are monitored and reviewed.

4. How we undertook this inspection

We, Care Inspectorate Wales (CIW) undertook an unannounced, focused inspection on 15 May 2019 between 09:50 and 16:10. We considered two themes, well-being of people using the service and leadership and management.

Information for this report was gathered from the following sources:

- We spoke with four people living in the home, three members of staff and the registered manager.
- We looked at a range of records. We focused on people's care and support plans and risk assessments, staff records, daily records, training records, medication records, policies and procedures and internal audits.

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

www.careinspectorate.wales

About the service

Type of care provided	Adult Care Home - Older
Registered Person	Hayes Healthcare Limited
Manager	Registered with Social Care Wales
Registered maximum number of places	27
Date of previous Care Inspectorate Wales inspection	13 September 2019
Dates of this Inspection visit(s)	15 May 2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	This is a service that does not provide an ‘Active Offer’ of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people who use, or intend to use their service. We recommend that the service provider considers Welsh Government’s ‘More Than Just Words’ follow on strategic guidance for Welsh language in social care’.
Additional Information:	

Date Published Wednesday 10 July 2019