



Inspection Report on

Rhoslan Care Home

Rhoslan Residential Care Home

52-56

Everard Road

Colwyn Bay

LL28 4HA

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

23 May 2022

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About Rhoslan Care Home

| | |
|--|---|
| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | Oaktree Healthcare Limited |
| Registered places | 33 |
| Language of the service | Both |
| Previous Care Inspectorate Wales inspection | This was the service's first inspection since its re-registration under the Regulation and Inspection of Social Care (Wales) Act 2016. |
| Does this service provide the Welsh Language active offer? | 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

People living at Rhoslan feel well cared for and are settled in their home. Personal plans and risk assessments are created with people and record their individual views and preferences. Support is provided by care staff who enable people to stay well and to be as healthy as possible. Care staff understand their duty to protect people from harm and are confident in how to do so. People praise the support they receive from the care staff and the food provided. Relatives are happy with the care their loved ones receive and with the communication they receive from the manager. A team of housekeeping and catering staff is provided, which enables care staff to dedicate their attention to meeting people's care and emotional needs. The environment is comfortable, warm, well-maintained, and safe. There is good, consistent managerial oversight regarding all aspects of the service provided. There are also arrangements in place by the provider to monitor the quality of the service provided.

Well-being

People are happy and feel they belong. The care and support provided is praised by the people who live at the service and by relatives. People told us *“everything is perfect”, “everyone is always happy” “very good care”, excellent care”, “I’m happy here and don’t want to leave”*. Relatives told us the care is *“excellent”*, and care staff are described as *“genuinely caring”, “amazing, friendly and helpful”* and *“extremely helpful”*. A visiting health professional told us *“Everybody is happy here; we never hear anybody complaining”*.

People are encouraged to remain as independent as possible. Choices are routinely offered in relation to all areas of people’s lives. This helps people to retain a sense of control over their lives. Various activities are facilitated, including in the wider community. We saw people taking part in arts and crafts and completing a wordsearch on a person sized digital interactive screen.

Physical and emotional well-being is promoted in various ways. Arrangements are in place to ensure people received their medication as prescribed, which helps people to stay well. Health and social needs are recorded within people’s personal plans. This includes what people can do for themselves and what they need support with. Relatives are kept informed regarding changes in their loved one’s health or support needs.

Care is provided in people’s preferred language be it Welsh or English, where possible. We heard staff converse with people in their preferred language, and saw key information documents were available bilingually.

People are safeguarded and protected from harm. Care staff have been vetted to check they are suitable to work with vulnerable people. Staff have completed safeguarding training and can confidently demonstrate how they would respond to safeguarding matters. The manager proactively refers safeguarding matters to the local authority.

The home is spacious well maintained and safe. Risks to people’s health and safety within the premises are identified and reduced, which enable people to stay safe. Infection control practices are in place which protect people as much as possible from the risk of coronavirus. The home is clean and regular maintenance work is completed. The home presents a well-cared for environment, which helps to contribute to people’s sense of pride in their home.

Care and Support

Personal plans record how people's care and support needs will be met. Processes are in place to identify people's care and support needs before they arrive at the service. This ensures the home is a suitable placement. People are involved in creating their personal plans. Each person's likes, dislikes and usual routines are known and respected. Care documentation is reviewed and updated as is required. Risk assessments are used to manage known risks to people's health and safety, as well as to enable positive risk taking.

Arrangements are in place to encourage people to be healthy and to access health and social care support. Appointments with health and social professionals are facilitated, which support people to stay well. People told us they appreciated support received from staff to attend hospital appointments. Changes or any deterioration in people's health conditions are responded to in a timely manner. A visiting health professional told us *"The care here is second to none, the manager flags issues to us quickly. All the information we need is readily available to us and people are appropriately referred to us"*.

People are supported to receive their medications as prescribed and this assists with managing their health conditions. A system is in place to safely store and administer medication. There is good managerial oversight in place regarding medication management.

Systems are in place to safeguard and protect people from harm. Care staff have received safeguarding training and they understand their roles in relation to safeguarding people. Safeguarding matters are proactively referred to the local authority and safeguarding policies are available to guide staff.

People benefit from the good hygiene and infection control standards in place. Arrangements are in place to control and minimise the spread of coronavirus. This includes taking steps to check visitors are safe to enter the home. We were asked to show a negative COVID-19 test results prior to our entry into the building. Staff wear appropriate personal protective equipment (PPE). Arrangements are in place to safely enable people to have visits from their relatives during the pandemic. Relatives told us the staff *"have kept everyone safe during covid...they deserve all the credit for keeping everybody safe"*.

Environment

Care and support are provided within an environment which promotes people's sense of belonging and well-being. The building and facilities are as described within the statement of purpose. People described the home as a "*lovely environment*" and "*very homely*".

There is an ongoing maintenance plan in place to ensure the building is well-maintained. New flooring was being fitted during our visit, which the manager told us would be easier to clean and would help keep the environment feel clean and fresh.

A choice of two dining rooms is available for people to have their meals with others, if they choose to. People have a choice of where to dine at mealtimes. There is a main lounge where people can watch television, chat with others, or take part in group activities such as quizzes. There is a smaller, quieter lounge where people can spend time in smaller groups, reading, listening to music or spend time on their own if they prefer. A cinema lounge is available, which is decorated with posters of famous films, and has a projector and a large projection screen.

Accessible and safe outside spaces are available. Several seating areas and tables are provided in the garden, as well as a sheltered smoking area. The garden is well maintained and provides green and pleasant areas for people to spend time outside, if they wish to do so.

Health and safety risks are identified and managed safely. The highest possible food hygiene rating of Five (very good) was awarded to the kitchen following the most recent local authority inspection. Gas, electrical items, the electrical system, passenger lifts and hoists are tested and serviced. Fires safety checks are also completed, as required, and drills are carried out.

Leadership and Management

Staff are recruited safely. Checks are completed before new staff are employed to work at the service. Care staff feel supported in their roles and are happy working at the service. Staff told us *"I love my job"*, *"we pride ourselves on providing the best care we can and treat our residents as family"*. Care staff meetings take place which provide opportunities for staff to receive information and to raise any matters. Staff describe the manager as *"very approachable"*, *"makes the time to listen to us"* and can be relied upon to assist with covering shifts, when needed. People describe the manager as *"great, on the ball, and cares"* and said they could speak with them at any time. Staff training has been affected by the pandemic. Arrangements are in place for staff to complete the required training over the coming weeks.

There are adequate care staff available to provide the required levels of care. This ensures people receive the care and support they need at the right time. The manager, and staff, told us staffing had been difficult at times during the Covid-19 pandemic. Arrangements are underway to recruit new staff. Kitchen, housekeeping, laundry, and maintenance staff are deployed. This enables care staff to focus entirely upon providing people with the care and support they need.

Arrangements are in place to support the smooth running of the service and to provide oversight of the quality of the service provided. The responsible individual (RI) oversees the running of the home and visits the service as is required. Regular audits are undertaken by the manager in relation to all aspects of the service provided. This monitoring ensures the home is safe, well-run and is meeting people's needs. The manager feels well supported by the RI.

Ongoing quality assurance processes are in place to review the standards of care provided and people's views are regularly obtained for the continued development of the service. A full quality of care review is undertaken and consideration given as to how the service intends to develop in the future.

People can access written information regarding the service provided. This informs people how the service is provided and assists people to decide whether the home is suitable for them. The Service User Guide does not include all the required information. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

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 |
|------------|--|--------|
| 19 | The Service User Guide does not include all of the information was required by the guidance issued with Regulation 19. | New |

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