



## Inspection Report on

**Oakhill**

**Oakhill  
928 Carmarthen Road Fforestfach  
Swansea  
SA5 4AB**

## **Date Inspection Completed**

17<sup>th</sup> February 2022

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## About Oakhill

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	7
Language of the service	English
Previous Care Inspectorate Wales inspection	Click or tap here to enter text. <a href="#">15<sup>th</sup> April 2019</a>
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

Oakhill is a small care home for up to seven individuals aged 18+ with needs associated with acquired brain injury, multiple sclerosis and dementia. The service is situated in a residential part of Swansea. The property has secure gardens to the rear, also parking at the front with an accessible ramp and internal lift. People have up to date personal support and risk plans that are regularly reviewed. People are supported by a dedicated team of well trained and experienced care workers, a deputy and registered manager. All care staff are very knowledgeable about the needs of the people they support. People are supported to access routines that are important to them including access to the community on a regular basis. People live in an environment that meets their needs well and is homely, clean and well maintained. The Responsible Individual (RI) is in regular contact with the service and there are robust oversight and quality audit arrangements in place. Improvements are needed in relation to the registered manager receiving regular formal supervision.

## Well-being

People are treated with dignity and respect. We observed care workers supporting people in a friendly way with positive and supportive interactions. Support files viewed, indicate people's needs are fully considered including their ability to participate in care planning. We found personal support plans are up to date, regularly reviewed and give a good reflection of the current needs of people. People are involved in and consulted about their care and support needs on a regular basis. Risk assessments are detailed and thorough to ensure people are supported safely. People spoken with during the inspection told us they are happy and value the care and support provided. Two relatives and two professionals spoken with were complimentary about the care and support provided. However the registered manager has not received a formal documented supervision and appraisal within required regulatory timescales.

People's physical, mental health and emotional well-being is promoted and maintained. People are supported to access the community and have a varied activities programme available to them in the service. We were informed community access will increase over coming months. There are good procedures in place for the recording, storing and auditing of medication in the service. People are supported by care workers who know them well and seek medical assistance quickly to support them appropriately when required.

People live in a home that is safe, secure and homely. There is a sign-in process to enter and leave the premises. The service is maintained well and there have been recent updates such as a new kitchen refurbishment. The service is homely, clean and comfortable and bedrooms are personalised where appropriate to give people a sense of belonging. The environment meets the needs of the people living there well.

People are protected from harm and neglect. All care workers have received regularly updated safeguarding training and those spoken with are aware of their responsibilities and procedures to report any concerns. There are robust and thorough staff recruitment checks completed. Policies and procedures to guide care workers are in place which have been reviewed and updated where appropriate. Deprivation of Liberty Safeguards (DoLS) are in place for people who do not have the capacity to make decisions about their accommodation, care and support. The provider has robust quality checks in place and the service is visited regularly by the RI.

## Care and Support

The provider has current and up to date plans for how care is provided in order to meet support needs. Personal support plans demonstrate what matters to the person and how best to support them to achieve their identified goals. Detailed risk assessments are in place to correspond with support plans. People's ability to be involved in care planning is considered and the appropriate legal measures are in place to safeguard them. Recording of support given is detailed and evidences that's peoples identified needs are monitored and reviewed when necessary. We saw people are supported to access the community and engage in activities within the service on a regular basis. We were informed community activities are increasing as Covid 19 prevention measures are relaxing. Activities are structured and planned around the needs of people. A professional informed us *"I can honestly say my experience with the staff at Oakhill has always been positive"* another said *"the communication with the placement is working"*. A relative told us *"The home provides a caring and safe environment... during Covid the staff have been amazing in providing extra much needed support"*. We spoke to several people during the inspection who all confirm they are happy, settled and enjoy living in the service. The service has recently received an outstanding award by Headway as part of their accreditation scheme for acquired brain injury services.

There are safe systems in place for the management of medication and people's health is promoted by good practice. We saw medication is stored securely in a locked cupboard. Records of daily temperature checks were seen to ensure safe storage of medication. Medication Administration Records (MAR) are completed appropriately with signatures of care workers present. There are good processes in place for the ordering and auditing of medication in the service which minimises the risk of error. Staff assisting people with medication are trained and deemed competent to do so. Many care workers in the service have been in post a number of years and know people well. This enables them to identify any health deterioration quickly and to seek support when needed. We saw medical appointments are clearly documented in care files with any subsequent action required noted.

The service promotes hygienic practices and manages the risk of cross infection. Due to the Covid-19 pandemic, prior to entering the property we were asked to show a negative lateral flow test result, have our temperature taken and apply personal protective equipment (PPE). We saw all care workers wear PPE appropriately whilst in the building. Communal areas, bedrooms and bathrooms are clean. There are good supplies of PPE available for staff. All care workers are completing regular Covid 19 tests. The service follows guidance issued by the government for visiting and minimising risk within the service.

## Environment

The provider ensures that people's care and support is provided in a location and

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environment with facilities that promote people's well-being and safety. Since the last inspection the kitchen has been completely updated and refurbished. This includes the provision of new appliances and cupboards. The area was seen to be clean and hygienic. There is a separate small activities room where we were informed people participate in craft sessions. There is a separate locked laundry room and we saw soiled items are separated from clean to ensure good infection control. We were told people are fully involved in relation to household activities such as cleaning and clothes washing. Parking is available at the front of the building. We looked around the service and found communal areas homely, clean, comfortable and well maintained. The environment is well suited to the needs of the individuals living there with wide well lit corridors, a lift to the upper floor and ramped access to the front. We saw people had their own personalised items in their bedrooms and rooms viewed have clean and well-maintained en-suites. There is a secure office area where files are stored appropriately. To the rear of the property is a large garden area.

We saw mandatory fire safety checks take place routinely and certificates for gas, fire detectors, fire extinguishers, electricity and electrical equipment are all up to date. Monthly external contractor water temperature checks are taken and documented. Personal emergency evacuation plans (PEEP's) are in place for individuals. There is a locked separate laundry area and Control of Substances Harmful to Health (COSHH) substances are stored safely and securely in a locked cupboard. The service is awaiting a food hygiene rating and future inspection by the Food Standards Agency. We saw fridge temperatures are taken regularly and documented appropriately. Also there are facilities such as coloured chopping boards and mops/buckets to promote good food hygiene procedures.

## Leadership and Management

People are supported by a dedicated team who have been recruited safely and are well supported in their roles. Many of the care workers have worked in the service for years and are familiar with the needs of the people being supported. We looked at two staff personnel files and saw appropriate pre-employment and recruitment checks are in place. References and up to date Disclosure and Barring Service (DBS) checks are on file. The training matrix was seen and we found almost all mandatory training requirements of the provider are up to date. This includes infection control, safeguarding, health and safety, fire awareness. Also specialist training including; acquired brain injury, alcohol use, personality disorder, learning disability and behavioural support. Care workers spoken to confirm they attend safeguarding training and understand their responsibility in relation to this. There are detailed and thorough safeguarding policies and procedures in place to guide care workers. We saw staff receive routine formal supervision and an annual appraisal. However, we saw the registered manager has not received formal supervision or appraisal for many years. We were assured support is in place and a new regional manager has recently been recruited and the matter is being prioritised. While no immediate action is required, this is an area for improvement and we expect the provider to take action. Care workers spoken with are complimentary of the training and support they receive. Comments include: *“excellent, fantastic support. Staff are great and managers are really helpful and supportive. They will bend over backwards to support you”* also *“all online training currently – all completed and monitored regularly”*. We were informed by the manager taught training around subjects such as first aid and behavioural management will restart shortly.

The provider has arrangements in place for the effective governance and oversight of the service through ongoing quality assurance processes. We saw the recent bi-annual quality of care report. The report includes feedback from people and staff in the service. The report indicates what the service is doing well and includes further improvements for the future. We saw the RI is in regular contact with the service. We saw policies and procedures have been reviewed and where necessary updated. The service's Statement of Purpose (SOP) has been reviewed and accurately reflects the service. There is a detailed and clear guide to the service for people and relatives. All policies and procedures are available in the Welsh language as requested. Care workers told us staffing levels are good and the manager stated there is currently a full permanent care team in place. The appropriate agencies including Care Inspectorate Wales (CIW) are notified where necessary of any significant issues affecting people or the service. The manager told us the service is really settled and there are no current concerns or complaints.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
36	The registered service manager has not received	New



	formal supervision or appraisal for a number of years.	
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