



# Inspection Report on

**Conifers Care Home**

**Stryt Las  
Ruabon  
Wrexham  
LL14 6RB**

## **Date Inspection Completed**

15 March 2022

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## About Conifers Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Hayes Healthcare Limited
Registered places	27
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection since the service was re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016 on 24 May 2019.
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

Conifers Care Home is situated within quiet and peaceful surroundings in Ruabon in the county of Wrexham. The registered provider is Hayes Healthcare Limited. The registered provider has nominated a responsible individual (RI), Nazmeen Arif to oversee the service.

The environment has undergone recent improvement and upgrading, these improvements impact positively on people's well-being and support personal independence. Care and support and risk management information for care staff is not provided in a way to help promote and maintain the safety of individuals or recognise all individual needs.

The RI does not always listen to individuals and respond accordingly. There is a lack of appropriate and relevant training for the RI and manager. Staff are mostly happy in their work and enthusiastic and have good positive relationships with the people they care for. Medication administration and management is robust and safe.

## Well-being

People have choice and control over their day to day lives. Numerous communal areas at the home allow people to have variety and privacy in their rooms if they choose. Some elements of choice may be limited, particularly around the decision to upgrade flooring in bedrooms. Staff are kind and considerate and have positive relationships with the people they support. People can choose when to get up and where to spend their time.

People may not be adequately protected from abuse harm and neglect. We raised safeguarding concerns about some living areas of the home and told the manager urgent improvements need to be made. These matters were known to the manager and RI, but they had not been rectified prior to our first visit. Care plans have undergone recent improvement but are not available or used by the care staff at the service. Instead, care staff must follow handover paperwork. This lacks in detail and adequate individual risk management. The manager and RI do not have appropriate training. The RI does not always respond appropriately to constructive feedback, and this may leave staff feeling unable to raise issues or discuss important matters which may need improvement with the manager and RI. This then leaves people open to a risk of abuse, harm and neglect.

People are encouraged to be as independent as they can be. People can receive a service in Welsh if they choose to. The layout of the home includes areas where people can make drinks and snacks for themselves. People can request staff support with call bells from their rooms and are supported to move freely around the home.

## Care and Support

Staff and management follow good hygiene routines and wear appropriate personal protective equipment (PPE) to prevent the spread of infection. We saw good quantities of supplies of PPE in the stores. We were asked to show evidence of a negative Covid-19 result before entering the premises in line with the safety of individuals and national guidance. Infection control is robust, with regular cleaning routines and designated domestic staff.

Plans care staff follow to give the correct care and support need improvement. We reviewed care and support plans and saw these lacked robust risk management and relevant important information. Some plans contained out of date or wrong information and weren't adequately updated when people's needs changed. We raised these matters during our first visit. During our second visit we saw care and support plans and risk management were much improved. However, we were then told by the RI that care staff did not use these care and support plans to deliver care and instead use the daily handover notes. On review, these handover notes lacked detail and relevant risk management and therefore posed a risk to people living at the service. This is having an impact on people's health and well-being and placing them at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

People can get up when they want to and choose where to spend their time, with some people preferring to stay in their rooms and others making use of communal areas. Call bells in rooms enable people to call for support from care staff should they need it. Smaller kitchen spaces around the home support people to keep their independence and make their own drinks and snacks, should they choose to.

People have positive relationships with the staff who care for them. Staff interactions are positive and patient. Care staff ask people if they want support and how they would like to receive it, promoting independence and dignity. Most people living in the home are relaxed and happy. Welsh speaking staff are employed should someone want to receive a service in Welsh. Staff know people by name and use positive body language and a positive tone of voice to offer warm and caring interactions, which enhance people's wellbeing.

## Environment

During our first visit we raised concerns with the manager and senior staff that a few people were living in unsanitary conditions. During our second visit we saw improvements had been made and all areas we viewed were clean and hygienic. Domestic staff are enthusiastic about their work. The manager has put further hours for domestic staff in place following our first visit. These improvements have helped to contribute to a positive and clean environment for people living at the home.

The manager told us people can have choice about their furniture and floor coverings in their rooms as we saw some people had carpets and others had industrial grade vinyl flooring. We spoke to one person living at the home who told us they weren't given a choice and their carpet was removed without consultation. We saw other rooms which are personalised with photographs and furniture giving most people a sense of ownership around their personal space.

During our first visit, a small dining area at the home was cluttered and unsightly. When we returned, this space had been transformed into a bright and airy space. It had been fitted with a fridge and small appliances such as a kettle, toaster and a microwave oven to help support people living at the home to be independent and move towards re-enablement to live independently.

Some areas of the home have benefited from recent renovations and upgrades which the manager showed us and told us about. A new wet room, freshly painted walls and industry grade vinyl flooring to corridors and a new lounge area. The manager told us they are moving away from carpets in bedrooms as the industry grade vinyl flooring is easier to clean and maintain. A designated laundry room is well appointed, and staff told us the new machines which had recently been bought are excellent and supported them effectively to undertake their duties.

## Leadership and Management

The service has good financial sustainability. The manager has prioritised the procurement and storage of PPE stocks to help assure safety during the pandemic and beyond. The manager has a budget which enables them to purchase items to make necessary improvements, which we saw as we looked around the service.

The RI is regularly available at the service. We saw information and reports in place to show the RI undertook some improvement and review as part of their role. The RI told us they had not undertaken relevant training for their role. We reviewed the training information for the RI, this was largely made up of the review of internal documentation and meetings. We asked to see certificates of any relevant training the RI had completed. We were not provided with any. We are therefore concerned the service provider has not effectively supported the RI to undertake relevant training, to enable them to understand and carry out their role effectively. There are gaps in the RI's training to cover topics such as the legislative frameworks and requirements, the specific duties of an RI, service performance and shaping service culture. This lack of training and support is a serious matter and has impacted on the other regulatory failings at the service and is having an impact on people's health and well-being and placing them at risk. We have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Medication systems are in place which are safe and well audited. An electronic system provides an immediate overview for the manager to review and is detailed and robust. A medication policy outlines safe practice and what is expected of staff. We spoke to a member of staff about the medication process for controlled drugs as we saw a late recording in the paper based controlled drug register for another day. The staff member was confident about the process and told us the electronic audit for each day will identify that controlled drugs have been dispensed safely, on time and by two people. We looked at the electronic audit for the day when the recording error occurred and this showed the medication had been administered on time by two people, in line with requirements. This electronic daily audit gives a further oversight and safeguard to medication processes within the home.

The supervision of the management of the service from the RI requires improvement. The RI does not always listen to individuals effectively or respond appropriately and accordingly. Some people told us the RI will often shout inappropriately in public areas at staff, leaving them afraid to speak up and raise matters with the RI and manager. We experienced this inappropriate behaviour by the RI during our inspection visit. The manager also lacks relevant suitable training and experience. We did not see any evidence these matters were identified as requiring improvement by the RI. This failure to listen to people and a lack of appropriate supervision of the management of the service by the RI is a serious matter, placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.