



Inspection Report on

Oak Alyn Hall

**Mold Road
Cefn-y-bedd
Wrexham
LL12 9US**

Date Inspection Completed

7 September 2022

07/09/2022

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About Oak Alyn Hall

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	S & S Care UK LTD
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	2 April 2019
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the care and support they receive. Care staff are knowledgeable, respectful, caring and are available in sufficient numbers to meet people's needs. People receive the care and support they require. However not all care workers training is up to date. There are opportunities for people to take part in regular activities and have a choice in the food they eat at mealtimes. There are stocks of food in the kitchen and people can get food at any time of the day. Managers have effective oversight of the service and there is a comprehensive range of management audits in place. The Responsible Individual (RI) visits and formally reviews the home regularly. The views of people living and working at Oak Alyn Hall are taken seriously. There is clear evidence of on-going investment in the home

Well-being

People have control over their day-to-day lives. People participate in choosing the care and support they receive, and this is reflected in care documentation which is reviewed regularly with input from people and their relatives, if they wish. People's personal plans are up to date and are an accurate reflection of the person, their requirements, and the outcomes they wish to achieve.

People are happy with the range of activities available to them and have good relationships with care staff. The rapport between care workers and people is respectfully familiar. People can express their views and the service is accommodating to people's preferences.

People are protected from abuse and neglect. Care workers and senior managers work well with other health care professionals. Risk assessments and personal plans are in place, accurate and kept up to date. Risk assessments are reviewed at appropriate intervals. Training records show not all staff have received all training, however our discussions with care workers, residents, family members and professionals shows the level of care and knowledge of care staff is good. People confirm they get the support they require. Policies and procedures are in place to protect people and staff recruitment processes are robust. There are a comprehensive range of managers audits in place to ensure the safe running of the home. Staff recruitment is robust, and staff are employed at the home in adequate numbers.

The home provides spacious accommodation and a variety of communal spaces for people to sit and spend their day. People have personalised rooms furnished to suit their needs; some of these rooms have recently been re-decorated. There is evidence of on-going investment in the home. Outside space provides seating for those wanting to spend time in the garden, which is secure. The home itself is secure with coded keypads on the entrance door and all visitors must sign in.

Care and Support

People can be confident care workers have an accurate and up to date plan for how their care is to be provided. People receive the quality of care and support they need, which both they and their relatives, where appropriate, are consulted about. People we spoke with confirmed they participated in their care plan reviews. People also told us they receive appropriate care and support which meets their needs. Pre-assessments are detailed, and shows the home consider their ability to provide adequate care and support for the individual prior to them moving in. Personal plans and risk assessments accurately reflect people's needs. Personal plans are detailed and give care staff instruction on how to support the person. They are reviewed at appropriate intervals. These documents are specific to the person, the risk associated with the individual and focus on the outcomes for the person. People's risk assessments are also detailed, give staff instruction, and are reviewed appropriately. Managers and care staff tell us care workers are advised of any changes to people's care and support requirements in a timely fashion, and care staff say they see people's care documentation prior to the person moving into the home.

People receive personalised care and support. Meal options, daily routines, and the activities they can be involved in evidence people living at Oak Alyn have choice in the lives they lead. We saw food stocks are plentiful and people we spoke with said the food was good and they get enough to eat and drink. People have choice in what they can eat and can ask for something to eat or drink at any time. We viewed records which confirmed, where appropriate, people's food and fluid intake was reviewed regularly, and their weights taken as required. People told us they could have a bath or shower whenever they wished. Most people we spoke with said there are enough activities going on and we saw evidence of activities taking place. We spoke with managers who confirmed that undertaking activities with residents was, at the moment, part of care workers roles, however, an activities co-ordinator has just been recruited who would be starting in their role in the next few weeks, which we evidenced. People tell us they can get up and go to bed whenever they want. People's personal plans reflect information provided by professionals. We observed good care staff interaction with people throughout the day. We observed mealtimes where there was good staff interaction with people. We saw one persons detailed mealtime routine being adhered to as their care plan stipulated. People we spoke with said staff were respectful and treated them with dignity.

People are safeguarded from harm and neglect. We saw evidence in people's files healthcare professionals are contacted in a timely fashion if required. We spoke with a health care professional who was complimentary about the service and the way any issues are dealt with by care staff and managers. The professional told us the home was "*really good*," that care is very good, care staff are constantly speaking with health care professionals and updating them in regards people's medical conditions. Care workers undertake appropriate health checks as required. We also viewed kitchen records which

show people's dietary requirements are being followed. There are robust processes in place in regards people's specialist dietary requirements.

Medication administration is safe and ensures the protection of people's health and well-being. The recording and dispensing of medication by appropriately trained staff are conducted. Medication is stored appropriately. We also saw evidence regular medication audits are undertaken by managers.

Environment

The service provider ensures the environment supports people to achieve their personal outcomes. The layout of the home, together with the provision of aids and adaptations ensures the environment promotes people's independence. We viewed some people's rooms which evidence people could personalise them according to their wishes. People have their photograph on their door which helps people with their sense of orientation and belonging. We saw people can walk around the home as they chose, freely and securely.

Good arrangements are in place to ensure risks to people's health and safety are identified and mitigated. We saw evidence appropriate checks and tests are being undertaken for visitors upon arrival. The home is clean, and cleaning is an ongoing process throughout the day. Call bells are in operation to alert care staff to when individuals needed assistance, these are not intrusive. We saw maintenance records show audits of the environment are conducted to identify and address problems and servicing and testing of equipment is carried out regularly. We also saw evidence of recent investment in the home, with new bedroom furniture, flooring and decoration having been undertaken, this investment is ongoing.

Leadership and Management

The provider has governance arrangements in place to help ensure the service is effective and the responsible individual has oversight. Senior managers have a program of detailed audits they complete regularly to check if practices are safe and reflect written policy and procedures. The responsible individual completes a Quality of Care Review every six months resulting in a report for the directors of the company. Surveys are distributed to residents and their relatives to ascertain people's satisfaction with the service they receive. The responsible individual undertakes their checks in line with regulation.

The manager has a range of policies and procedures in place to help instruct staff and keep residents safe. We spoke with staff who confirmed managers are good, approachable and take issues seriously. Staff we spoke with confirmed they feel comfortable in expressing their views and concerns. They receive one to one supervision to check on their practice and share their views. Team meetings are also arranged. Staff told us they enjoy working. One care worker told us that they *"love it here, they adore it, it's the best thing they ever did."*

People are supported by a service that can provide appropriate numbers of staff who are suitably fit to provide the care and support required. Staff records show safe recruitment procedures are in place and people are properly vetted before employment. Though care workers told us there were enough staff on duty some advised us that in the mornings they can be rushed. People we spoke with confirmed care workers come quickly when needed and that there are always staff around. A residents relative we spoke with told us, that there is always a lot of staff on duty and feels there is enough staff. This was confirmed by staff rotas which we viewed.

We spoke with care workers who told us they *"were always doing training,"* and got enough training to undertake their role. We were told by people living at Oak Alyn they received the care and support they required, and care staff knew what they needed to do to support them. One person said they *"get the support I need; staff are kind and gentle."* Relatives of a resident living at the home also told us they were happy with the care their relative was receiving. However, we viewed training records that showed not all staff were up to date with their training. We spoke with the manager who confirmed training was on-going and any outstanding training is to be completed, the home was catching up with training after the pandemic. 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
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36	Some care staff core and specialist training is not up to date.	New
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