



Inspection Report on

Oak House Care Home

Oak House Residential Home

43-47

Romilly Road

Cardiff

CF5 1FJ

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

09/03/2023

Welsh Government © Crown copyright 2023.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Oak House Care Home

| | |
|--|---|
| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | Oak House Care Limited |
| Registered places | 32 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | 19 October 2021 |
| Does this service provide the Welsh Language active offer? | This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture. |

Summary

Since the last inspection, a new manager and deputy manager have been appointed; they have made positive changes in the home. Staff told us that the manager is approachable and supportive. The Responsible Individual (RI) visits on a regular basis and maintains oversight of the home to ensure they assess and evaluate the quality and safety of the service.

People looked well cared for and comfortable. They told us they are happy living at Oak House and the staff were always kind and caring. The service values the importance of activities and people told us they have something to look forward to. Care planning reflects people's wishes and improvements are being made to ensure this is reflected in regular reviews. People's choices are valued by a respectful staff team. The staff morale has increased with a more cohesive approach to the team. Staff are knowledgeable and responsive to people's care and support needs. Most staff are safely recruited but some improvement is required.

Since the last inspection, there has been many environmental improvements which people enjoy. The home is brighter and homely. There is an ongoing refurbishment programme in place.

Well-being

People have control over their lives as much as possible. People make choices about day to-day decisions like how to spend their time throughout the day. Staff understands the value of positive engagement has on people's well-being and self-value. People have an opportunity to be heard and listened. Individuals were consulted about colour schemes during the recent redecoration of the service. Records of meetings reflect that people's wants and wishes are considered. We saw the management keeping relatives informed of changes to feel involved in the care arrangements. People's personal plans are regularly reviewed although, we saw little evidence to show any discussion had taken place with the individuals, or their relatives, but this was being addressed.

People receive the support they need to maintain their health and well-being. Most personal plans identify each person's care and support needs and how these can be best met. People receive their medication at the right time. There is good access to health and social care professionals when needed. Staff are caring, knowledgeable and responsive to people's needs. The service provider has quality assurance processes in place to review the service delivery and to capture feedback from people, their relatives, and staff to drive service improvement.

The current deployment of staff and the high morale of care workers contributes to people's well-being. Care workers are motivated and feel valued. The consistent workforce provides continuity of care for people. The atmosphere in the service is calm and well organised and interactions are friendly and supportive.

People are protected from the risk of harm and abuse. Accident and Incidents are closely monitored and we found that appropriate action is taken to safeguard people. Staff has a good understanding of the people's needs and they receive information on how to support the person prior to them moving into Oak House. Care workers complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The safeguarding policy in place needs to be updated to include the Wales Safeguarding Procedures. Most staff recruitment processes are followed but this requires strengthening to further protect vulnerable people living at the service.

The living accommodation supports people's well-being. New furniture and fabrics have been purchased for communal areas and some bedrooms. The outside courtyard has been patioed and people are looking forward to enjoying the space. However, attention is needed to the outside garden area to make the area more appealing. There is a redecoration and refurbishment programme in place. There are servicing arrangements and routine maintenance in place to ensure people live in a safe and well-maintained environment.

Care and Support

The service values people's involvement and their voice is heard. People contribute to the running of the home by expressing their views in regularly held meetings. Some comments included, *"I like the food and have no concerns"* and *"I think the redecoration of the home is very nice"* and *"Staff are brilliant"*. At the time of the inspection, questionnaire surveys had been given to people using the service and staff; information from these is being reviewed. Feedback is important as this helps to inform the future shaping of the service.

People benefit from regular activities at the home and do things they enjoy. There are two activity coordinators available seven days a week. We saw people enjoying a quiz and a singalong with lots of chatting and laughter. People told us that they have something to look forward to. Varied activities are planned to meet people's preferences and interests. Lots of pictures are taken and displayed in the home for people and their relatives and provides a point of interest for discussion.

People receive support from staff that know them well. There is a consistent staff team which provides people with continuity of care and support. We saw staff are attentive and responsive to people. People described the staff as *"They are lovely"* and *"The staff are caring and kind"*. The staff we spoke with demonstrate good knowledge of the people in the home and want to make a positive difference to peoples' lives.

People are given the opportunity to share their views on how they would like to be supported and their preferences before they live at the home. This information is used to produce personal plans which identifies each person's care and support needs and how these can be best met. We found a few personal plans that lacked detail, the manager assured us that this would be addressed. Daily care records shows that staff are providing the right support to consistently meet people's personal outcomes. Referrals are made to health and social care professionals when required. People are registered with a local general practitioner and they regularly visit. There are regular reviews of personal plans but people should be given the opportunity to contribute.

People are supported with their health needs. Medication administration is provided by trained staff and systems are in place to audit this. Improvements are being made to record the effectiveness of medication that is prescribed "when required". There is a lovely social opportunity and positive mealtime atmosphere that contributes to people receiving good nutritional intake. People's nutritional needs are met and monitored. The Food Standards Agency recently rated the home as 'Good'.

Environment

Since the last inspection, some areas of the home have been renovated and there is an ongoing refurbishment plan in place. Corridors and communal areas are nicely decorated with new fabrics and furnishings. People were consulted about the colour schemes before redecoration of some of the bedrooms. People's bedrooms are personalised to their own taste and with items that are important to them. The communal bathrooms and wet rooms are well equipped, clean, and tidy. The courtyard has been recently patioed with a water feature for people to sit and enjoy. The home is now welcoming, brighter and more homely.

The service promotes hygienic practices and manages the risk of infection. Staff use personal protective equipment (PPE) and we saw this appropriately disposed. The PPE supply is plentiful throughout the home. There is a clinical waste arrangement in place. Staff are trained in infection control. Cleaning schedules are in place and the home is clean throughout.

People live in a safe environment that protects them from harm. There is good management of hazards that would pose a risk to people. Facilities and equipment are regularly serviced. There is a maintenance person employed at the home and all routine checks of the building are up to date to maintain good oversight of the repairs and building.

People living in the home have a personal emergency evacuation plan (PEEPS) which is important to guide staff of the assistance a person needs to safely evacuate if needed. Staff are trained in fire safety and understands their role. Routine fire drill evacuations take place but they should be arranged more frequently when there are issues identified to ensure the staff fully understands the evacuation procedure.

Leadership and Management

The service is run smoothly by a relatively new manager. Many positive changes benefit people and staff since their appointment in May 2022. Staff feel supported and tell us *“The manager has a big heart and people are her focus”*. *The staff described the manager as “Exceptional and takes the time to listen to us” and “They will help us when needed and will always look at ways to resolve issues”*. Staff team meetings take place and gives employees the opportunity to keep up to date with developments in the service. We noted that staff receive supervision and training is ongoing with some outstanding areas planned.

There is good oversight of the service, with the responsible individual (RI) and manager working well together for the benefit of the people living at Oak House. The RI regularly visits the home and reports demonstrate people are consulted and a comprehensive review of the quality and safety of the service. There are regular audits in place to evaluate the issues affecting the service and the manager told us that lessons learnt will be included. The quality-of-care report is detailed and reflective of the service but the report must include an analysis of information to identify any patterns/trends and lessons learnt. The reports demonstrate people’s choices are valued and respected.

People can be assured that they receive support from staff that are safely recruited but some improvement is required. We found that recruitment processes are in place to ensure all employment checks are undertaken prior to the commencement of their position. However, we found a few instances when pre-employment checks were not fully followed. These checks are important as they determine a person’s suitability to work with vulnerable people. The manager assured us that this would be addressed. All staff have an up-to-date Disclosure and Barring Service check to show they are fit to work with vulnerable adults. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Sufficient staffing levels are in place to meet the care needs of people living at the service. Care staff told us they have enough time to support people appropriately. Staff respond to requests from people in a timely manner and interactions are friendly, respectful, and unrushed. People are supported by staff who knows them well. People say they feel safe, and the staff team protects their privacy and personal information at all times. There is a up to date safeguarding policy in place for staff to follow.

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 |
|------------|---------|--------|
|------------|---------|--------|

| | | |
|----|---|----------|
| 35 | The safe staff recruitment processes must be followed to protect people from harm | New |
| 36 | Care staff must receive regular supervisions and annual appraisals. Care Staff to receive training to understand the specific needs of the people they support | Reviewed |
| 15 | Personal plans to be tailored to the person's care and support needs and identify the associated risks | Achieved |
| 16 | People or their representatives to contribute to their review meeting at least every three months | Achieved |
| 21 | Improved management of incidents and accidents to ensure all care records are reviewed and updated to reflect the change in the individual's needs. To ensure the appropriate action taken to protect the well-being of individuals | Achieved |
| 58 | To ensure there is regular auditing of the storage and management of medicines in the home | Achieved |
| 78 | The Responsible Individual to have effective systems for ensuring accuracy and completeness of care records | Achieved |
| 79 | The responsible individual to put suitable arrangements in place to ensure policies and procedures are kept up to date – such as, medication policy, safeguarding, infection control and the falls procedure | Achieved |
| 80 | The responsible individual to consistently analyse key information to identify patterns and trends to ensure the appropriate action is taken – such as; incidents and accidents, safeguarding, care planning system, call bells and the management of medicines in the home | Achieved |

Date Published 13/04/2023