



Inspection Report on

Alexandra House

Prestatyn

Date Inspection Completed

27/07/2023

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About Alexandra House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Alexandra House Support Services Ltd
Registered places	4
Language of the service	Both
Previous Care Inspectorate Wales inspection	11 December 2019
Does this service promote Welsh language and culture?	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

The Responsible Individual (RI) visits the service regularly to maintain oversight of the service and the quality-of-care review is undertaken. Care documentation and risk assessments require improvement. People's personal plans either do not contain enough instruction for staff to provide person-centred care and support or do not reflect information held in other parts of their care files. We spoke with relatives who told us people's support needs are discussed every time they visit the house; however, personal plans do not always show they are reviewed in a timely manner or with the involvement of their representative.

The manager is well respected by relatives and staff. Next of kin told us their relatives are happy at Alexandra House. Care staff say they enjoy working at the service and feel supported and valued. There is a safe recruitment process in place that ensures care staff are suitable to work with vulnerable people and there is enough staff on duty. Staff training is ongoing. Policies and procedures are in place.

People are offered daily choices. Relationships between staff and residents are warm and caring. There is a good choice of nutritious, homemade food and people with special dietary requirements are catered for. The home is secure, clean, and tidy and staff are mindful of infection prevention and control requirements.

Well-being

People have control over their day-to-day life. They are listened to and involved in making choices and decisions. Staff know people well and the manager and senior staff talk to people who use the service daily, so people can raise any concerns directly with them.

People are not always supported with their physical, mental health and emotional well-being. Staff are attentive, polite, and respectful to people and we saw many examples of this throughout the day. Personal plans are in place, but do not always contain sufficient information for care workers to undertake their role accurately or reflect other areas of people's care documentation. The manager and senior staff work collaboratively with health and social care professionals and relatives to ensure people remain as healthy as possible. Improvements are required in some personal plans, so they show they are reviewed in a timely way and people, or an appropriate representative are involved in the review of their personal plans.

People are generally protected from potential harm, abuse, or neglect. Care staff records are checked robustly. Training records show care staff have undergone most of the training provided by the home. Policies and procedures including safeguarding are in place and the manager undertakes a series of management audits in regards a suite of areas appertaining to the running of the home.

People live in and use accommodation which suits their needs. Relatives told us people are happy living in and using the service. Standards of cleanliness and hygiene are good and regular checks, servicing and maintenance ensures the environment is as safe as it can be. The provider has policies and procedures in place to manage the risk of infection.

Care and Support

People cannot always feel confident that the service provider has an accurate and up-to-date plan for their care. We saw some personal plans had not been reviewed in line with regulations. However, we spoke with care staff who told us people's personal plans are an accurate reflection of the care and support they require. We spoke with relatives of people using the day and respite services at Alexandra House who told us the persons support needs are discussed with staff every time they go to the service. We spoke with care workers and senior managers who said people support needs are discussed at handovers, which we saw, and if people's needs change care workers personal plans are updated and they must re-read the person's personal plan. We found people are supported in accordance with their needs and reflect the support outlined in other professionals' documentation. Care staff are aware of the requirements of the person being supported. However, we found some people's personal plans do not contain enough detail or instruction for care staff in regards areas such as how to support people with their personal care accurately or how staff are to deal with a person's specific behaviours. We also found some risk assessments didn't reflect identified risk found in other areas of the person's personal plan. We spoke with senior managers in regards these issues and that they were currently working towards putting them right. This is an area for improvement and we expect the provider to take action.

People are provided with the quality of care and support they need. We spoke with next of kin who said the care and support their relative receive was good. One person told us their relative *"gets the care and support they need.... staff pamper their relative and give them attention...staff know exactly what they require."* We saw people were happy with the support they received from care staff and witnessed staff supporting people appropriately. Relatives and care workers told us the food was good and they have choice in regards the food they eat. We saw menus offer a number of different options which people help care workers to prepare. We saw people engaged in activities which they clearly enjoyed. We also saw people receiving individual support in the sensory area of the house.

The provider has comprehensive mechanisms in place to safeguard people. People told us they felt their relative is safe at Alexandra House, and they told us any issues with care and support are dealt with promptly by care workers and the manager and the manager will ring them to clarify any issues. We also saw that the provider's Safeguarding policy and procedure was comprehensive.

The service has safe systems in place for medication management. We viewed the medication policy which was detailed and saw that medication charts were completed accurately. Relatives told us they had no issues with medication at Alexandra House and had never known a problem.

Environment

People live in and visit a home that meets their needs and promotes well-being. The home is a clean, bright, and an uplifting environment where people have good facilities they can access easily. The service has recently been re-decorated and had wide ranging structural improvements carried out. Bedrooms we saw were individually decorated and contained personal items. There are different areas of the house, such as a craft room with evidence of crafts being undertaken, a T.V. and music room and a sensory room. There are specially adapted bathrooms. A dining area offers space for people to eat together. People can meet others and develop relationships in communal areas and have private space should they need it. We saw people interacting positively with each other and staff members during the inspection. People enjoy the spacious, secure, and pleasant garden area to the rear of the house, which has a patio area, is also laid to grass, a gazebo, and an area where rabbits are kept.

The home is secure, and visitors are asked to sign in and out of the building. Our identity was checked before entering the property. Corridors are spacious, and free from clutter enabling people to move around freely and safely. We had sight of the home's health and safety records and saw there is a process in place to ensure safety checks are completed by external contractors and management in a timely manner. These included gas, electrical, fire and water checks. However, though we saw contractors had undertaken a fire risk assessment and PAT testing of electrical items, we were not able to ascertain if care workers had undertaken regular testing of fire alarms or if a five-year electrical test had been undertaken by an approved contractor. The house is well-furnished, decorated, and clean, cleaning is an ongoing process throughout the day.

Leadership and Management

Arrangements are in place for the effective oversight and governance of the service. We saw the RI visits the service regularly and has completed their required visits and produces a report in regards this. The quality-of-care report has been completed in line with regulations and senior managers and care workers told us they receive good management support from the provider. We also saw managers audits such as safeguarding, and medication had been completed.

People can be confident they are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge and qualifications to provide the levels of care and support required. Staff files show recruitment of care workers is robust, have undergone appropriate checks and are registered with the appropriate professional body. Care staff told us they receive plenty of training and the training they receive is appropriate for their role. This was confirmed by relatives who told us the support provided was good and the documentation which we viewed showed most training had been undertaken. Care workers told us there were enough staff on duty. This was reflected in staff rotas which we saw. Care staff told us they receive good management support, senior managers take issues seriously and they receive supervision. We reviewed supervision documents that showed people are receiving supervision though not always in line with regulation.

We saw policies and procedures were in place, such as infection control, behaviour responses and medication. We also saw evidence that team meetings were being undertaken.

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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15	Staff should be given the appropriate instruction in personal plans and risk assessments to ensure they are able to undertake their role effectively and accurately.	New
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