



## Inspection Report on

**The Oaklands Residential Home**

**The Oaklands Residential Home  
2 Oaklands Drive  
Bridgend  
CF31 4SH**

## **Date Inspection Completed**

28/11/2022

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## About The Oaklands Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	The Oaklands Residential Home
Registered places	18
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">26 October 2021</a>
Does this service provide the Welsh Language active offer?	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

People living at The Oaklands Residential Home experience a good standard of care and support. People have good relationships with care workers who treat them with dignity and respect. Care documentation is person-centred, clear, and concise, highlighting people's outcomes. Risks to people's health, safety and well-being are thoroughly assessed and effectively managed. Care documentation is reviewed regularly in consultation with people and their representatives. The responsible individual (RI) takes a hands-on approach and is up to date with all their specific duties including visits and quality of care reviews. Policies and procedures have recently been reviewed and are reflective of the most current statutory guidance. Care workers are trained to meet the needs of the people they support and receive regular supervision along with an annual appraisal. The environment is clean and well presented. Regular servicing and maintenance ensures the environment, it's facilities and equipment are safe to use.

## Well-being

People are supported to maintain optimum health by being able to access a range of social and health care provision. The home monitors people's overall health and refers any concerns to the relevant professionals. Activities on offer promote people's well-being and keep people active and engaged. Meals are of a good standard, with people who have special dietary requirements catered for. Standards of hygiene and cleanliness are good, reducing the risks of cross contamination. Medication is safely stored and administered by trained care workers.

A clean comfortable environment supports people's well-being. There is an ongoing programme of maintenance, checks and repair that ensures environmental safety. People's rooms are personalised which promotes a feeling of belonging. Communal areas provide a space where people can relax or participate in activities and there is specialist equipment at the home to assist people with mobility needs.

People are offered choice and are treated with dignity and respect. We observed positive interactions between care workers and people. Positive feedback from people and their representatives suggests people are treated with warmth and kindness. Regular resident meetings are held where people can be involved in decisions made at the home. There are activities on offer for those who wish to participate and there is a good choice of nutritious meals available.

There are measures to protect people from harm and abuse. Policies and procedures are up to date and aligned with current statutory and best practice guidance. Care workers are aware of their safeguarding responsibilities and know who to speak to, to raise concerns. Care workers receive safeguarding training and other training so they can meet the needs of the people they support.

## Care and Support

The service adopts a person-centred approach to care delivery. This means people receive care and support that's tailored to their individual needs. Personal plans contain a good level of background information including medical details and people's personal histories. Information relating to care and support is clear and concise. We saw evidence of capacity assessments and best interest decisions being made where people lack capacity to make informed decisions regarding their care and support. Personal plans are developed in consultation with people and their representatives and are regularly reviewed to ensure information recorded is relevant. Personal plans also contain detailed risk assessments which highlight people's vulnerabilities and set out strategies for keeping people safe. Care workers we spoke to told us personal plans are easy to follow and contain the right level of information enabling them to provide effective care and support.

People are happy with the service they receive and have positive relationships with care workers. We saw care and support being delivered in a dignified manner with friendly interactions between people and care workers. Care workers seem to know the people they support well and are familiar with their routines and preferences. People we spoke to provided positive feedback regarding care workers. One person said, "*The staff are lovely. They are very nice and well mannered*". Another person told us, "*I do like being here, the staff are very good to me*". Weekly meetings are held where people are consulted on topics such as activities and menus. We saw an activities timetable is produced on a weekly basis and contains a variety of pursuits that promote physical well-being and social interaction. People told us the food served at the home is of a good standard. One person commented, "*The food is great, top marks to the chef*". Menus detail a selection of nutritious foods and people with special dietary requirements are catered for.

Documented evidence in personal plans show people are supported to be as healthy as they can be. We saw evidence of appointments and correspondence from health care professionals such as GP's, District Nurses, and the older persons mental health team. Tools to monitor people's overall health and well-being include food and fluid, weight monitoring, and skin integrity charts. These are filled in routinely to help identify any deterioration and act accordingly. The service provides support for those with medication needs. There is a medication policy and care workers receive relevant training. We viewed a selection of medication recording charts. All were filled in correctly with no gaps. This suggests medication is administered as prescribed. Medication is stored in line with best practice guidance and monthly medication audits are completed in order to identify and action any discrepancies.

## Environment

An ongoing programme of checks, servicing and repair ensures risks to people's health and safety are mitigated. Appropriately qualified trades people attend the service regularly to maintain the home's utilities, equipment, and fire safety features. The manager also completes a monthly health and safety audit to ensure the home, its facilities and equipment is safe to use, and any hazards are identified and actioned.

The environment is comfortable, clean, and safe which helps enhance people's quality of life. The home is a Victorian building set over three floors which contains some of its original features. A lift provides access to the upper floors for people with poor mobility. There are a number of communal bathrooms containing specialist equipment for those who need it. Care workers follow a cleaning plan to ensure standards of cleanliness and hygiene in the home are maintained. The kitchen has achieved a Food Standards Agency score of 4, indicating good hygiene standards. Communal areas are homely, suitably furnished and decorated. People's rooms are personalised to preference and contain items of importance such as photographs and keepsakes. Substances hazardous to health are stored appropriately and can only be accessed by authorised personnel. The home is secure from unauthorised access with visitors required to sign in when they arrive. The home has gardens to the front and rear with a patio and seating for people to use.

## Leadership and Management

Care workers feel supported in their roles and are trained to meet the needs of people living at the service. Care workers we spoke to provided positive feedback in relation to their training and development opportunities. One care worker said, *“The training we get is good, it definitely improves my work”*. We were told there is a combination of online and face to face training provision available. Records relating to training show the service is mostly compliant with core training requirements. As well as training, care workers receive regular supervision and appraisal where they get the opportunity to discuss work related matters and reflect on their performance. We looked at records relating to supervision and appraisal which confirmed care workers are receiving the recommended levels of formal support.

A safe recruitment process ensures staff working at the service are suitable to work in the care sector. Personnel files viewed contain all of the necessary pre-employment checks, including references from previous employers, employment history and Disclosure and Barring Service checks. On commencement of employment all new employees complete a structured induction programme and get to work alongside experienced members of the team. Care workers we spoke to said this was useful as it gave them a good introduction to the service and the people living there.

Arrangements for governance, auditing and quality assurance help the service operate smoothly. The RI appears to have good oversight and is involved in the day to day running of the home. We saw evidence the RI regularly meets with people and staff to gather their views to inform improvements. We viewed a cross section of the services policies and procedures and found they are reviewed regularly and contain information aligned with current statutory and best practice guidance. They offer guidance to care workers, for example, explaining the safeguarding procedure and what to do if they think someone is at risk of harm.

Documentation detailing what the service offers is available for people to view. The statement of purpose sets out the home's aims, values, and delivery of support. The user guide contains useful information such as the process for raising a concern about the service and the availability of advocacy services.

### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
35	REG 35(6) – DBS Certificates. All staff not on the update service require a DBS check on a 3 yearly basis.	Achieved

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