



Inspection Report on

Willowdale Care Home

**Willowdale Residential Home Ltd
112 Chester Road
Buckley
CH7 3AH**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

17/05/2023

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About Willowdale Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Willowdale Residential Homes Limited
Registered places	28
Language of the service	Both
Previous Care Inspectorate Wales inspection	10 August 2022
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

This was a focused inspection, which concentrated upon areas of the service identified at the last inspection as needing priority action. On this occasion we did not consider care and support, the environment and leadership and management in full.

People are happy and are supported to live their lives as they choose. People's voices are heard, and their independence is promoted. People's health needs are understood by care staff, and timely referrals are made to seek advice and guidance when needed. The home is supported by a range of visiting health professionals to help ensure people receive the care they need to remain as healthy as possible.

Care is delivered by an enthusiastic and familiar staff team. Care documentation reflects the person being cared for, but improvements are required to ensure recording and medical checks are undertaken in line with information in people's personal plans. The home provides a comfortable environment for people to live in which is safe, well looked after, and meets their needs. The environment is warm, clean, and decorated to a high standard. The Responsible Individual (RI) has oversight of the service and visits the service regularly. There are clear systems in place to monitor the quality of care provided.

Well-being

People are supported with their physical and social wellbeing. People, we spoke with are complimentary of the care staff and management of the home and we observed care workers aiding people calmly, with dignity and respect. Care records are mostly comprehensive, and mostly reviewed regularly, however improvements could be made with more involvement of people or an appropriate person in the reviewing of people's care and support, and ensuring some practices are undertaken in line with the person's personal plan. We spoke with professionals; people living at the service and staff and saw documentation which showed referrals to relevant health care professionals are made in a timely way. We observed care workers have good knowledge of people's needs, referred to people in a positive way and it was clear they knew the people they supported well. This was confirmed by people we spoke with.

People can exercise choice and control over their every-day lives. We observed people enjoying various areas to sit in and the company of others. We observed interactions with people by care staff were considerate and respectful of people's wishes. Though some interactions we observed in the morning of the inspection were rushed, with some people at times having little interaction with care workers. There is choice regarding meals, and we observed people having alternatives if they do not like the choices on the menu. We observed and people told us they could get up and go to bed when they wished.

People are generally protected from potential harm, abuse, or neglect. Agency staff are checked robustly. Training records showed most staff have undergone the training provided by the home.

The home is clean, warm, comfortable and bedrooms reflect the persons preferences.

Care and Support

As this was a focused inspection, we have not considered this theme in full.

The provider considers a range of views and information to confirm the service can meet individuals needs and support people to achieve their personal outcomes. We saw prior to living at the service, the applicant is visited, and a detailed pre-admission assessment is undertaken by an appropriately qualified member of the staff team. The manager also showed us they formally assess people's care and support needs to ensure the home can provide the care and support a person needs before the person move into Willowdale. This was comprehensive, and we were told by the manager, was used every time someone was being considered to move in. We also saw assessments from health care professionals on people's files which had been requested prior to people moving in and during the persons stay at Willowdale. Senior staff told us they were in contact with professionals in regards people's health and support needs regularly, this was confirmed by records we viewed.

We saw personal plans are in place, are detailed, reviewed, and give support staff enough information to undertake their role. We saw personal plans and risk assessments give a detailed history of people's medical conditions and reflect outcomes in professional and health care professionals' documentation found in people's records. Care workers we spoke with confirmed personal plans and risk assessments give them enough detail to undertake their role appropriately and are an accurate reflection of the person they are supporting. We spoke with people living at the home who felt care staff support them in the way in which they require.

Care and support are provided in a way which mostly protects and maintains the safety and well-being of individuals. We saw day logs and care documentation which show care staff supporting people in line with professionals' documentation, and care workers also contact health care professionals in a timely and appropriate way. This was confirmed by a health professional we spoke with. We saw personal plans and risk assessments are detailed and reviewed regularly. However, we saw regular personal plan reviews with the person and / or an appropriate person were not being held formally. The manager advised us processes will be implemented to ensure this is actioned in future. We saw people's dietary requirements are clearly detailed in people's care documentation and this information is available for staff in the kitchen. We saw people are given a choice of what they want to eat on a frequently changing menu. We saw that people can have other choices if they did not like the options for that day. People told us the food was good, they get enough, and always get a cooked meal at lunchtime. One person told us of another resident who regularly has an omelette made for them by care staff at midnight and that care workers cook them food in the middle of the night as well. We spoke with people and care staff who told us people could have a cooked option at breakfast if they wished which we also saw happening.

We also viewed documentation which shows, for example, logs in regards people's food and fluid intake and weight are being updated and tasks around these activities are being undertaken regularly. We were told by a health professional that there had been concerns in regards some people's food and fluid intake, they advised us since this had been

identified with the home, improvements in practice and the individual's condition had occurred. However, we saw in a sample of two people's personal plan documentation they were not being repositioned as prescribed in their care and support plan, this is an area for improvement, and we expect the provider to take action.

Throughout the inspection we saw care workers sitting with residents in the lounges, talking with them and interacting well. We saw mealtimes where care staff supported people well and encouraged people with their meals, however we did observe a mealtime where very little meaningful interaction for a few people with care staff took place. We spoke with the manager about this, and we found improvements in interactions between care staff and people occurred at teatime. We also viewed care workers helping people to move from the dining area back to the lounge appropriately, with compassion and in an unhurried and relaxed way, explaining to the person to give reassurance. We also saw people in their rooms supported by care staff quickly when required. People living at the home and care workers confirmed people could get up and go to bed whenever they wanted, and they could have a shower / bath when they wanted also.

Environment

As this was a focused inspection, we have not considered this theme in full.

People live in an environment suitable to their needs. The home is warm, welcoming, and decorated well throughout. The front door and all fire doors leading to the outside were closed and locked by magnetic door locks. After a recent incident occurred, the manager is looking into adding door closers to the front door to ensure the front door closes quickly, plus a bell so all staff are aware when the front door is opened. There is space for people to choose where they want to spend their time and during the inspection, we saw people sat in both lounges and the dining area. We viewed a selection of bedrooms and saw they are warm, clean and people can personalise them if they so wished. People told us they are happy living at the home. We observed daily cleaning being undertaken by the domestic staff; the home was clean throughout the inspection. Communal areas were hazard free ensuring people's safety.

Leadership and Management

As this was a focused inspection, we have not considered this theme in full.

At our last inspection, we identified an area for improvement around staffing levels, and training and continuity of agency staff. At this inspection we found the necessary improvements have been made. We spoke with care staff, and people living at the home who told us they felt there were enough staff on duty, and we saw documentation which confirmed this. The activities co-ordinator and one of the laundry assistants had recently left, we saw this has not impacted on the care and support people receive. Care workers during the afternoon were participating in activities with people and we spoke with the cleaner who advised us they had their hours increased to cover the vacant laundry workers role. People living at the home said that there were no issues with the laundry and keeping their clothes clean and ironed. We saw evidence the provider was actively recruiting for several positions and the provider had taken positive steps to fill these positions, by increasing the hourly pay rate and adding further incentives. We viewed paperwork which shows staffing levels are in line with the staffing levels managers advised us are expected. The manager advised us they are usually able to cover shifts fully unless they have little or no notice of a staff member not being able to work. The provider attempts to ensure the same staff from the agencies are employed to improve agency staff's knowledge of people's needs and to aid continuity of care. We saw rota's which confirmed this.

People are supported by trained care staff. We saw agency staff had their training qualifications checked and had to undergo an induction and manual handling competency before starting to work in the home. We saw the homes care workers are trained in areas such as manual handling and infection control. Both agency and the homes staff had undergone thorough recruitment checks in line with regulations.

The service provider has governance arrangements in place to support the smooth operation of the service and ensure high quality care and support is provided. Records show the RI visits the home and conducts regular audits of the service. A quality assurance review is undertaken to ensure people are satisfied with the service. We saw the RI undertakes their reviews of the service in line with regulations. We saw senior managers have a comprehensive range of audits in place to ensure the home is run effectively.

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
34	People's health, safety and well-being are at risk because the service does not have an adequate number of staff available. The service is using agency staff who are not always sufficiently trained and/or competent in moving and handling practices.	Achieved

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
21	People's personal plans are an accurate reflection of the care and support people require however, care staff are not always adhering to the prescribed care in relation to repositioning. Some repositioning charts are not always completed on time and as a result people are not being supported in line with their care and support needs.	New

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