



Inspection Report on

Elm

**Alexander House
Highfield Park
Denbigh
LL16 4LU**

Date Inspection Completed

24/06/2021

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About Elm

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Mental Health Care (Highfield Park) Limited
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes

Summary

Overall, we found that people living at Elm receive good quality care and support from a stable and committed staff team. Plans are person centred and very detailed regarding people's preferences, routines and how best to support them. Staff know people well and are able to communicate with them using different methods. Relatives felt involved in plans, reviews and arrangements for visiting. A professional, relatives and staff have provided positive feedback about the quality of life people have. People are protected from harm and abuse as staff are trained, have policies and procedures in place and are clear about reporting and recording any concerns. People live in a home which meets their needs in terms of providing plenty of space however; the environment is in need of improvement both inside and outside. Improvements are also required for hygiene and infection control and quality of care review.

Well-being

People have control over their day-to-day life. People follow their own routines each day with staff support and encouragement. Days and activities are well structured so people know what to expect. People are encouraged to make choices about what they want to do. Communication passports are in place and staff use different methods of communication to interact and involve people, visual pictures are also placed around the home for information and orientation. Relatives told us staff know people well, understand what they want and are finding out more about them and what they like to do. They also said they feel involved and are asked for their comments and suggestions regarding people's plans and reviews.

People's physical, mental health and emotional wellbeing needs are being met. Health needs are monitored, routine checks are made and professionals are involved as and when needed. A stable staff team know people well and are able to notice signs if they are feeling unwell or in pain. Health is promoted by encouraging regular exercise with healthier snacks and meal alternatives encouraged. Photos are on display of people engaging in and enjoying activities as well as spending time with their families. Staff and relatives told us about arrangements in place for people to keep in touch with their families and spend time with them away from the service including overnight visits.

People are safe and protected from abuse and neglect. Staff told us they receive safeguarding training, policies and procedures are available for them to read and they report any concerns about practice. CIW are notified as required and referrals are made to safeguarding if required. Detailed positive behaviour support plans are in place for staff to follow to ensure they provide the right support at the right time. Professional feedback was complimentary about the service and the approach used by both management and staff, which has reduced incidents.

People live in a home which supports them to achieve their wellbeing. We saw some rooms are personalised in keeping with people's preferences, we acknowledge this can be a slow process as it is done at people's own pace. The home has plenty of space for people to move around, with places to socialise as well as spend time alone. There is also some sensory equipment in different areas of the home, which we saw being used. The environment is in need of redecoration and repairs and improvements are needed regarding the outdoor areas.

Care and Support

People receive a service which consults with others to ensure they receive the right care and support. Relatives told us they had been sent information to look at for reviews, are asked for their input and felt involved in people's care and support. Professional feedback was positive about the open and honest working relationship they have with the service and they can visit anytime. Personal plans contain very detailed information due to the complex needs of people living at Elm and any health and social care professionals involved. People benefit from being supported by a familiar and consistent staff team. Important information has also been condensed to provide staff with a quick reminder of the support people need.

People are safeguarded. Staff receive training and there are policies and procedures in place for safeguarding, whistleblowing, complaints, accidents, incidents and use of physical intervention. Staff we spoke with are clear about their roles and responsibilities to keep people safe. Staff and relatives said they would be able to raise any concerns and this would be responded to. We asked how they responded to situations requiring physical restraint, responses showed a consistent approach with recording, reporting and reflecting on practice to improve this.

The service promotes some hygienic practices but improvements are needed to manage the risk of infection. Personal Protective Equipment (PPE) was available in the reception area and staff are wearing this correctly. They told us where they could access PPE and sanitiser as this was not kept in communal areas due to risks to people and staff. The medication, laundry and staff room did not have all the necessary equipment available to promote good hand hygiene. There are bins with no lids on them in different areas, we discussed this with the manager who took immediate action following the visit to replace all bins and provide equipment. The infection control policy and audits for cleanliness and infection control are not clear about who the infection control lead is or that checks and frequency have increased regarding Covid. We discussed with the RI that improvements are needed in relation to hygiene and infection control in order to fully meet the legal requirements. We have not issued a notice on this occasion, as immediate action had been taken and there was no significant impact for people using the service. This will be considered at the next inspection.

Environment

Care and support is provided in a suitable environment but improvements are needed. The service does take into account sensory needs of people. Shutters on window to keep light out at night and sensory boards and equipment are available in communal areas. Some bedrooms had been decorated and had personal items in place or evidence of these being introduced for people at their own pace. Some of the rooms are in need of more rigorous cleaning and this was discussed with the manager. There are signs of general wear and tear in different areas of the home, which are in need of some attention.

There is an outdoor area, which is accessible and private, but this is also in need of attention. The grassed area, although used by all people living at Elm, did not provide an attractive place for people to spend their time. Discussions with the manager and Responsible Individual (RI) identified some issues with drainage, which are currently being looked at with options being considered including non-slip decking. Items had been left outside to be collected included a mattress, broken gazebo and barbeque. The RI's three monthly report in April 2021 and the quality of care review in July 2021 identified that environmental improvements are needed. We discussed with the RI that improvements are needed in relation to the environment and outdoor areas in order to fully meet the legal requirements. We have not issued a notice on this occasion, as there was no immediate or significant impact for people using the service. This will be considered at the next inspection.

Risks to health and safety are identified and mitigated. There are policies and procedures in place for staff to follow. We saw that fire risk assessments, evacuations and Personal Emergency Evacuation Plans (PEEP's) are completed and staff receive fire safety training. Health and safety audit are also carried out but these should be signed and dated by the person completing them with the manager having oversight of this.

Leadership and Management

People are supported by appropriate numbers of staff who are suitably fit but some training needs updating to ensure they have the knowledge and skills they require to carry out their roles. Staff files contain the necessary information and relevant checks are made. Staff told us about their roles and responsibilities and were clear about actions they would take and whom they would report any concerns to. The manager and staff felt supported and receive supervision. Staff told us they receive the training they need.

According to training records, some staff updated training. We saw that staff are being booked on to training but this is being cancelled and rebooked again. We discussed with the manager and RI the reasons for this. The manager and RI are confident staff supporting people at the service have the training they need with induction arrangements in place as well as supervision and extra support for those awaiting initial or refresher training.

There is a culture of openness and honesty. We spoke with the manager and RI who told us of changes in management which had occurred and that this had been an unsettling time, but it was improving. Staff told us they are aware of policies and procedures and reporting any issues or concerns they have. Relatives also felt able to raise anything and commented on the good communication between the service and themselves. A professional commented they are currently very happy with the work Elm are doing, and the working relationship they have with them. The manager and RI liaise with CIW and other agencies when things go wrong and take action to put this right. Incidents of staff misconduct are dealt with promptly; investigations are completed and disciplinary policy and procedures are followed.

Governance arrangements are in place but the quality of care review needs to be more robust to continue to improve the service. The RI has completed three monthly visits to the service and writes a report. A quality of care review had been completed in July 2021 but this does not fully meet the regulations, as it does not include all of the required information. We have discussed with the RI that improvements are needed in relation to the quality of care review in order to fully meet the legal requirements. We have not issued a notice on this occasion, as there was no immediate or significant impact for people using the service. This will be considered at the next inspection.

Areas for improvement and action at, or since, the previous inspection. Achieved**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None	
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Areas where priority action is required

None	
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Areas where improvement is required

Regulation 56 hygiene and infection control	
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Regulation 44 (4) and 44 (10) Premises	
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Regulation 80 Quality of care review	
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The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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