



# Inspection Report on

**Oaklands Care Home**

**Oaklands  
Forge Road  
Crickhowell  
NP8 1LU**

**Date Inspection Completed**

29/02/2024

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## About Oaklands Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Europa Care Ltd
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	14 Oct 2022
Does this service promote Welsh language and culture?	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

People and their relatives are happy with the care and support provided by Oaklands Care Home. Sufficient staffing levels ensure people receive timely care and support. People have trusting relationships with familiar care staff who treat them with dignity and respect. Personal plans are in place to support the understanding of people's needs. Reviews are not always completed with the required frequency and need further improvement. There are regular opportunities for people to take part in activities. People's nutritional needs are considered, and meals are of a good quality. Care staff ensure medication is received as prescribed.

Care staff tell us they are happy working for the service and work well as a team. Management are described as supportive and accessible. Overall, the environment is comfortable and homely. Recruitment checks are completed to ensure staff are suitable to work for the service. Supervision and training is offered to support skills and ongoing development. Policies are up to date and sufficiently robust to support good practices. The Responsible Individual (RI) maintains oversight through regular monitoring visits and quality of care reports.

## Well-being

People can make choices and everyday decisions. Care staff we spoke with understand and follow people's routines and preferences. Care documentation contains person centred information which helps staff provide support in a way people like. People tell us they are able to make choices about their meals, activities and where or how they spend their day. One person commented *"I get up when I want and go to sleep when I want"*. Bedrooms appear personalised to reflect individual tastes and likes, comments include *"I've got my own things in my room and it's comfy"*. People report feeling comfortable expressing their views or any concerns with care staff and the wider management team. The RI visits regularly to gather feedback from people and relatives to ensure they are happy with the standard of care provided. Care staff support people to remain as well as they can be. We found an established team of care staff in place who are familiar with people's physical and emotional needs. Rotas viewed and feedback from people show there is adequate staffing levels to offer timely care and support. Records show people benefit from regular contact with health professionals. Nutritional needs are considered, and people have access to home cooked meals. Records evidence medication is effectively managed and administered. We found a range of activities are on offer and flexible visiting arrangements ensure people can maintain contact with family and friends and occupy their day. The reviewing of personal plans require strengthening to ensure these documents outline people's current needs.

People live in suitable accommodation. The environment appears clean and well-maintained. Fire safety and maintenance checks ensure people live in a safe environment. Communal areas are decorated and furnished to a good standard. Bedrooms appear personalized, are of a good size and support people's privacy. The service continues to work towards an ongoing programme of repairs and improvements.

People are supported to remain safe. The service provides suitable and safe accommodation with access restricted to authorised individuals. People are supported by care staff who understand their safeguarding duties. There are plans in place in the event of an emergency evacuation. A variety of policies and procedures are available to staff to promote people's safety and well-being. Pre-employment checks are completed to support safe recruitment of staff and ongoing training and supervision supports good practices. One person told us *"I feel safe here."*

The service does not currently provide a Welsh 'active offer.' At the time of inspection there were no Welsh speaking staff or people living at the service.

## Care and Support

Personal plans are in place however, the frequency of reviews require improvement. Care staff we spoke with know people well and understand how best to care for them. Personal plans outline people's medical, social histories and relationships which are important to them. The sample of plans viewed evidence these documents are not always reviewed to ensure they are up to date and reflect people's current needs. This means care staff do not always have access to accurate and up to date personal plans. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People's health needs are considered, and medication is managed effectively. Records show people attend health appointments and referrals are made in a timely manner as and when required. One visiting health professional commented *"The staff are brilliant. If we give instructions, they are always followed, and any concerns are dealt with immediately"*. Records show people's weights are monitored routinely, and the service encourages a healthy diet and lifestyle. We found medication records fully completed, storage arrangements to be safe and the overall administration of medication and controlled drugs to be effective.

People benefit from a varied diet and the service plans activities for those who wish to participate. The lunch time experience on the day of inspection appeared positive. Kitchen staff evidence they are aware of and cater for any specialist dietary needs. A four weekly menu offers a varied choice of meals as well as the possibility of off menu options to accommodate individual tastes. One person told us *"The food is excellent, there is a choice and I clean my plate."* People are able to attend a variety of group or individual activity sessions. This includes crafts, visiting entertainers, poetry reading, forestry days and trips to the local community. The service also has resident guineapigs which people can support to look after.

People and relatives have positive relationships with staff. We observed people appear relaxed and comfortable engaging with care staff. Staff respect people's privacy and we saw care is delivered with empathy and kindness. People's comments include *"It's a nice place"*, *"I know that the staff are there for me if I need them"*, and *"I feel at home here."* One relative stated *"I always feel welcomed"*, *"staff are very friendly, they are lovely"*, *"It's a family atmosphere"* and *"I feel they (people living at the service) are surrounded by love"*.

## **Environment**

The service provides a pleasant, comfortable, and homely environment. People's rooms are personalised with photographs and belongings which are important to them. Communal areas provide a space where people can relax, meet with family and friends, or participate in activities. These spaces are decorated and furnished to a good standard and appear warm and well presented. The garden is pleasant and well maintained with a level patio and lawned area.

There is evidence of ongoing investment within the service. The service is in the process of installing new bedroom carpeting throughout the building. Cosmetic work is being completed to brighten up bedrooms and communal areas. Kitchen and laundry facilities appear well appointed, and all equipment is fully functioning. The service has been awarded a four star rating by the Food Standards Agency, which means food hygiene standards are good. On the day of inspection, it was identified minor repairs were required to the shower cubical and these were undertaken immediately. One of the two bathrooms requires renovation work to make it suitable for use. Additional work also needs to be completed to the through floor lift which is currently out of order; we noted a stair lift has been installed in the interim as an alternative measure. The RI provided assurances these areas of work are in progress and will be completed within the next couple of months.

People receive support in a safe environment. Fire risk assessments are completed, and care staff organise fire drills and regular testing of fire safety equipment and smoke detectors. We saw all residents have personal emergency evacuation plans in place. Regular maintenance checks ensure all serviceable equipment has been checked to confirm they remain safe for use.

## **Leadership and Management**

Care staff feel they benefit from positive support and receive sufficient supervision. Care staff we spoke with tell us they receive an appropriate level of formal supervision and have frequent opportunities for informal catch up sessions with the management team. We saw evidence of supervision sessions being used to support professional development and consider any changes to policies or practices. Care staff tell us the management team are accessible and have a visible presence, they enjoy working for the service and feel supported and valued. Comments include *“It’s a lovely place to work”*, *“I think it’s a really good home”*, *“It’s a family home that’s how they try to run it”*, *“I like working here it’s a relaxed and fun atmosphere”* and *“I love my job”*.

The service ensures care staff are safely recruited and receive sufficient training. The staff files we viewed evidence the service obtains the required references and checks to ensure staff are of good character and hold the necessary skills. The training matrix confirms the service offers frequent training opportunities to support positive and safe care practices. Care staff tell us they receive regular training and are sufficiently knowledgeable and skilled to undertake their roles.

There are good arrangements in place to support the day-to-day running of the service. The staffing structure is clear and all staff we spoke with understand their roles and responsibilities. Regular audits of medication, health and safety and the environment ensure practices remain at a good standard. A sample of staffing rota’s we viewed show sufficient care staff in place to provide the right level of care and support. The RI completes three monthly visits and six monthly quality of care reports to ensure care meets people’s expectations, supports positive practices, and identifies any areas of improvement. The service has a range of policies and procedures, which are fit for purpose, and which care staff have a good working understanding of.

### 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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16	The provider does not complete reviews within the regulatory timeframe.	New
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