



Inspection Report on

Bay Tree House (WXM) Limited

**Bay Tree House
99 Norman Road
Wrexham
LL13 7BG**

Date Inspection Completed

18/01/2023

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About Bay Tree House (WXM) Limited

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Bay Tree House (WXM) Limited
Registered places	46
Language of the service	English
Previous Care Inspectorate Wales inspection	21 July 2022
Does this service provide the Welsh Language active offer?	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

The home is a warm, homely, and welcoming environment where people are cared for by kind, attentive and motivated staff.

Improvements have been made to the quality of care and support in the home since the last inspection. People are happy living here and feel well looked after. Care records show care is given using personalised care plans. Care staff know people well and have the training required to meet people's needs. Feedback from professionals is good and we found people have good health and well-being outcomes.

The service provider and Responsible Individual (RI) ensure there is appropriate governance and oversight of the day to day running of the service. They are actively recruiting permanent members of staff and are reducing their use of agency staff since taking on new staff.

Well-being

People live in a home which meets their needs and supports them achieving their goals for their mental and physical health and well-being. They have control over their lives day to day and told us they spend time doing activities they enjoy. The activities coordinator records details of activities people have enjoyed as part of their care records. People have personalised their rooms with objects and items of importance to them. One person who recently arrived told us they are looking forward to getting more of their own things into their room, and staff had "*made it their business*" to find out what they enjoy doing, and about their history. We saw that although staff know people's preferences well, they still offer people choice about how and where to spend their time, and what they want to eat, drink, or do throughout each day.

People are encouraged to maintain existing relationships and told us they have visitors regularly and have developed friendships with other residents and staff while living in the home. Care staff escalate concerns they have about people's care needs appropriately and in a timely way to management, and to social care and medical professionals. Staff receive training in safeguarding vulnerable people, and there are easily accessible policies and procedures in place to help them keep people safe in the home.

Care and Support

People's views, beliefs, needs, and preferences are considered when planning and supporting their care. Management collects a range of information to help them decide whether people's needs can be met before they move in. This information is gathered from people, their relatives or representatives, and any relevant health and social care professionals. The information is used to write personalised plans and risk assessments for how people's care and support needs and outcomes will be met in the home. These are regularly reviewed and updated as people's needs change. An electronic care planning and recording system ensures care staff can access current plans and risk assessments for people at all times of the day and night.

Care staff are kind, attentive and understand people's care and support needs. Care is given as described in people's personal plans, and staff take time to care for people at their individual pace. During our visit we saw people were well dressed, clean, and had brushed hair. We saw personal plans include people's preferences and likes and dislikes for how they wish to live and be supported day to day. Records show timely referrals are made to social care and health care professionals when needed. A professional who frequently visits the service told us they have no concerns about the care people receive, and staff are good at referring people to them as required.

People have experienced improved outcomes in their health and well-being since moving to the home. We saw feedback from social care professionals praising the home for care which led to improved health and increased well-being for a resident in the home. We saw one person who used a wheelchair to move around the home at our last inspection, now maintains their mobility by walking short distances with support from staff. People told us they feel "*very well looked after*" and care staff are "*over the top good*" to them. We saw people enjoying lunch together on large communal tables in the dining room; the home has a seasonal menu, and a range of options is offered at each meal. People told us they like the food.

People living in the home can be assured the service provider has policies and procedures in place to keep them safe. Infection prevention and control policies are followed by all staff and visitors to the service; this includes the availability of Personal Protective Equipment (PPE) and hand sanitising gel for use throughout the home. Records show the service provider acts in accordance with the Mental Capacity Act (2005) to ensure people are cared for in their best interests where they lack the capacity to make decisions for themselves.

Environment

The home is warm and well maintained. During both days we visited, the home was clean, tidy, and corridors were uncluttered. People have access to the equipment required to meet their needs, and this is maintained and serviced regularly. Management complete regular health and safety audits, and records show health and safety checks required by law are routinely completed. A handyman is employed to look after the maintenance and repair of all aspects of the décor inside and outside the building. The decoration is modern and homely, and people can choose to spend time in a variety of comfortable communal spaces.

There is a central courtyard which opens onto two of the communal rooms and provides a safe and colourful outside space for people to sit or wander. There is also a secure garden towards the front of the building, which is grassed and well maintained. There is a visiting pod currently being used for weekly visits by the hairdresser, and the frontage of the building is well maintained.

The service provider ensures domestic staff are on shift daily, and they have the equipment and supplies they need to keep the home clean. Since the last inspection an external company has been hired to complete a deep clean throughout the home, including upholstery and carpets. Policies and procedures are in place, and followed by staff, to maintain hygiene and health and safety throughout the home.

We saw some stocks of toiletries in a cupboard in the downstairs shower room. The manager told us these are kept for new residents who sometimes arrive at short notice without toiletries of their own. We saw people have their own toiletries in their rooms and secure storage available for personal belongings. We saw people's rooms are warm, comfortable, and clean. People told us they liked their bedrooms.

Leadership and Management

The service provider has governance arrangements in place for the oversight and development of the service. The RI works closely with the manager and visits the service frequently as part of their oversight role. Feedback from staff, residents, and their relatives on how to develop and improve the service is collated via group meetings and online surveys. We discussed the importance of the RI meeting with individuals and staff as part of regular visits, and the RI plans to improve record keeping in this area.

Since the last inspection the new manager has completed audits of the quality of care and support across the home and begun making any required changes and improvements. We saw additional training for staff has improved the detail and consistency of care planning and recording; the manager confirmed this is ongoing as more permanent staff are employed. Records show improved well-being and health for both long-term residents and recent arrivals to the home.

Staff personal files show they receive the training required to meet people's needs, and their skills and competencies are checked. Staff recently received additional training support in falls care pathways from local healthcare professionals and the manager has plans for additional medication training to improve the skills mix in the home. The main training record for the home does not accurately reflect the training staff have already completed, making it difficult to monitor training compliance and the skills mix across the home. We discussed this with the manager, who agreed to address this. We saw all staff have either recently had one to one supervision meetings with management, or have a meeting booked in the coming weeks. Staff told us they feel well supported by the manager.

Records show safe staff recruitment practices are used, including thorough vetting checks and inductions for new staff. The RI and manager confirmed lots of staff changes have happened since the last inspection, and they are actively recruiting staff through overseas sponsorship and local advertising. We found good staffing levels on the days we visited. Rotas show permanent and agency staff work alongside each other where agency staff are required to cover staff absence. The manager ensures continuity of care by requested the same individual agency staff for shifts. They also have access to people's personal plans and risk assessments and get to know people well. Residents and permanent staff told us they liked the agency staff, and one person told us they have built a good relationship with agency staff.

There are good supplies of food, equipment, and resources required to ensure people have the care and support they need in the home.

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
21	The service provider has not ensured care and support is provided in a respectful and caring way which protects, promotes, and maintains the safety, health, dignity, and well-being of individuals.	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
N/A	No non-compliance of this type was identified at this inspection	N/A
60	The service provider has failed to submit all relevant notifications to CIW in a timely manner, as required by regulations.	Achieved

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