



Inspection Report on

Oakwood Nursing Home

**Oakwood Nursing Home
Hazel Drive
Aberdare
CF44 8DB**

Date Inspection Completed

13/09/2023

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About Oakwood Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Cwmdare Home Ltd
Registered places	43
Language of the service	English
Previous Care Inspectorate Wales inspection	10 March 2023
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 receive good care from a warm and friendly staff team who know them well and can anticipate their needs. Care workers encourage people to interact with each other and engage in activities to occupy them throughout the day. Personal plans and risk assessments are reviewed and updated so care workers have all the relevant information needed to provide people with the right care at the right time. The manager is visible within the home and is heavily involved in its day to day running. Nurses liaise with healthcare professionals to support people with their physical and mental well-being. The staff team are suitably trained and supported in their roles. The environment is clean, and facilities and utilities are serviced and maintained. The manager feels supported by the Responsible Individual (RI). The RI has completed the required quality assurance monitoring.

Well-being

People are treated as individuals, in a warm and friendly way. We saw care workers asking people questions and encouraging them to make choices where they could. For those who are unable to make their own choices, or are unable to communicate these, we saw care workers choosing for them but explaining to them what was happening. Personal plans note people's preferences. The kitchen staff cook to people's specialist dietary needs. Feedback from people living at Oakwood and their visitors was that they were always dressed in clothes of their liking. Any issues or complaints can be raised with the manager, who has an open-door policy, or via the formal complaints process in place.

Care workers encourage people to interact with them, and each other. We saw one female who was walking around on her own be introduced to some other females sat talking together in the lounge. The care worker encouraged them to chat all together and include her in the activities together. Care workers set up activities for small groups, or individuals, and try to engage people with them throughout the day. We saw care workers striking up conversations with people when completing care tasks, explaining what was happening and why.

People are supported to be as healthy as they can be. Nurses liaise with GP's and Advanced Nurse Practitioners about individuals' health concerns. We also saw evidence of referrals to specialists such as dieticians or the specialist dementia intervention team. Guidance and treatment given is recorded in personal plans and medication is given as prescribed.

There are systems in place to protect people from harm and abuse. Risks to individual health and safety are included in personal plans and risk assessments, which are regularly reviewed. There are appropriate, updated, policies in place to guide staff in all areas, including safeguarding and whistleblowing. Safeguarding training is up to date for all staff and the manager is competent to engage in the safeguarding procedure when needed.

Care and Support

Feedback about the care and support people receive at Oaklands is positive. We spoke to people living at the service, their families, and visitors. They told us: *“It’s very nice living here”, “they nursed my mother back to health”, “I don’t think I would change anything here”*. A visiting professional told us: *“they always give us a warm welcome and it’s nice to come somewhere well organised and where staff know their residents very well”*.

Personal plans and risk assessments contain detailed information about care needs, preferences and interventions required. People can be confident that nurses and care workers have up to date and relevant information to be able to provide them with appropriate care because these are reviewed and updated regularly. Information regarding people’s care needs is handed over from each shift, and tasks or appointments kept in a diary on each floor. Care workers were able to answer any questions we had about the care and support people need.

Supplementary charts are in place. Training and support have been given to care workers to improve the consistency of repositioning records. Oral care records are not completed, although we found no evidence that oral care was not being carried out. Medication is stored safely and administered as prescribed. Nursing staff were able to also give us additional information on controlled drugs, and specialist medication that some people living in Oaklands need.

There are systems in place to promote infection control and good hygiene. There is some wear and tear to the décor and furnishings of the home, which the manager is aware of. Overall, the home is clean and tidy. We saw appropriate personal protective equipment (PPE) being used for close contact care, such as disposable aprons and gloves.

Environment

People live in an environment that supports their care and wellbeing. There are communal areas where people can spend time together, or they can choose to spend time alone in their bedrooms if they prefer. Bedrooms are decorated with people's personal possessions. There is some general wear and tear to the décor of the home, which the manager is addressing. The home has made a sensory room where the hairdresser does people's hair, and they can have a foot spa or hand massage. The home is secure, and visitors are greeted by a staff member on arrival and must sign in. Areas of the home that could pose possible hazards, such as the medication room and sluice room are locked. Care records and personal information are stored securely.

There is a rolling schedule of servicing and maintenance in place to ensure that equipment such as hoists and the lift are functional and safe for use. Fire equipment is checked and alarms and lighting are tested regularly, and water systems are checked for temperature regulation and legionella. People have individual personal emergency evacuation plans that are easily accessed in case of an emergency. There is a maintenance man on site to complete small jobs five days per week.

Leadership and Management

Care workers report a positive experience of working at Oakwood. They told us: *“I love working here”, “I love the residents but I also just love the place”, and “[manager] is very good and easy to talk to. We can be short staffed, but only when someone calls in sick. [Manager] always does their best to get someone else in”.*

At the time of the last inspection, we could not find evidence that the RI had been completing biannual quality of care reports as required. However, we saw at this inspection that this report had been done. Quarterly monitoring reports gather feedback from people and their visitors and take note of the standard of the environment. The manager reports that the RI is supportive and checks in with them regularly.

Appropriate recruitment and vetting checks are completed with staff to ensure they are fit for their role. We sampled staff personnel files which held all the required information, and all staff work with a current Disclosure and Barring Service (DBS) check in place. All staff are up to date with both mandatory training and some specialist training relevant to the needs of the people they support. During the last inspection, we found not all staff had been receiving regular one to one supervision with their line manager. However, in the last six months we saw evidence that all supervisions have been completed and there is a schedule in place to maintain the regularity of these moving forward.

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
80	A written report on the Quality of Care being provided by the service must be compiled at least every six months.	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
36	the provider is not compliant with regulation 36(2)(c). This is because staff do not consistently receive formal supervision every 3 months.	Achieved
36	Improvements are needed in staff attendance and completion of core training,	Achieved
73	RI visits need to be completed at least every three months.	Achieved

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