



Inspection Report on

The Conifers Care Home

Colwyn Bay

Date Inspection Completed

05/10/2023

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About The Conifers Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Inspired Homes Network Ltd.
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	21 September 2021
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 say they like living at this recently refurbished, well-maintained home. People are supported by warm, friendly and skilled staff. Staff know the residents well. People are supported to make choices about their daily lives. Personal plans are person-centred, detailed and up to date, they reflect people's needs and are reviewed regularly. Person-centred and group activities are on offer and staff support residents to take part.

Staff say they feel well supported by the management and they are provided with training to meet people's needs. There are strong governance arrangements in place. The Responsible Individual (RI) visits the home regularly to oversee management of the home. Views and opinions of people and relatives are gathered to help improve and develop the service and these are reflected in quality of care review reports. The environment is modern and clean and meets the needs of the people living in the home. There have been significant improvements made to the premises and facilities since our last inspection.

Well-being

People say they have control over their day to day lives. They feel they are listened to and their views are considered; they contribute to decisions that affect their life. Care staff work from personal plans that are written together with the person. Care staff cater for people's preferences. People and their relatives are involved with the improvement and development of the service. There are choices around food and activities that are on offer. Staff do what people ask them to do and people have help when they need it. Rooms are personalised and homely. Care records give care workers the instruction required to support people and reviews are carried out in line with regulations. The staff team know residents very well and have positive relationships with them. They support residents with medication, personal care, accessing the community, attending appointments to meet their health needs and all other aspects of their daily lives.

There are group and individual activities on offer at the home. People go to various activities that are tailored towards their specific likes and hobbies. We saw residents going out into their local community with the support of staff. People are supported to practice their faith if they wish to do so.

People are protected from abuse and neglect. Staff receive training in safeguarding vulnerable people and there are safeguarding policies and procedures in place. People are supported to maintain and improve their health and wellbeing through access to specialist care and advice when they need it. Referrals are made to professionals in a timely way and healthcare professional appointments and actions as a result are clearly documented.

The lay out of the home supports people to achieve a good standard of well-being. People are encouraged to be independent. They can get to the rooms they need to in the home safely. Strategies for reducing the risk to people while they move around the home are effective. The person in charge has identified potential hazards and addressed them in a timely manner.

Care and Support

Individuals are provided with the support they need in accordance with their personal plans and risk assessments. People are encouraged to co-produce their personal plans and have choice of everyday decisions such as their meals, clothes they wish to wear and times they get out of bed in the morning and go to bed at night. People can feel confident the service provider has an accurate and up to date plan for how their care is provided to meet their needs. A pre-assessment takes place before people move to the home; this is completed by the manager of the home. Personal plans are personalised, up to date, accurate and regularly reviewed. They are detailed and contain person-centred outcomes, likes, dislikes and preferences. Robust risk assessments are in place which are regularly reviewed and checked by the RI of the service. Documents are completed telling staff about people's history and how they came to live at the home. We saw care given as planned according to personal plans and risk assessments. Staff are informed of changes in need through handovers completed at the end of each shift.

People say staff are friendly, fun and helpful. We saw staff support people in a respectful and collaborative way. Relationships between staff and people are positive.

Mealtimes are relaxed, people have choices of what to eat and food is well-presented and appetising. A weekly menu is planned by the residents with meals they all enjoy. Dietary choices and preferences are shown in the kitchen, so staff are aware of them. There is appropriate manual handling equipment in place and clear guidance of how staff are to use it to support people safely.

Records show people have access to specialist advice and support from health and social care professionals and this is reflected in personal plans and risk assessments. Staff access training appropriate to the needs of the people living at the service, such as autism and learning disability training, challenging behaviour training and manual handling training. Staff feel they can approach the manager if they have any concerns in relation to the care and support needs of the people living in the home.

People can be satisfied the service promotes hygienic practices and manages risk of infection. Medicines administration, storage, infection prevention and control practices in the home are good and keep people safe. Staff administering medication have had the correct training and regular medication audits are carried out by management.

Environment

People live in an environment suitable to their needs. The service provider invests in the decoration and maintenance of the home to ensure it meets people's needs. The home has undergone a recent plan of refurbishment involving new flooring, carpets, general redecoration and a new level access, wheel-chair accessible wet room on the ground floor. The décor in the home is light and airy and people have painted their rooms in colours of their choosing. Resident bedrooms and communal areas are well maintained. There is a communal lounge and dining area as well as a garden for all residents to use. People can socialise in communal spaces or can choose to have time alone in their rooms.

People's rooms are spacious and light, they are clean, tidy and personalised. Each room has a television with inbuilt freeview. People personalise their rooms to their taste with their belongings and memorabilia from their favourite singers or football clubs. Moving and handling equipment is accessible for use when required but stored safely out of the way to prevent trips and falls. People say they like their rooms and enjoy spending time in them.

Gardens are accessible, secure and well-maintained, having been recently re-landscaped. Residents have free access to the garden from the main living spaces. There is an aviary in the back garden which residents enjoy. People access the home through a locked door, visitors are required to sign in and provide identification on arrival.

We saw staff cleaning around the building throughout our visit and saw all areas were clean and tidy. The service provider has infection prevention and control policies and good measures in place to keep people safe.

People can be confident the service provider identifies and mitigates risks to health and safety. Records show there are health and safety audits and actions are dealt with by maintenance staff. The manager and RI monitor and oversee the maintenance requirements of the home. The home has the highest food hygiene rating attainable. Routine health and safety checks for fire safety, water safety and equipment are completed. Records show required maintenance, safety and servicing checks for gas and electrical systems are all up to date.

Leadership and Management

People can feel confident the service provider has systems for governance and oversight of the service in place. We saw records of the regular RI visits to the service, who speaks directly with residents and care staff to gather their views, completes an inspection of the premises and views a selection of records. The RI monitors the outcomes of actions identified during previous visits. We saw evidence of monthly audits completed by management and action planning as a result. A quality of care survey is conducted by the home every six months. Residents and relatives give feedback through discussion with staff, the manager and the RI. Regular resident meetings are held. People say they can speak to the manager about changes to their care and action is taken. The provider has submitted an annual report as required by regulation.

People can be satisfied they will be supported by a service that provides appropriate numbers of staff who are suitably fit. Staff have the knowledge, competency, skills and qualifications to provide the levels of care and support required to enable people to achieve their personal outcomes. Records show the manager has suitable numbers of staff on each shift to support people's needs. Staff records show new staff undergo thorough vetting checks prior to starting in the home, and they receive an induction specific to their role. Staff receive annual appraisals and one to one supervision meetings with the manager at least quarterly.

Staff state they feel well supported by the manager and have access to the training required to meet people's needs. Training is provided to staff through a combination of online and face to face training. Training records are reviewed and updated to make sure they accurately reflect staff training compliance.

People can be confident the service provider has a thorough oversight of financial arrangements and investment in the service, so it is financially sustainable, supports people to be safe and achieve their personal outcomes.

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
28(1)	The service provider is not compliant with Regulation 28, Supporting individuals to manage their money.	Achieved
6	The service provider is not compliant with Regulation 6, Requirements in relation to the provision of the service.	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
79	The Responsible Individual must put suitable arrangements in place to ensure that the service provider's policies and procedures are kept up-to-date.	Achieved
16	Personal plans must be reviewed as and when required but at least every three months.	Achieved
44	The service provider is not compliant with regulation 44 (9) (a) (b) & (c) - bathroom facilities.	Achieved
44	The service provider is not compliant with regulation 44 (4) (h) - environment.	Achieved
36	The service provider is not compliant with regulation 36 - supporting and developing staff.	Achieved
33(2)	The service provider is not compliant with regulation 33 (2) - access to health and other services.	Achieved
34(1)(a)	The service provider is not compliant with regulation 34 - staffing.	Achieved
15	The service provider is not compliant with regulation 15 - personal plan.	Achieved

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