



Inspection Report on

The Oaks

**Llanidloes Road
Newtown
SY16 1HL**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

24/04/2023

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About The Oaks

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	The Oaks (Newtown Ltd.)
Registered places	73
Language of the service	Both
Previous Care Inspectorate Wales inspection	14/11/22
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are happy with the care and support they receive at The Oaks and have choice about how to spend their time, what to eat and how they would like care delivered. A dedicated activities team organise events, outings and in house activities which are person centred and offer stimulation to people. We received positive feedback from residents, staff, and families about The Oaks.

Improvements have been made to the quality of care records. They are specific to each person and contain information about what is important to them and how to deliver care in order to meet peoples needs. The provider has started to engage people and/or their representative in the reviewing of records. People's views are sought meaning they have a voice in how the service is run.

People live in a safe and clean environment which promotes their independence. People have appropriate equipment in place and are supported to access all areas of the home. The provider is committed to developing the environment with professional guidance to ensure it meets the needs of people living with Dementia.

The provider has implemented systems of monitoring and reviewing meaning they have a good oversight of all areas of the home. They identify where improvements are needed and set time specified actions to ensure these are addressed to improve the quality of the service. Improvements have been made to recruitment procedures, including agency staff which along with staff training and development, means people are supported by a suitably qualified staff team.

Well-being

People tell us they are happy living at The Oaks. Comments include “*Staff are very nice,*” and “*Lucky I am, went to holy mass yesterday and that’s important.*” We saw care staff are kind and interactive with people, taking time to talk, creating a fun, engaging atmosphere. We heard visitors making positive comments about care staff.

The provider has employed an activities team who speak with people and refer to care records telling us this is to ensure activities are person centred. Trips out are organised and people have enjoyed visits from singers, circus entertainers and animals. People are encouraged to take part in games and quizzes with the activities team ensuring people who choose not to participate in group activities are also engaged. Increased staffing levels mean staff have time to spend with people and in the afternoon, we saw people colouring, playing games, and making decorations for the coronation party with staff. Communal areas have items for people to engage with including sensory baskets, fidget books and soft toys which help occupy people’s hands and provide comfort. Staff also showed us pictorial aids to support people with communication. Records show meetings take place with residents and families. The activities team and catering manager facilitate these to gain peoples feedback and suggestions.

Care records are created with people or their representative and contain information about the persons life and what is important to them now. Records are reflective of peoples needs and document what support is needed including any associated risks. The electronic system creates reminders for when records need to be reviewed. Care staff use handheld devices to record information through the day and records were seen to be reflective of the support delivered.

People enjoy a positive meal experience. Menus are available bilingually and tables are set with placemats, cups, plates, and bowls which support independence. People’s dietary requirements are catered for, and we found meals to be visually appealing with staff commenting this had improved greatly for people on alternative diets. Care staff sit and eat with people to encourage conversation and promote eating of meals.

People are safe living at The Oaks because they are supported by staff who are suitable for the role and who have completed the required training. People have risk assessments in place and monitoring forms are reviewed on a regular basis. Safeguarding issues are reported appropriately and the manager has systems in place to monitor and review this.

Care and Support

People can be confident The Oaks are able to meet their care and support needs as a preadmission assessment is carried out by the manager with the person and/or their representative at their current residence. Information is gathered from people, local authority information and from the current provider. Profiles are created on the electronic system ahead of a person beginning their stay at The Oaks which is then reviewed and added to as new information is gathered. Where people are able, they are encouraged to visit the home to become familiar with the environment and staff.

Records consist of specific areas for care and support and are different for each person depending on need and risk. We saw records where a person had made their wishes clear of who they wanted involved and how they wanted care to be delivered. The person told us they were very happy living at The Oaks and said, *"I'm treated very very well, carers are very good to me, they see to all my needs."* Other records evidence discussions held with family members, including where there was a change to need or treatment plan. Care records contain information about people's life history, their hobbies, what is important to them now and approaches in order to communicate effectively.

People can choose how to spend their day. We saw some people up early whilst others choose to have breakfast in night clothes and then begin their morning routine. People can access communal areas of the floor they live on, spending time in the library, lounge or large dining area where people gather throughout the day for drinks, snacks and socialising. Staff support people to access other areas of the home to take part in activities such as walks in the garden or trips out. On the day of inspection people were getting ready for a trip to the seaside. Care staff are attentive and caring, they know people's routines, so the environment is calm and relaxed. Calls for support either verbally or using the bell system are met promptly and people who choose to stay in their rooms have access to the call bell system, drinks, and company through the day. The manager has implemented a system to check all call bells are working twice a day and this is recorded.

People are supported with health appointments and other engagements which are recorded in the daily diary. We saw visits from the physiotherapist, ophthalmologist, and psychiatrist. One person had a meeting with an advocate from Age Concern.

Improvements have been made to medication management. The provider has worked with the local authority to identify issues and implement processes to address these. There is now a consistent approach across all floors, and we saw clear guidance in medication rooms to support staff. Care staff are competent in using the electronic medication system and medication rounds are carried out in a timely way without interruption.

Environment

The home is purpose built and provides single ensuite rooms with several communal areas for people to access. Corridors allow for people to move about safely with seated areas to sit and talk with each other. Communal areas are large and allow access for people who require specialist chairs or moving and handling equipment. Each floor has an outdoor decked area which is safe for people to access for fresh air. Staff support people to access the garden on the ground floor where the weather permits.

The home is clean and tidy. Communal bathrooms are well equipped and maintained so people can enjoy using these areas during personal care. People's bedrooms are personalised, with photos, pictures, or memory boxes to help people find their room. The housekeeping team work hard to ensure people's rooms are clean and bedding is freshly laundered. Personal protective equipment (PPE) is available to staff as well as handwashing facilities in ensuite rooms, dependent on risk assessment.

People are safe living at The Oaks, there is CCTV to the exterior of the building and within some communal areas of the home. This is within the statement of purpose and clearly signposted throughout the home. People must sign in and out of the service and key codes keep specific areas secure, however families and friends of people living at the service are made aware of these and were observed to come and go throughout the day without restriction.

The provider has installed privacy film on ground floor bedroom windows which face the car park to ensure people are not overlooked by visitors accessing the car park.

Leadership and Management

Changes have been made to the management structure of the service, one staff member told us *“Things have really improved, systems have been put in place meaning we all work in the same way.”* Records show staff receive regular supervision and take part in meetings discussing all areas of the home including reflecting on care practice. Shifts are structured and staff are given specific allocations, this along with a new handover process has been well received by staff who spoke positively of the changes.

People are supported by well trained staff; records show completion of core training as well as additional specialist training through the local authority and private training facilitators. The organisation has invested in staff, supporting them to become trainers which means guidance and support can be accessed internally. The home has also made connections with other local providers inviting them to access courses at the home which benefits the wider care community. The provider has worked hard to improve staffing levels at the home successfully recruiting care and nursing staff. There has been a reduction in the use of agency staff. However, where this is necessary, the home communicates with agencies to ensure regular staff are attending the service who have had an induction and are suitably trained.

There are systems in place to ensure incidents, safeguarding concerns and complaints are recorded, responded to, and addressed appropriately. The manager communicates with the local safeguarding team and makes notifications to the regulator as required.

Communication and oversight has improved with senior carers on each floor facilitating handovers, daily allocations and reviewing actions in diaries and communication books.

Improvements have been made to recruitment practice. We reviewed staff records and found the required checks are carried out prior to a person commencing work at the service, ensuring they are fit and suitable to work with people at risk. Agency staff are consistent and know the home. There is an agency file so staff can check the identification of people and complete an induction with them on their first shift.

There are processes in place to ensure the ongoing quality monitoring of the service. Audits are completed within the home by the management and senior team with additional quarterly audits completed by the organisation. We saw the most recent audit had identified areas to be addressed, specified a date of when this was to be achieved and who would be responsible for this. On the day of our visit a number of the actions identified in this audit had already been actioned and completed. The latest quality of care report specified what improvements had been made and what the current priorities are. Feedback included comments from people and their families gathered through surveys, resident and family meetings and online review platforms.

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	The provider does not effectively monitor, review and oversee the quality of the service.	Achieved
15	Personal plans are not always completed and do not evidence peoples involvement in determining care needs or delivery.	Achieved
35	The provider does not ensure staff are recruited in line with the regulations.	Achieved
34	The provider has not ensured that the service employs sufficient number of suitably qualified staff, including registered nurses.	Achieved
6	The provider has not ensured the home is effectively	Achieved

	managed in a way that meets people's needs, keeps them safe and is in their best interests.	
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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

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