



Inspection Report on

The Oaks

**Larch Avenue
Shotton
Deeside
Shotton
CH5 1NF**

Date Inspection Completed

04/12/2023

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About The Oaks

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Sapphire Streams Limited
Registered places	26
Language of the service	Both
Previous Care Inspectorate Wales inspection	21 March 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People receive good care and support from staff who know them well and can effectively meet their needs. People have detailed personal plans and improvements have been made to record keeping so they more accurately reflect the care and support offered by staff. Plenty of activities are provided for individuals to participate in, either as a group or on a one-to-one basis.

Positive improvements have been made to the recruitment process and staff feel well supported, supervised and trained to carry out their roles effectively. They told us they work well as a team and are very complimentary about the manager.

The home is being redecorated, with new furniture and themed areas created which are purposeful, provide places of interest for people and promote their independence. There are plans to continue to enhance the environment.

There is good oversight and management of the service. The responsible individual (RI) carries out their visits looking at any issues or actions to be taken. The manager is enthusiastic, committed and is actively looking for new ideas to further develop the service.

This was a focused inspection so we did not consider all four themes in detail.

Well-being

People have control over their day-to-day life and are able to make choices. Personal plans include information about people's preferences, their likes, dislikes and how best to communicate with them. This helps staff to support people more effectively in making their own decisions, offering them choices and using visual aids to assist with this. Menu choices include the use of visual cards to ensure people pick the food they really like. People are consulted about changes they want to make including activities and suggest prizes they would prefer to win.

People's physical, mental health and emotional wellbeing needs are being met. Health information is clearly recorded in personal plans. Health needs are closely monitored with clear instructions for staff about when to seek further advice and support from professionals. A new activities person has been employed and spends time getting to know people and their families to find out what they like and enjoy. The activities person offers group activities which are purposeful and interesting. They also spend quality time with people on an individual basis. On the day of the inspection visit, a person was being admitted into the service. The manager and staff introduced themselves and helped them to settle in. Visitors are made to feel welcome by staff they are familiar with. A relative told us they are pleased with the care and support offered by staff and are made to feel welcome when they visit.

People are protected from abuse and neglect. The manager is trained to provide safeguarding training for the staff team. Assessments are completed with clear actions for staff to take to further reduce any risks. A relative told us they feel able to raise any concerns. We saw relatives calling in to the office to discuss and check things out with the manager.

People live in a home which is suitable for them. It is warm, inviting, well-furnished and nicely decorated including lots of Christmas decorations. Rooms are personalised with photos and belongings that are important to people. There are items of interest for people to look at and different places for them to sit. They are able to move around their home and spend time either on their own or in the company of others.

Care and Support

People have personal plans which are kept up to date. Plans are detailed and consistent with other information to ensure people receive the right care and support from staff. Information includes people's life histories, relationships, families and past times as well as what and who is important to them now. Plans are reviewed to ensure they remain relevant and are kept updated. There are clear instructions for staff about what to do when people's needs change. Personal plans focus on people's strengths to support them to continue to be independent where possible. Their preferences, likes and dislikes are recorded for staff to be aware of.

People are provided with consistent care and support by a service which includes them and their relatives and considers their personal wishes and any risks. Assessments are carried out to reduce any risks to keep people safe and well. Appointments and referrals are made to health professionals and information is recorded regarding any advice or additional support to be provided. Staff complete electronic records which show what care and support has been offered and when. Monitoring records and checks are also completed in line with people's plans. A new activities person spends time sitting and chatting with people and their relatives to find out what their interests are. Records are kept of all activities including what people like to do, what works well and photos of people getting involved and enjoying themselves. We saw people making Christmas decorations and they showed us the finished product.

The service promotes hygienic practices and manages risk of infection. Infection control audits are completed to identify what is working well and any areas to be improved. Staff receive training in infection control and they have access to personal protective equipment (PPE). The general cleanliness throughout the home is good.

Environment

People live in a homely environment. Lots of Christmas decorations have been put up around the home to get people in the festive spirit. Doors to people's rooms are decorated like front doors with handmade Christmas wreaths on them which they have made with the activity's person. Rooms we looked at are personalised, reflecting people's own tastes and preferences with items and photographs that are important to them. They are cosy and warm with matching bed linen and the manager told us that new bedding is purchased and replaced as and when needed.

The environment is safe, secure and maintained. There are effective measures in place to identify and make improvements to the general environment and work is ongoing. The manager completes daily walkarounds to make sure everything is in order and domestic staff ensure the home is kept clean. Equipment is also checked to ensure it is being cleaned to the expected standard. We discussed some issues with the manager which are already being addressed. Some areas of the home have been redecorated in different colours and new furniture has been purchased which is easier to clean and more practical. A kitchenette area, café style dining room and a bar have been created, promoting people's independence and aiding orientation, with snacks and drinks available for them. Work is ongoing and there is a home improvement plan in place. The manager told us they would like to create a more dementia friendly environment and they have been getting ideas from other services to consider. When the RI visits the home, they look at any environmental issues and report and act on them.

Leadership and Management

People are supported by appropriate numbers of staff who are recruited, supervised and trained to carry out their roles effectively. The manager told us the service is currently over staffed. Staff also told us they are happy to help out and will come in to cover any shifts if needed. Improvements have been made to ensure there is a more robust recruitment process. Staff files contain all the relevant documentation including disclosure and barring service (DBS) checks. Comprehensive induction records are completed with new staff to make sure they understand the service and their roles and responsibilities.

Staff told us they are well supported and receive supervisions. These are beneficial and help to improve their practice as well as providing an opportunity to raise any issues. Staff told us they are happy working at the home. Comments from staff include the care workers *“are great here”* and make you feel included. Staff also complete their own one-page profiles which are on display for people and visitors to read and get to know them. Training is provided for staff either online or face to face. The manager has completed train the trainer courses and is able to provide this for certain subjects including safeguarding and manual handling.

The service is consistently well-managed, led and the general oversight has improved. Improvements have been made regarding record keeping, recruitment, training, supervision and the environment. Staff are positive and complimentary about the manager who is keen to make further improvements to the service and promotes a positive culture. The manager feels well supported by the RI who completes three monthly visits to the service and produces a six-monthly report. This identifies what is working well and any areas for improvement. The manager works together with a senior manager and comprehensive meetings take place to discuss the service in detail, any actions needed and lessons are learnt.

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
59	Daily records or records of specific interventions and correspondence, reports and records regarding additional support provided by health and other services are not accurate, comprehensive or clear about actions taken. Ensure that records are kept and maintained as specified in Schedule 2 of the Regulations.	Achieved
35	The provider has failed to ensure there is an robust recruitment in place. Ensure that applications forms are completed including a full employment history, two forms of identification and two references are obtained and issue or expiry dates of disclosure and barring service checks recorded on staff files.	Achieved

44	The service provider has not ensured that individuals' care and support is provided in a well maintained, clean and safe environment. Ensure that the home is suitably furnished, free from hazards to health and safety, properly maintained and kept clean to an appropriate standard.	Achieved
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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
36	The provider has not ensured that staff undertake a thorough induction and complete a probationary process with regular supervisions and training for their roles. Ensure that documentation is completed to evidence that staff have completed their inductions and probationary period, have quarterly supervision sessions and training records for all staff are available.	Achieved

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