



# Inspection Report on

**Apple Residential Care**

**Apple Residential Care Home  
12 Rivières Avenue  
Colwyn Bay  
LL29 7DP**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

1 July 2022

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## About Apple Residential Care

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	APPLE BEST CARE LTD
Registered places	16
Language of the service	Both
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since it was re-registered under the Registration and Inspection of Social Care (Wales) Act 2016.
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 living in the home are very satisfied with the care and support they receive, the food and their surroundings. The environment is homely, and people choose the décor of their own rooms. Further redecoration, new furniture and improved maintenance are required, and this is being addressed.

Staff are trained to carry out their role and are vetted before employment. There are currently insufficient staff to ensure contingencies during periods of sickness and other unexpected staff absence; the manager is taking steps to address this.

Regular reviews of people's care needs take place involving people and their family and this helps ensure care delivery information is accurate and up to date. People are supported to engage in activities that reflect their own unique interests and hobbies. They utilise local facilities and socialise with family and friends frequently to stay connected.

The provider of the service has a good insight about how it is operating with regular visits to the home and frequent communication with the manager. A recent quality of care review has considered what is working well and identified areas for improvement to further enhance the service. People are fully involved in what happens at the service, their views regularly canvassed on matters important to them.

## Well-being

People have choice and control regarding the care and support they receive at the home. They choose how to spend their day and carry out their daily routines. Care planning documentation records people's preferences and dislikes and we saw evidence this is accommodated. People feel part of their community as they are supported to use local facilities and socialise with their friends and family. People have different interests and hobbies, goals, and aspirations; they are treated as individuals and supported to do what they want to do.

People's physical, mental, and emotional well-being is looked after by trained staff who support people to attend health appointments and seek advice on their rights such as for benefits and financial help or their ability to work and volunteer. Meals taken and food choices are recorded, and people's weight is monitored to promote their wellbeing. People's care and support needs are reviewed every three months by senior staff so that any changes can be quickly identified.

People are protected against poor practices, abuse and neglect as staff are trained in the subject of safeguarding and there are policies in place to guide them. A safeguarding supervision form has been introduced to allow staff to make reports. The manager communicates promptly with any concerns and monitors' practice.

The accommodation has benefited from recent refurbishment in some bedrooms, but more is needed. Further work is planned during which other bedrooms will be refurbished. New furniture is to be ordered and will be fitted imminently, and communal areas such as halls and corridors will be decorated to make the home more aesthetically pleasing. The lounges are comfortably furnished and provide a homely space for people to relax or socialise.

## Care and Support

People have the quality of care and support they need as their personal plans are completed with their involvement; they are kept accurate and consider their wishes, preferences, physical, mental, and emotional needs. Risk assessments ensure people can carry out their day as they wish and with independence, but also with the right amount of support if any is needed. Potential risks attached to a range of activities is considered such as using heated hair straighteners, going out unsupervised, being out late at night and having a kettle in the person's own room. People are kept as safe as they can be while maintaining their independence. We saw the service reviews each personal plan every three months to make sure they are still accurate, and people sign to agree plans reflect their needs and wishes. A personal profile section of the planning documentation offers a more personal account of people's history, their interests and what is important to them. Each person has an activities care plan which outlines the various ways they occupy themselves in any week. We saw some people do voluntary work and are learning independence skills such as cooking. People socialise in the community with their friends and family and attend local facilities such as hair salons and the library. People are asked about their preferred language and are given the opportunity to have their plans written in Welsh or bilingually if they wish. All staff are required to read the whole personal plan, so they are very familiar with the people they support. Monthly resident's meetings ask people's views of the service and in particular the food options and activities. We spoke with people who said, *'the food is perfect'*, *'everything is fine'*, and *'people respect each other, and we all get on'*. Another resident expressed great fondness for the manager. We saw the staff and manager interact in a kind respectful manner with the people around them.

People's physical, mental, and emotional well-being is looked after by care staff who seek professional advice when required. We saw records of appointments with health professionals, dentists, and G. P's and mental health services. Nutritional intake is recorded, and people's weight is monitored to help ensure swift identification of any issues. Staff have trained in the needs of people with diabetes and in food hygiene and food safety. The Food Standards Agency awarded the home a rating of 5 in 2019 when it was last visited, which is the best it can be.

The service promotes practices to manage the risk of infection. Measures are taken to reduce the risk of Coronavirus and staff wear face masks. We saw hand sanitisers around the home available for use.

## Environment

The service provides an environment with sufficient space for people to move around freely and make choices about where they want to spend their day. Two homely lounges provide a quiet space and one for socialising with comfortable sofas and armchairs and lots of natural light. We saw some furniture items needed replacing or repairing in some bedrooms, but the manager aims to resolve these matters imminently. Everyone has their own bedroom with en-suite facilities. Bedrooms are in the process of being decorated with some having been completed. People told us they chose their colours and helped with the painting. We saw there are areas of the home in need of painting and decorating; woodwork in halls and corridors is scuffed and paint is peeled. Extensive use of antibacterial liquids and cleaning solutions has caused softening of the paint in some areas. The manager has had trouble employing tradesmen during the Coronavirus pandemic, but now restrictions are more relaxed, is seeking to employ the services of decorators again. The home is also looking to employ a maintenance person on site so that little repairs and maintenance tasks can be completed more quickly.

The service provides an active offer of the Welsh language; we saw references to the Welsh language in some signage around the home, five staff can speak fluent Welsh and documents are translated for people who prefer to read in Welsh. Staff are trained in Welsh language and culture and know the importance of promoting this in the home.

People told us they are happy there are two lounges, and they are happy with their bedroom. We saw people make use of the garden and the area immediately surrounding the home; there is a place for people to smoke if they wish to.

The service provider has measures in place to identify and mitigate risks and maintain important facilities and equipment. We saw risk assessments for the home and individuals. Incidents of falls are monitored and evaluated to identify themes and make risk management more effective. Records show maintenance and safety checks are completed for water, fire equipment, electrical appliances, and electricity installation. Staff have received training to enhance safety such as fire safety, first aid, food hygiene, health and safety and moving and handling.

## Leadership and Management

The provider has governance arrangements in place to help ensure the service is effective and the responsible individual has good oversight of the service. The manager carries out audits of rooms to check if any repairs need attending to and completes audits on medication administration and records. The responsible individual visits the home to complete audits, speak to people living in the home and to check progress of the service. The responsible individual completed a 'Quality of Care Review' in February 2022 and the report shows what the service is doing well, and which areas could be improved.

The manager has a range of policies and procedures in place to help instruct staff and keep residents safe. Staff are employed only after checks are carried out to ensure they are fit for the role; training is provided to ensure people have the expertise they need to carry out their responsibilities safely. Records show the manager expects staff to be reliable; she recognises it is important for people to experience continuity from the staff who support them. The service aims to have at least two support workers on duty every day and two senior staff including the manager. On the day of our visit, staff were absent due to sickness and other staff had not been able to cover these absences. While there was no impact on this day, the manager recognises this is not satisfactory. An additional two staff are being employed to ensure sufficient staff are available for contingencies. While no additional immediate action is required, this is an area for improvement, and we expect the provider to take action.

Staff receive support from their manager, with regular opportunities to meet and discuss practice. The manager receives similar support from the responsible individual who represents the provider of the service and ensures good oversight. We spoke with some people living in the home who expressed their great satisfaction with the staff. People said staff are '*spot on.*'

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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

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
34	<p><i>"The services statement of purpose states "On a weekday staffing consists of Manager, Deputy, two support staff and a domestic."</i></p> <p><i>On the day of our visit (a weekday), the deputy was</i></p>	New



*absent due to sickness, there was no cook due to sickness. There was only one support staff and the manager present who were responsible for supporting 15 people in the home.*

*Staff A was a new perspective employee who was just shadowing.*

*The manager explained 'Staff D (cook) was absent due to sickness as was Staff E.*

*All people are physically independent with mental health needs. There was no set social activity for residents on Friday, so therefore any impact would be minimal. The only impact it had was that any spontaneous activity rather than a planned one could not go ahead. But if it had been requested, then the service would 'look at it being undertaken at the next available opportunity.' The manager explained there are three 'bank' staff but none of these were able to cover the shift. Two additional staff have been appointed to start imminently.*

*While there was no impact, better contingency plans are needed for the future."*

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