



Inspection Report on

Hayes Healthcare Limited (Trading as Conifers Care Home)

**Stryt Las
Ruabon
Wrexham
LL14 6RB**

Date Inspection Completed

08/05/2024

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About Hayes Healthcare Limited (Trading as Conifers Care Home)

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Hayes Healthcare Limited
Registered places	27
Language of the service	English
Previous Care Inspectorate Wales inspection	3 May 2023
Does this service promote Welsh language and culture?	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 enjoy living in the home and praise the staff, the quantity and quality of food provided and the range of entertainment and stimulating activities available. The accommodation meets people's needs as it is spacious and offers various communal areas to meet and socialise with each other. Bedrooms are personalised, clean and comfortably equipped to meet people's needs. Communal areas are decorated to a good standard.

Choice is respected and people's views sought. People choose where and what they eat, and how they carry out their daily routines. Care staff are well trained, caring, and respectful, interacting positively and cheerfully with people. Staffing levels are adequate, and support is delivered promptly. The Responsible Individual (RI) visits the home on a regular basis; however, the provider needs to recruit a registered manager.

The provider of the service has good insight about how it is operating, with regular audits of various elements of care and a six-monthly quality of care review. Surveys are distributed to relatives and people living in the service to ascertain their views and identify any changes or improvements required.

Well-being

People have choice and control regarding the care and support they receive at the home. They choose how and where to spend their day within the home and its grounds. People have choice about how they carry out their daily routines, including rising in the morning, going to bed at night and where they eat their meals. People choose from various meal options, and they enjoy the food very much. Personal plans record people's preferences and dislikes and offer a clear picture of people's background, history, and previous interests.

People's physical, mental, and emotional well-being is looked after by care staff who seek professional advice when needed. Appointments are made with a range of health professionals when people need advice and guidance. People's care and support needs are reviewed as required, so that any changes can be identified quickly. Care workers are trained in relevant topics to help ensure safe and effective practice. Staffing levels are adequate.

People are protected against poor practices, abuse, and neglect. Staff are trained in safeguarding and there are policies in place to guide them. Daily meetings between senior staff and care staff provide opportunities to discuss any concerns and share new information about any changes in people's care requirements. Risk assessments and personal plans are accurate and reviewed in a timely fashion. Training records show care staff have undergone the training provided by the home. The provider also needs to ensure that a manager is recruited, and registered with Social Care Wales (SCW)

The home provides spacious accommodation and a variety of communal spaces for people to sit and spend their day. People have personalised rooms furnished to suit their needs, and people have access to clean bedding. Outside space provides seating and shelter for those wanting to spend time in the different outside areas. The home itself is secure with coded keypads on the entrance door and all visitors must sign in.

Care and Support

People have the quality of care and support they need as their personal plans are kept up to date and consider all of their well-being needs. We saw personal plans give a real picture of people, their lives, their history and their needs and preferences. Records show these are reviewed regularly to keep them accurate. Each section of the plan is considered in line with people's care needs. Senior staff complete risk assessments and put measures in place to protect people. Personal plans provide direction for staff on how to support individuals and are an accurate reflection of the needs of the individual.

Records show people are entertained and stimulated in a variety of ways. We spoke with people who confirmed they gain great pleasure from a range of activities, one person told us *"There are enough activities going on, the activities co-ordinator is good."* We saw two Welsh ponies were brought to the home in the morning for people to pet and interact with outside. In the afternoon people were involved in VE day celebrations, both these activities were enjoyed by all who participated. We were also shown evidence of a wide range of activities undertaken, such as magician's visiting, people involved in cooking, activities and crafts being provided such as gardening and flower arranging. One person said, *"It's lovely here, I get on with everyone... staff and managers are brilliant."* We saw people have choice of the food they could eat and saw them enjoying their meals and commenting the food they were eating was *"beautiful."* We saw staff respond to people with patience, interacting with kindness and respect.

People's physical, mental, and emotional well-being is looked after by care staff who know when to seek professional advice. Records evidence appointments are arranged with health care professionals and was confirmed by a professional who we spoke with who said, *"Managers and staff are receptive and alert us if there is a problem and bring appropriate issues to us...the staff deal with issues well."* We saw people are well kempt and there is no issues with people's diet or weight, this was confirmed by the professional we spoke with. The medication administration system is robust with managers being alerted immediately to any issues if they should arise. Medication is administered as prescribed.

Environment

The service provides care and support in an environment and location suitable to meet people's needs. There is sufficient space for people to move around freely and make choices about where they want to spend their day. Lounges are homely with armchairs for people to sit and relax. We saw people in the lounge watching television and others painting, records show activities also take place here. Separate dining facilities accommodate those who want to use them, but people can choose to eat in their rooms if they wish. The tables in the dining rooms were set beautifully with matching tablecloths, cutlery, glasses, flowers, and menus for the day. Equipment is provided to enable and enhance mobility.

Everyone has their own bedroom with en-suite facilities. Bedrooms are well decorated. Communal areas have been decorated well, which makes the environment bright and welcoming. There are a range of pictures and collages on the walls in these communal spaces. Rooms are redecorated when they become vacant, so they are clean and bright for any future occupants. Special equipment is provided when it is needed; we saw special aids to enhance people's independence. The kitchen is clean and well organised; the Food Standards Agency has awarded the kitchen a rating of 5 which means the hygiene standards are very good. The outside spaces are suitable for the people who currently live in the home. There is garden furniture, large planters, and shelter for people to sit under and these areas are secure. We saw people enjoying being in these outdoor areas.

The home is clean throughout. We saw the home being cleaned during the inspection and records which show a daily clean, and a monthly deep clean of the whole building is undertaken. People's laundry is done regularly, everyone is well kempt and wears clean clothes. Bedding in people's rooms is clean. People we spoke with confirmed bedding is changed regularly. We saw risk assessments for the home and for 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 areas such as; water, fire equipment, fire risk and electricity installation.

Leadership and Management

The provider has governance arrangements in place to help ensure the service is effective and the RI has oversight. The RI provides support to the deputy manager and has a program of audits they complete to check practices are safe in line with policy and procedures. The RI completes a quality of care review every six months. They also undertake their three-monthly reviews of the service appropriately and produces a report regarding this. There are a range of policies, such as safeguarding and medication in place to ensure the service is run safely and as intended.

The RI and deputy manager's regular presence at the home allows plenty of opportunity for staff to discuss any issues. We spoke with care staff who told us they feel comfortable in expressing their views and concerns. They receive one to one supervision and appraisals to check on their practice and share their views. Staff told us they enjoy working. One said *"I love it here, it's a brilliant team. Management are great, the deputy manager is great, and I get good support from the deputy manager... I see the RI a couple of times a week and I get good guidance from the deputy manager."*

People are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge to provide the care and support required. Staff records show safe recruitment procedures are in place and people are properly vetted before employment. People told us they don't have to wait for assistance, they can have a bath or shower whenever they want, call bells are answered in a timely fashion and care staff come quickly. Care staff told us there are enough staff on duty which was confirmed by records we saw. The service has been without a registered manager for at least the last twelve months. A deputy manager currently undertakes the role of the manager whilst the provider is recruiting for a registered manager. This is an area for improvement, and we expect the provider to take action.

At our last inspection we identified an area for improvement around the training of care workers. At this inspection we found improvements have been made. Training is up to date for care staff in essential areas such as, dementia support; oral health; safeguarding; infection control; nutrition and diet; pressure care; and moving and handling. This was confirmed by records we saw and care staff who said they received plenty of training.

We saw the provider has and is investing further in the home, for example the home has recently been decorated internally and had a new roof on the kitchenette.

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

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
67	The service has been without a manager registered with Social Care Wales for at least 12 months.	Not Achieved
36	Some staff training has not been undertaken by care staff.	Achieved

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