

Inspection Report on

Wellfield Rest Home

Wellfield Rest Home 1 Wood Lane Hawarden Deeside CH5 3JD

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

06/03/2024

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About Wellfield Rest Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pearlcare(Wellfield)Ltd
Registered places	30
Language of the service	Both
Previous Care Inspectorate Wales inspection	23 June 2022
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 are happy and are supported to live their lives as they choose. Their voices are heard, and their independence is promoted. People's health needs are understood by care staff, and timely referrals are made to the appropriate professionals to seek advice and guidance when needed. The home is supported by a range of health professionals to ensure people receive the care they need to remain as healthy as possible. People are well kempt and everyone we spoke with confirmed people can have baths or showers whenever they wish.

Care is delivered by an enthusiastic and familiar staff team, led by effective senior managers. Care documentation accurately reflects people are cared for appropriately and in line with their personal plans.

The home provides a comfortable environment for people to live in which is safe, well looked after, and meets their needs. The environment is warm and clean. The Responsible Individual (RI) has oversight and visits the service regularly. There are clear systems in place to monitor the quality of care provided, and the RI's three-monthly report and the services six monthly reviews are being undertaken as per the regulations and are detailed.

Well-being

People are supported with their physical and social wellbeing. People spoken with are complimentary of the care staff and management of the home. We observed care staff assisting people calmly with dignity and respect. Care records give care workers the instruction required to support people accurately and are reviewed appropriately. We spoke with care staff and saw documentation which show referrals to relevant health care professionals are made in a timely way. We observed care workers have good knowledge of people's needs, refer to people in a positive way and it is clear they know the people they support well. We saw people being helped by care workers appropriately, not being hurried, in a kind and gentle manner.

People can exercise choice and control over their every-day lives. We observed people enjoying the company of others in various seating areas. We observed interactions with people by care staff to be considerate and respectful of people's wishes. There is a choice regarding meals, and we saw people having alternatives if they do not like what is on the menu. We observed and people told us they can get up and go to bed when they wish. The provider seeks the views of people living at Wellfield and the staff team.

People are protected from potential harm, abuse, or neglect. Care staff records are checked robustly. Training records show care staff have undergone appropriate training. There is a robust set of management audits in place which ensure any risks are minimized.

The home is clean, warm, comfortable and bedrooms reflect individuality. We viewed documentation which showed maintenance work had been identified. It is clear the provider is investing in the home.

Care and Support

People can be confident staff have an up-to-date plan of how their care is provided. Personal plans are in place, reviewed regularly, and care workers told us documentation gives them enough instruction to undertake their role. This was confirmed by documents we viewed. People's personal plans and risk assessments give a detailed history of their medical conditions and reflect outcomes in professional and health care professionals' documentation. We viewed staff handover documentation which was detailed. Care workers spoken with confirm personal plans and risk assessments are an accurate reflection of the person they are supporting. We spoke with people whom all felt care staff support them in a timely way, discuss their care with them and support them in the way they wish. One person told us *"Staff are good, they know what they are doing, they are very good and have good skills."*

Care and support are provided in a way which protects and maintains the safety and wellbeing of individuals. We saw care workers supporting people appropriately, at the persons own pace and with dignity and respect. People spoken with confirmed care staff are kind and gentle when supporting them. Someone told *us "I like it here, I landed on my feet when I moved in…staff are brilliant with me…Staff are patient with me and are gentle."* People are well kempt, and able to have a bath or shower whenever they wish. We saw people's dietary requirements are clearly detailed in people's care documentation and this information is available for staff in the kitchen and reflects information held in professional documentation.

People can be confident they are provided with quality care and support, and the provider takes into consideration their personal wishes. We saw people are given preferences of what food they can have at mealtimes through menus, and we saw people who, when they told staff they did not like the options, were given something different of their choosing. People spoken with also confirmed this happened and the food was good. Someone told us *"The food is good here; I get choice and I get enough."* We saw people enjoying each other's company and spending time with care workers. We observed care staff interacting with people appropriately at their eye level and at the person's pace.

We viewed an independent pharmacy report after a previous pharmacists visit which was complimentary about the medication administration and re-ordering of medication.

Environment

The service provides care and support in an environment with sufficient space for people to move around freely and make choices about where they want to spend their day. There is a large lounge, with comfortable armchairs, and lots of natural light. A dining room affords sufficient tables and chairs for everyone to eat together if they wish to do so. All the rooms are decorated in a homely, comfortable way, promoting a sense of family, and belonging with photos and mementos of mutual interest. People's rooms reflect their individuality and are decorated with belongings that are important to the person.

The service provider has measures in place to identify and mitigate risks. Facilities and equipment are well maintained with evidence of past, present and future investment in the home. We saw records to evidence maintenance and safety checks are completed for water, fire equipment, the boiler, and electrical installation. Care staff have received training to enhance safety such as fire safety, first aid, food hygiene, health and safety and moving and handling. We saw risk assessments for the home and individuals.

Leadership and Management

Care staff are employed in appropriate numbers to enable people to achieve their personal outcomes. Most care staff said there are enough staff on duty and people are not left for lengthy periods of time, which was also confirmed by people we spoke with. We viewed paperwork which shows staffing levels are in line with what is expected by managers.

The provider ensures care staff receive supervision and appraisals in the time frames stipulated in the regulations. We also spoke with care workers who told us they receive enough training to undertake their role and people we spoke with told us care staff support them appropriately. We viewed records which showed care staff receive appropriate training. We saw staff recruitment is robust and care workers are registered with the appropriate bodies in regards their fitness to work. We saw evidence staff team meetings are undertaken and residents' meetings are held regularly.

Arrangements are in place for the effective oversight of the service, through ongoing quality assurance processes that review standards of care and compliance with regulations. Information, and views of people obtained are used for the continued development and improvement of the service. A six-monthly quality assurance review has been completed in line with regulations which considers the views of people using the service to ensure people are satisfied with the service they receive. We saw the RI undertakes their three-monthly reviews of the service appropriately. We saw senior managers have a comprehensive range of audits, such as personal plan reviews, to ensure the home is run effectively. We viewed evidence of processes which are in place which ensures the manager receives appropriate support from the RI and that the RI is kept abreast of any issues at the home regularly. There are a range of policies, such as safeguarding, infection control and medication, in place to ensure the service is run safely and as intended.

People can be confident senior managers take issues seriously and work to a high standard. One person told us *"The managers are great."* Care staff told us managers take issues seriously and provide good support.

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. Th 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

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Date Published 12/06/2024