



# Inspection Report on

**Redcroft Care Home**

**Redcroft Residential Home**

**1-3**

**Alexandra Road**

**Colwyn Bay**

**LL29 7YB**

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

**This report is also available in Welsh**

**Date Inspection Completed**

17/06/2024

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## About Redcroft Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	ARG BUSINESS ASSOCIATES LIMITED
Registered places	14
Language of the service	Both
Previous Care Inspectorate Wales inspection	<a href="#">5 December 2022</a>
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 enjoy living in Redcroft Care Home. They like the choice they have regarding how they are supported and the appearance and facilities in their environment. They enjoy living their lives in the way they want to, follow their interests and engage in activities which promote their independence where possible. People are supported to access healthcare and any equipment they need to help them achieve their outcomes. Personal plans are detailed and inform staff how to help support people according to their preferences; they are reviewed regularly to keep them accurate. People value the staff and praise them for being cheerful, kind and enthusiastic. All staff are subject to rigorous recruitment procedures and are trained in key areas. The home is comfortable, clean and homely and people are happy with their own personalised rooms. The provider has good oversight of the service because they are present in the home frequently and employ a management team to ensure it runs smoothly. They know what is working well and where improvements need to be made.

## Well-being

People exercise choice and control in a variety of ways. Monthly resident's meetings seek people's views on matters such as food and activities. The chef visits each person every morning to let them know what is on the menu and ask if they prefer alternatives. People told us they have open and comfortable relationships with staff so they can tell them how they feel and express their preferences at any time. People praise the staff for their kindness and caring attitudes; they are treated with dignity and respect. There are no fluent Welsh speaking care staff at present so, although the service will have documents translated and ensure bilingual signage, they are unable to guarantee Welsh people can communicate their needs in their language of choice.

People are supported to maintain their health and wellbeing because staff are alert, responsive and enthusiastic; they seek help quickly if needed. Enhancing fitness is part of the activities programme, through gentle exercise and ball games. The service advocates on people's behalf for support from outside agencies when needed, and people access the right support to promote and maintain oral care, their hearing and eyesight. People praise the staff for their ability to lift their spirits with their cheerful and friendly approach and willingness to listen.

People are safeguarded because staff are instructed through policies and in training on how to identify abuse and how to keep people safe. Residents' meetings allow people to raise anything they are not happy about, and staff create an easy rapport encouraging people to talk honestly about their care. There is an 'open door policy' so staff, residents and relatives feel they can talk to the manager at any time should they have concerns. We saw people entering the office throughout the day, chatting freely to the manager.

Visitors are made welcome in the home. There are private spaces to talk including people's own bedroom. People have their own internet devices and telephones for communicating with family and friends, and they are encouraged to reminisce during group activities and with staff who take time to chat. The service recognises the importance of family and friends.

The RI (Responsible Individual for the service) invests in the home to make people more comfortable and settled in their surroundings. Individual needs and preferences regarding their environment are catered for as much as possible; equipment is sourced to make people safer and more comfortable.

## Care and Support

Care plans are kept accurate and up to date as they are written with the person and are reviewed frequently. Care plans are person centred and make clear the outcome the person is wanting to achieve. They detail what people can do for themselves so that they may continue to do so, and their independence is not compromised. Not all care plans contain the same level of detail to clearly explain to staff the kind of support required, but the manager is currently reviewing all of these to ensure they contain the right information. The manager is keen to act on any areas that could be improved.

People are provided with the quality of care and support they need because they have helped design their personal plans; they share their personal wishes, preferences, and aspirations during the assessment process. We saw people following their own interests and spending time doing what they want to do. One person wants to stay in their room as they enjoy their own company, they enjoy hand massage and manicures. People told us they are treated well and are cared for as they want to be. They describe staff as *'happy and kind, friendly and they cheer you up'* and *'when I ask for something, it comes immediately. They respond straight away'*. People value the choice they have regarding their daily routines, the food, and activities. Activities include skittles, word search, bingo, and armchair exercises. Risks are assessed and managed, so people are kept safe while they carry out their day.

Specialist needs are considered and catered for, if possible, equipment sourced, and adaptations made. The manager contacted an agency to enquire about a mobility scooter for someone who wanted to explore the area more independently. Another person needed new hearing aids when they came to live in the home, and this was arranged. The service has been praised for the comprehensive yet succinct information they provide when someone must go into hospital. This is helpful to hospital staff needing to know how best to support the person.

There are safe systems in place for medicines management. All staff must complete medication training and undergo regular competency checks to ensure their practice reflects their knowledge. Staff immediately record when they administer medication on handheld devices linked to the services data base. This minimises the risk of error and ensures records are up to date. We saw routine audits are completed of medication stocks and records.

## Environment

The provider of the service offers an environment with facilities and equipment that enables people achieve their personal outcomes. The home is situated in a quiet side street where it is safer to walk without fear of too much traffic and we met people who have been supported through a variety of means to do this; they walk in the neighbourhood and sometimes meet and chat with the neighbours. Other people have had alterations in their room to support their continued independence with personal care. There are smart televisions around the home so people can watch their favourite films and programmes and listen to their preferred music. A stair lift allows access to the first floor and ramps allow access to the gardens in the front and rear of the building. All bedrooms are personalised with pictures, furniture items and other things important to the person; most bedrooms have en suite facilities, and there are adequate toilets and bathing facilities elsewhere in the home. The home is clean, homely and comfortable; some rooms are large and well-lit with lots of natural light from large windows.

The service provider identifies and mitigates risks to health and safety through regular audits of the building. Maintenance staff carry out a monthly health and safety check of the home and a range of other safety checks are carried out as required by regulation. Records evidence regular routine checks of fire equipment, emergency lighting, fire doors and other areas important to fire safety. Fire drills are carried out and there is an in-depth fire risk assessment. Safety checks are carried out on the water temperatures; kitchen safety checks are carried out daily and temperatures of fridges and freezers recorded. We saw up to date safety certificates in relation to electrical wiring, gas safety, portable appliance testing, and servicing of hoists and stair lift.

## Leadership and Management

The presence of a manager to oversee the day to day running of the home, and frequent visits from the operations manager to undertake checks and support the manager, helps to ensure there are good governance arrangements in place. The RI also visits the home frequently, and every three months completes a formal report of the checks they have carried out and the people they have spoken to. The manager keeps them informed of what is happening in the home and what each individual needs to enhance their experience of living here. The manager feels well supported and that her views on any necessary changes are valued and respected. The provider is happy to invest in the home for the benefit of people living here.

The RI has quality assurance systems in place to monitor the effectiveness of the service. They sometimes attend the resident's and staff meetings, and the manager keeps them informed of what people are saying. The RI talks with people individually to seek their views on what is working well and where they might want to see improvements or changes. They also share information with people about ongoing investments in the home and what is planned. People feel involved in the service and are happy their views are valued. Surveys and questionnaires have not been used recently, but the RI plans to re-introduce this method of gaining views from people, their relatives, and professionals. They carry out a quality of care review every six months and produce a report that illustrates what they think is working well and where improvements might be made in the future.

People are supported well because there are adequate numbers of trained and enthusiastic staff to care for them. Records show a wide range of relevant training is provided to staff in subjects pertinent to meeting people's needs. The manager carries out competency checks and observes staff carrying out their work to make sure staff have understood the training and their practice reflects their knowledge. Staff told us they feel very supported by the manager and records show they receive frequent one to one supervision sessions during which they can speak about their aspirations and any issues they may have. Personnel files show staff are safely recruited follow a range of suitability checks and an induction period. Staff enjoy working here; they describe the manager and RI as '*very good, they are kind, and they listen*'.

### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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