

Inspection Report on

Rhoslan Care Home

Rhoslan Residential Care Home 52-56 Everard Road Colwyn Bay LL28 4HA

Date Inspection Completed

18/07/2024

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About Rhoslan Care Home

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Oaktree Healthcare Limited
Registered places	33
Language of the service	Both
Previous Care Inspectorate Wales inspection	23 May 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 receive quality care and support when they want it because suitably skilled and vetted staff are employed in sufficient numbers; care is prompt and unrushed. Personal plans for care delivery are detailed and kept up to date through regular reviewing. People enjoy the variety of activities provided daily, including trips out in the providers minibus. They praise the quality of the meals provided and appreciate the choices available to them at each mealtime. The care home provides plenty of communal space for people to choose where they want to spend their time and whether that be alone or in company. Many people express great happiness about the companionship they experience in the home from other residents and staff alike and describe a sense of 'family'. The manager enjoys regular support from the responsible individual who visits the home every three months to carry out checks and monitor progress on action plans. Audits are routinely completed to check the home is safe and compliant; the service is proactive in seeking ways to improve.

Well-being

People have control over their day to day lives. They have their say during the assessment of their needs when they voice their preferences about how they want to be supported. Residents' meetings are held so people can express their views about matters such as activities and the monthly menus. There are satisfaction surveys that seek people's views about the overall service. People have lots of opportunities to speak for themselves and contribute to decisions that affect their life.

People are supported to be healthy and happy; they get the right support when they need it. People's individual interests are recorded in their personal plans, and they are supported to follow these interests with as much independence as possible. The wide range of activities provide something to suit most people, including armchair exercises, dance and music. Staff are quick to cater for people's needs and raise concerns about health should a deterioration be identified. GP's and other health professionals visit the home when they are needed, and people are supported to attend their appointments.

People can feel safe in the home and protected from abuse and neglect as staff have all received training on safeguarding vulnerable people, and policies and procedures guide their practice. Effective arrangements are in place to alert the safeguarding authority should any safeguarding incidents occur. People enjoy receiving visitors at any time, except mealtimes which are protected. Visitors told me there is good communication from the service and they always know if there are any issues.

People enjoy their local community and do things that make them feel a valuable member of society. They are taken to vote during elections; they are supported to access local transport and visit local leisure and other facilities; they use local shops and visit interesting places and events. Additionally, people from the community come into the home to provide entertainment and activities.

The home is in keeping with it's surroundings being made up of three houses converted into one building, in a street of other similar houses. It provides a spacious, homely, environment that suits people's individual needs as there are a variety of places in which they can spend their day. An annex style part of the building at the back of the home allows some more independent residents a sense of semi-independent living. They can choose some quiet time doing what they want to do, but also benefit from the companionship of others when they choose.

Care and Support

There are accurate and up-to-date plans for how each person's care is to be provided. These are very comprehensive documents that cover each element of care in detail. A summary of care document helps staff to gain a quicker view of a person's needs. The personal plans are based on information collated from people staying in the home, their relatives and any professionals involved. They are reviewed every month to check they are still accurate.

People are happy with the quality of care and support provided. Personal plans inform staff how to support people the best way for them. Risk assessments indicate whether the person can perform specific tasks themselves or they need help to do so; people's strengths and abilities are fully considered. While personal plans are person-centred, the 'this is me' document is designed to gain a more personal view of an individual's aspirations, what matters to them and their desired outcomes. The manager plans to have these completed consistently for everyone, so new staff will know the person well. People gave examples of how attentive staff are, such as rushing to the aid of one person in the garden as soon as sudden downpour of rain threatened. People value the companionship they have gained from other residents they now consider great friends. They say they live together 'like family' and describe the home as 'a jolly lot and a lovely atmosphere' and 'the company lifts my spirits'. There is a varied and consistent programme of activities throughout the day with a full time employed activities staff. People enjoy trips out to places such as Snowdon and Betws y Coed, and a local craft mill. Everyone praises the food here: there are two choices for each meal on the menu and people have something else if they prefer.

People are supported to access health care and other services. We spoke with one person being assisted towards more independent living; the service and local authority are working closely together so outcomes can be achieved. Communication in personal files evidence health appointments and there are GP and other health notes from when health professionals visit the home.

Medication management arrangements are regularly audited to ensure the system and staff practice remains safe. We saw records are complete and accurate and drug counts are carried out to ensure correct numbers. One person's ability to self-administer has been risk assessed to ensure only safe decisions are made and people agree with staff support when it is given. Medication is stored securely.

Environment

People receive care and support in an environment with facilities that help them live how they want to live. Rooms are personalised; we saw people have room to display collections of things they enjoy, and shelving for storing books they have read. People can bring pictures and pieces of furniture from their homes to make their rooms individual and personal to them. One room has a sofa and armchair and plenty of room to entertain visitors. A sperate large annex gives a sense of semi-independent living for some occupying bedrooms there. We spoke with a person who feels they live freely and do what they want when they want and can then return to the companionship they value so much. They feel their room in the annex is more like an apartment and are delighted they have found this place. There are plenty of communal spaces to choose from, including a cinema room, and we saw them all being used throughout the day. Every room looks freshly decorated and spotlessly clean. People are happy with their rooms and with the home.

The service has arrangements in place to identify and mitigate risks in the home and keep all areas safe and conducive to people's wellbeing. A quality assurance manager for the provider carries out routine, regular audits of all parts of the operation including the environment. Maintenance issues are identified and resolved as there is a clear and candid maintenance action plan. Records evidence the required safety checks have been carried out to ensure safety of gas, electricity, fire alarm and prevention systems and water hygiene. Equipment is checked and the lift has been serviced. We saw a health and safety visit has taken place and recommendations made have been addressed.

Leadership and Management

There are effective governance arrangements in place to help support the smooth operation of the service and check the support provided is safe and effective. Full audits of all elements of the service are routinely carried out to check it is safe and compliant. The home is led by a manager who is supported by an administrative support, deputy and senior care staff. A quality assurance officer monitors the progress of the service. The RI (responsible individual) visits every three months to check on this progress and carry out their own checks and measures. The RI speaks with the staff, with residents and any visitors present. They examine records and speak with the manager to gain a good overview of the service.

The RI completes quality of care reviews every six months and completes a report of what is working well and where improvements are needed. They use the information gained from the various quality assurance processes and feedback from stakeholders to ensure the quality of the service provided meets their expectations and helps people achieve their outcomes. They have effective oversight of the business.

People are supported by a team of staff who have been fully vetted to ensure their suitability for the role. We read personnel files that contained evidence of all the checks completed. There is an induction process for all staff, to help them to familiarise with all aspects of the service and each member of staff has copy of the employee handbook which includes relevant policies. Training records show a variety of relevant training is provided to enhance staff skills and knowledge. A lot of this training is online e learning and in staff surveys, some expressed a preference for face-to-face training. The manager confirms additional training can be sought if staff feel it will help them in their role and this can be face-to-face where available. Staffing numbers ensure they can support people at the time they want to be supported; people do not have to wait for care. Staff enjoy working at this home, describing it as a second family. They especially value and respect the residents here; their compassion and kindness are evident when observing interactions. Staff told us the manager is very approachable and understanding of their own personal circumstances. Staff feel valued and respected and shared experiences of receiving gifts of gratitude for service during the pandemic, and greetings cards at Christmas expressing thanks.

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
19	The Service User Guide does not include all of the information was required by the guidance issued with Regulation 19.	Achieved

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