



Inspection Report on

Alexandra House

Prestatyn

Date Inspection Completed

16/12/2024

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About Alexandra House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Alexandra House Support Services Ltd
Registered places	4
Language of the service	Both
Previous Care Inspectorate Wales inspection	4 August 2023
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 their stay at Alexandra House. They can come for tea before they decide to stay, and this also provides a further opportunity for staff to check they can support people to achieve their outcomes. Personal plans are detailed and include a clear picture of how the person wants to be supported so staff know what is expected of them. The home provides lots of activities both inhouse and in the community, where people can visit shops, leisure facilities and local attractions. People are supported to develop and learn skills while staying in the home. Staff are trained to provide the care required and they are vetted prior to employment to ensure they are suitable for the post. The manager who is also the RI (Responsible Individual) has invested in the home so people can make more use of the newly configured rooms and outside space. The RI has systems in place to continually check the quality of care, and reports are produced outlining what is working well and where further improvements can be made.

Well-being

People have control over their day-to day lives when they stay at Alexandra House. People come for a short stay to try the home before deciding on taking respite here and this gives everyone involved the opportunity to see if the service is the right one for them. People play a fundamental role in designing their plan of care and support; their wishes, preferences, likes, and dislikes are carefully recorded. People choose what they want to do while staying at the home. Their dignity is respected with adjustments made by the service to suit individual preferences and needs and to make the stay pleasant for everyone.

People's physical and mental health is promoted while staying at the home as personal plans identify how people want to be cared for and who to contact if there are health issues. Fun activities are arranged daily in the home, and these cater for people's abilities so everyone is happy they can join in. Staff are attentive so people receive the care they need. They are entertained through activities they enjoy.

Most staff have completed training in safeguarding and there are policies and procedures to follow should such an incident occur. The RI/manager is proactive in dealing with any concerns that arise and completes regular health and safety checks to make sure the home is safe.

People continue learning in the home and develop their potential. They choose their preferred ingredients and can assist with preparation of their meals if they are able. Personal plans are specific about people's goals while at the home, such as learning to count, and communicating effectively. People are supported to be creative, making things with arts and crafts; a feature wall in the dining and activities room proudly displays peoples work.

People contribute to the community using local shops and leisure facilities, cafes and day services. Most people have used the service for a long time and/or are local to the area and they know it well. The community feels familiar to them.

The home is a large family house that looks like others in the street. There are three communal rooms to choose to spend time in, each with a different function. All bedrooms are equipped with what people need to make their stay comfortable and safe and promote independence as far as possible. It is warm and nicely decorated,

Care and Support

There is an accurate and up-to-date plan for how people's care is to be provided so as to meet their needs. We saw all plans are comprehensive and include information about needs, wishes, preferences, and what matters to them. Plans are person centred, and they focus on what people can do as well as the support they need. Aims are written in the 'what matters to me' section of the care documentation and it is clear what the service and the person's contribution is to make this happen. Preferred routines are documented, and we saw plans are reviewed and any subsequent changes to care clearly identified so care staff are kept up to date.

Each plan is designed through consultation with others, including the person, their family and other professionals involved with them. Personal plans carefully consider how each person wants to be supported, what they like and dislike, how care staff should communicate with them and how to spot and manage any signs of distress. There are risk assessments in respect of each person's individual needs, and these instruct staff what to do if the risk arises. We read plans and saw care delivery matched the instructions and guidance given. One person was calmed through watching their favourite cartoon and this was showing on the Smart television. Another person sat at the island in the kitchen where they like to partake in prepping their own foods. They told us how much they enjoy coming to Alexandra House. They said the best thing is '*all the things we get to do*', referring to the range of activities and outings. When asked how it could be improved, they could think of nothing but suggested a games rooms with a dart board and pool table; the RI/manager is now considering this. We saw people are treated with kindness and respect. Care staff are enthusiastic and thoroughly enjoy their work.

The service promotes hygienic practices through daily cleaning routines of all communal spaces. We saw daily logs of cleaning of fridges, cooker, handles, doors, and other equipment used. Temperatures are logged and food correctly stored. The RI visits every three months and completes a check of all the rooms and cleaning practices to ensure compliance. We saw detailed reports of their findings and recommendations for improvement.

There are safe systems in place for managing medications. We saw medications for each person on respite are kept separately in boxes which are locked away in the first-floor office. Drugs are counted in at point of admission and administration is recorded. Care staff are trained to administer medication including emergency medication for epilepsy.

Environment

The RI provider ensures individual's care and support is provided in a location and environment with facilities and equipment people may need. The domestic style family home is close to a town with shops, cafes, pubs, leisure facilities and a library. It is also close to the beach so there are plenty of options for how to spend time in the community. The home itself is warm and bright and offers lots of communal space to do various activities. The kitchen has a centre table from where people can sit and help prepare their food if they wish. The dining room doubles up as an activities place and there are various arts and crafts materials, a feature wall displaying people's work, and lots of games and books. People engaged in a card game during our visit, staff supported them to play their cards and all whooped and laughed, celebrating their wins. Each bedroom is equipped with what people need such as an adjustable bed, ceiling track hoist and ensuite facilities. There are wet rooms and a bathroom. The current provider has invested in changes to the building to enhance the quality of people's stay and promote dignity. The ground floor has been reconfigured to enable easy, private access to the toilet and plenty of space for wheelchairs. There is a sensory room and a private ground floor room for more comfortable, immediate personal care when needed. The house has been altered with people's needs in mind.

The service provider has arrangements in place to help identify and mitigate risks to health and safety. There are evacuation plans should there be a fire. Fire drills are conducted to ensure staff are familiar with the process. Every three months, the RI completes checks of the home to ensure it is safe and compliant with health and safety regulations and there is a separate health and safety audit undertaken. We saw the certificate for safety of condition of the electrical installation is in date, portable appliance testing, water temperatures and gas safety checks are completed. The last fire risk assessment identified issues which the RI was able to evidence had been rectified, although concerns identified regarding the overuse of trailing lead type extension leads and adaptor plugs are still evident. The RI has incorporated checks on the use of extension leads into their routine health and safety checks, so this can be monitored.

Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service. The responsible individual is also the manager and is supported by senior support workers in the home. Responsibilities are delegated to the senior staff and support workers and there are clear lines of accountability. We spoke with staff who feel supported by the RI/manager and agree they are comfortable to speak to them about anything. The RI is in the home most days and every three months they conduct a formal check of the home. A report details the findings of the audits and checks of the building, processes and reports and lists actions to be taken. The RI knows the people who come to the home for respite well and has made changes to the service that help people achieve their outcomes. People's views are sought on the service and suggested improvements considered. We saw positive responses to surveys distributed to people using the service, family, and stakeholders.

The RI has ongoing quality assurance processes in place to review the standards of care and ensure compliance with regulations. We saw evidence of multiple audits of the whole service and honest feedback provided with a view to always improve where possible. The RI completes a six-monthly report of the quality of care, identifying what the service is doing well and where it might improve. The service is in the process of transferring all paper documents onto a database and some reports and documents were difficult to find. The manager agreed the entire system would require better organisation so that information can be found more swiftly.

People are supported by a service that provides plenty of care staff to support them achieve their outcomes and receive the care they need when they need it. There were three people staying in the service on the day of the inspection and we saw three care staff in attendance as well as the manager. Training records show training on a range of topics is provided to staff so they can meet specific needs and can support people safely. We were provided with evidence that care workers are safely recruited; proper checks such as references and criminal records checks are completed. Staff told us they feel supported, and we saw evidence of one-to-one supervision sessions in which staff can share their views and discuss practice.

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	
15	Staff should be given the appropriate instruction in personal plans and risk assessments to ensure they are able to undertake their role effectively and accurately.	Achieved

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