Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

The Oaks

Llanidloes Road
Newtown
SY16 1HL

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

03/10/2024

About The Oaks

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	The Oaks (Newtown Ltd.)
Registered places	73
Language of the service	Both
Previous Care Inspectorate Wales inspection	24 April 2023
Does this service promote Welsh language and culture?	The service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the Welsh language and culture.

Summary

People are supported by a caring, kind, and dedicated staff team. They work hard to make sure people have care and support in line with their wishes and can do things they are interested in and enjoy.

Information in personal plans allows care staff to know how to support people and are reviewed with the individual or their family/representative to make sure they reflect their wishes. Care staff work well as a team, they have regular support from their manager, and training relevant to their role. There is an ongoing programme of redecoration and refurbishment to continue to improve the environment.

There are clear arrangements in place for the oversight of the service. Regular audits of all areas allow for issues to be quickly identified and addressed. The quality of care and support provided is regularly assessed, and people are able to give their views so the service can continue to improve and develop.

Well-being

People have choices about their day-to-day life. Care staff are supportive, helping people who need it to make decisions and choices and respecting these. People and /or their family are involved in reviewing personal plans to make sure they meet their personal outcomes and reflect things important to them. We heard a staff member talking to a person in Welsh. It was clear this was their preferred language as they responded positively. The manager told us they are working towards providing the service for people in Welsh if they want it. Information is available so people know what to expect from the service and they have opportunities to give their views to help drive improvement.

Care staff work hard to promote people's well-being and physical health. Family and friends are encouraged to be part of the Oaks community. The service arranges events such as Harvest Festival and people were heard enquiring about joining their family for Christmas lunch. There is a varied activities programme in place, a knitting club was taking place during our visit. The beauty salon is popular and a lovely space for people to go for pamper treatments including having their hair and nails done. People we spoke with were really enjoying this and told us maintaining their appearance is so important to them. Records show people and their family attend regular meetings so they can make suggestions for improvement and give feedback on what works well and what they would like to see improve. Care staff work hard to provide the right care and support to people when they need it. Referrals are made to health professionals in a timely way and medication is managed well to help keep people as healthy as possible.

People are kept as safe as possible. Visitors must ring a bell to gain entry to the service which is by authorised personnel. They sign in and out, so management know who is in the building at all times. Recruitment practices are robust and personal plans contain clear information about individual care and support needs. Care staff have training relevant to the needs of people they support including safeguarding. Regular checks of equipment and facilities are in place to make sure people are kept as safe as possible.

Care and Support

People receive support from a staff team who are committed to providing support in a way people want it. Comments from care staff include "*People are like family*" and "*I love my job."* We saw some lovely, kind interactions, with care staff clearly knowing and understanding what is important to people. Comments from family members include care staff are "*Fantastic*," and "It's *a lovely place*." Mealtimes are social occasions. We saw care staff visible to offer support to people who need it. People told us they enjoyed their lunch. We saw some meals served which were not on the menu but had been requested by individuals.

Personal plans are detailed and identify how people want to be supported. Activity staff told us they continue to build the personal plans as they get to know people and what their interests are. This means people are supported to do things they are interested in. Care staff told us they have access to information about people's specific care needs. Risk assessments are in place to reduce the risk to people whilst promoting their independence as far as possible. Records show plans are regularly audited by management to make sure they are accurate and up to date. People and /or their families have opportunities to review their personal plans to make sure they continue to meet their care and support needs. Records are held electronically, and care staff use handheld devices to record care interventions. They told us this works well, giving them access to up-to-date information about people.

People are kept as safe as possible from harm and abuse. Care staff spoken with know who to report to if they feel people's well-being is compromised. They have training, and policies relating to safeguarding are in place to guide their practice. Deprivation of Liberty Safeguard authorisations (DoLS) are requested when there is a risk care arrangements may deprive individuals of their liberty.

People receive support to manage their health needs. Care staff recognise when people's needs change and ensure relevant health professionals are informed. Records show regular contact with professionals including the GP. People in their bedrooms had drinks close to them and a call bell to ring for help. Family members said they appreciate being kept up to date about any changes to their family members care needs. Care staff have training and policies relating to medication management are in place to guide staff. Their competency to administer medication is regularly assessed. People have their medication as prescribed.

Environment

People live in an environment which supports their well-being and helps them achieve their personal outcomes. Communal areas provide space for people to socialise and/or meet with friends and family. These are large areas as are the corridors allowing for safe use of equipment such as specialist chairs and moving and handling equipment. Bedrooms are ensuite. The rooms we saw were personalised with items of importance to people including photographs. Equipment and adaptations are in place for people who need it to promote independence and to keep people safe. The café area on the ground floor provides space for people to enjoy coffee and cakes. We saw family and friends helping themselves to drinks and biscuits. They told us they often meet other families in the café for a chat which provides a lovely social event to look forward to. There is lift and stair access to all three floors. The outside space provides a flat safe area for people to enjoy with pathways accessible for people who use mobility aids or wheelchairs. Each floor has its own enclosed balcony for people to enjoy.

The environment is clean and tidy. We spoke to some members of the housekeeping team who told us they have training relevant to their role and have sufficient equipment and supplies. They said they feel very supported by the management who they can approach any time if they have any concerns. We saw personal protective equipment (PPE) was readily available throughout the service. We found there were some malodours as we moved around the service. Regular environmental audits seen have identified issues which the manager confirmed are in the process of being addressed including replacing some flooring in bedrooms, corridors and dining areas.

Measures are in place to identify and mitigate risks to health and safety. Regular audits of the environment take place to make sure facilities and equipment are in safe working order. Each floor has a book where care staff can report any issues to be addressed by the maintenance officer. At the time of our visit, baths on two floors were out of order. This has been identified by the service and action is being taken to address this. Fire safety checks are carried out regularly including fire drills. A current fire risk assessment is in place. Actions from this have either been completed or are in progress.

Leadership and Management

There are effective systems in place for the oversight and governance of the service. All aspects of the service are audited regularly. Action plans are developed and reviewed to ensure improvements continually benefit people. Opportunities are given for people to share their views on the quality of care they receive. We saw care staff talking with people throughout the day, giving them choices, making sure they had what they needed. Family members told us staff and management are approachable and they can discuss any issues they may have with them anytime. Records show resident/relative meetings are held where people can discuss the service as well as meetings to review personal plans and make sure they still reflect what people want to achieve. The responsible individual is new to the role and plans to visit regularly. The service has systems and procedures in place to monitor, review and report on the quality of the service people receive.

Information is available to enable people to have a clear understanding of what they can expect from the service. The statement of purpose and guide to the service are reviewed regularly to make sure the information is accurate. This includes how to raise any concerns which we saw are handled in line with company policy. Policies and procedures are in place setting out clear guidelines about how the service operates. Documents can be made available in Welsh and English.

People are supported by a care staff team who have regular one to one meetings with their line manager and an annual appraisal of their work. This means they have the opportunity to reflect on their practice and identify further training needs to support their continued professional development. Records show team meetings take place regularly to share information and give staff the opportunity to discuss issues as a group including the well-being of people and the day to day running of the service. Care staff told us training opportunities are good. Records seen confirm this. We saw the management team are visible in the service. Care staff told us they feel supported, and their work life balance is promoted by the manager.

People are supported by a staff team who are appropriately recruited. Records show the required checks are in place before people start work. New staff told us they follow a detailed induction which includes shadow shifts and felt “*Very supported*” by a “*Good team*.”

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	

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Date Published 13/11/2024