



Inspection Report on

Options Phoenix House

Holywell

Date Inspection Completed

08/10/2024

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About Options Phoenix House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	OA2 ADULTS LIMITED
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	07 August 2023
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

People living in Phoenix House experience a high standard of care and support in a well-managed service. They are provided opportunities to develop their independence, confidence and self-esteem.

Care staff understand and know how to respond to people's needs. There are effective arrangements in place to monitor and review their care and progress. Care staff and managers are committed, enthusiastic and have established positive relationships with people. Safeguarding arrangements are sound. Care staff understand and support people's physical and emotional needs.

Management systems and governance arrangements are comprehensive and evidence the service provider is committed to developing and improving the service. The manager, head of care and responsible individual (RI) have effective oversight of the care and support provided, taking action to drive forward improvements.

The home is clean, comfortable and well-maintained. Improvements are made in line with people's wishes, which provide a sense of belonging. The service provider ensures the home is as safe as possible from risks to people's health and safety.

Well-being

People are at the centre of all that happens at the home and benefit from consistent and meaningful support. Care staff are proud of their relationships with people and the positive work they do together, as a result people are happy and settled. Careful consideration is given to each person's individual circumstances, and there is a strong emphasis on listening to people and advocating on their behalf. They are encouraged to have a say in the care and support they receive, and the service provider is responsive. The service provider is working towards providing the Welsh Active Offer by promoting the importance of the Welsh language and culture within the home and employing some Welsh speaking care staff.

Care staff and the management team actively seek to enhance people's experiences. They encourage them to be active in the home by cooking and baking, craft activities and games. They make sure people participate in community-based activities of their choice such as swimming, shopping and trips. Some people have memberships of community gyms and regularly visit hydrotherapy pools. A person had requested to go on a holiday to London with care staff and this was actioned. The person spoke positively about their experiences and all the places they had chosen to visit.

We sought feedback from relatives of people living in Phoenix House through Care Inspectorate Wales (CIW) surveys. Comments included: *"The level of care is excellent; the environment meets the needs of the individual and is adapted for their needs. Staff are fully trained to deal with the challenges that arise, and meetings and communication with the family to sort out any problems involving health issues are good."* Another relative said: *"So pleased we were given the opportunity for our family member to have a place here, we couldn't be happier."*

The service provider takes appropriate steps to safeguard people from neglect and abuse. Care records clearly state any risks to people's health and well-being, and detailed risk management plans help to keep people safe and as independent as possible. Care staff recognize their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach any of the senior staff team but would also contact external agencies such as the local safeguarding office if they thought they needed to.

The home is welcoming, clean and people's flats are personalised and adapted to their tastes. The home contains equipment and facilities that encourage their developing independent living skills and things they like to do. Relevant health and safety checks are undertaken regularly, and repairs are identified and carried out promptly.

Care and Support

People's health and well-being is prioritised and appointments and referrals to relevant professionals are made in a timely way. Care staff are vigilant in monitoring people's emotional and physical health. The manager and care staff work very closely with agencies to ensure support for specific and complex issues is consistent and informed by appropriately qualified professionals. Care staff undertake training relevant to the needs of people in their care. The service provider employs clinical specialists and they meet regularly to discuss individuals' progress or any issues, and they provide advice and guidance for the care team. This ensures people get the right care and support as early as possible.

People each have an individual personal plan, which provides a clear record of people's support arrangements. Risk assessments and personal plans give care staff a clear picture of the persons needs and how they want to be supported. Plans are reviewed and amended following meetings with relatives and professionals. There is an effective system of management oversight of all records and evidence that documentation is reviewed and updated when changes occur.

People's well-being is at the centre of the care and support strategies used. Assessments of people's quality of life help to maintain people's independence and ensure people have genuine relationships and meaningful experiences. Care staff listen patiently to people, they are attentive to their needs, and they help them to make choices and decisions. The clinical team meet every month to review people's progress and to provide advice and guidance to care staff on the best approaches to support people. The service provider ensures care staff understand people's physical and emotional health needs, and how these affect their behaviour, so care staff can respond appropriately.

There are suitable systems for recording and analysing incidents. The service provider has introduced an external audit of all physical interventions by a specialist team. This provides another level of scrutiny, and monthly reports are produced to assist with identifying any patterns or trends. To provide a balanced picture of people's lives, the service provider has introduced positive events forms and weekly updates to focus on the positive and meaningful experiences people have. The weekly update is a newsletter that shares the activities people have done during the week across the service provider's homes. Also, information for care staff regarding updates in policies and procedures and messages from managers.

Environment

Phoenix House is situated in a semi-rural area within the County of Flintshire. People live in a home which has facilities and equipment to meet their needs and support them to achieve positive personal outcomes. People live in individual flats within the home. Each flat is clean, tidy, and comfortably furnished and suitably equipped and adapted to meet people's individual needs and preferences. There is sufficient space in each flat for people to move around easily. Attached to the home is a large conservatory. This space is used for meetings and events such as birthday parties. The room is sometimes used to store equipment from the house and garden, so the service provider will be purchasing storage facilities so that the conservatory can be accessible for people to use at any time.

The home has an enclosed garden, which has swings, a swing chair, raised beds and a basketball hoop. People can use the trampoline in the garden of the home next door. Since the last inspection, a relative has given a hot tub to the home. Relevant health and safety checks to use the hot tub are completed and some people are enjoying using it.

A record is maintained of all visitors to the home. Procedures are in place to ensure confidential information is stored securely. Health and safety checks of the premises and vehicles are being carried out. There are regular health and safety checks as part of the daily routine of the home, including fridge and freezer temperatures and fire safety equipment. The boiler and electrical equipment are checked annually. There is a fire risk assessment in place and regular fire evacuation drills are conducted. The service provider promotes hygienic practices and manages risk of infection.

Leadership and Management

The service provider has ensured there are strong governance arrangements in place for the safe and smooth operation of the home. There are well established and clear routines and structures to ensure the home runs effectively and safely, from regular supervision and appraisals to daily handovers and team meetings. The service provider demonstrates they value their staff and encourages and motivates them to develop to their potential. Care staff feedback was gathered through discussions and CIW surveys. The level of support and feeling valued, and the quality of learning and development opportunities were rated as excellent or good. Many made very positive comments about the home, including: *“It is a lovely place to work, and everyone is treated fairly. Support is given if needed and we all work as part of a team. Management are always around if you need to discuss anything.”* There is a mix of long-standing and new care staff, which means many of the staff team are well-known to people. We saw how excellent the rapport is between people and care staff, with good-natured humour and genuine respect for people. Pre-employment checks take place before new employees start work - these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to individual learning outcomes and the ‘All Wales Induction Framework for Health and Social Care.’

The service provider has robust and effective quality assurance systems in place to monitor the operation of the home, and ensure they deliver high quality care and support to people. When required, action is taken swiftly to address any issues, this evidences the leadership team members are diligent in their roles. The head of care visits the home frequently and spends time with people and care staff. The RI visits the home every three months and speaks with care staff and the manager and reports on their findings. There are additional visits carried out by the national care manager and the service provider commissions an independent visitor to provide external scrutiny of the operation of the home. Managers conduct visits during the night to speak with night duty care staff and observe their practice. The manager conducts quality-of-care reviews every six months using consultation exercises and feedback from professionals and relatives. The reports of the reviews are very detailed and provide evidence of people’s progress and identifies areas for further development.

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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