



Inspection Report on

Conifers Care Home

**Stryt Las
Ruabon
Wrexham
LL14 6RB**

Date Inspection Completed

04/05/2023

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About Conifers Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Hayes Healthcare Limited
Registered places	27
Language of the service	English
Previous Care Inspectorate Wales inspection	15 March 2022
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are happy and supported to live their lives as they choose. People's voices are heard, and their independence is promoted. People's health needs are understood by care staff, and timely referrals are made to seek advice and guidance when needed. The home is supported by a range of visiting health professionals to help ensure people receive the care they need to remain as healthy as possible.

Care is delivered by an enthusiastic and familiar staff team but staff training needs improvements. Care documentation reflects the person being cared for. The home provides a comfortable environment for people to live in which is safe, well looked after, and meets their needs. The environment is warm, clean, and decorated well, though there is a planned programme of decoration to parts of the building. The prospective Responsible Individual (RI) has oversight of the service and visits regularly. There are clear systems in place to monitor the quality of care provided. However, the provider needs to recruit a registered manager and ensure all staff are adequately trained.

Well-being

People are supported with their physical and social wellbeing. People, relatives, and health care professionals we spoke with are complimentary about the staff and management of the home. We observed staff assisting people calmly, with dignity and respect. Care records are mostly comprehensive, and are reviewed regularly, however improvements could be made with more involvement of people or an appropriate person in reviewing people's care and support and some repositioning charts are not always completed in line with personal plans. We spoke with professionals; relatives of people living at the service and staff and saw documentation which showed referrals to relevant health care professionals are made in a timely way. We observed that care workers have a good knowledge of people and their needs and refer to them in a positive way. This was confirmed by people living at Conifers, family members and health care professionals we spoke with. We viewed on several occasions staff sitting with people, interacting with them well and taking an interest in their wellbeing.

People can exercise choice and control over their every-day lives. We observed people enjoying various areas to sit in and spending time in the company of others. We observed interactions with people by care staff who are considerate and respectful of people's wishes. There is choice regarding meals, and we observed people having alternatives if they do not like the choices on the menu. We people told us they could get up and go to bed when they wished.

People are generally protected from potential harm, abuse, or neglect. Agency staff are checked robustly, though some of the checks for other staff need tightening. Risk assessments and personal plans are accurate and reviewed in a timely fashion. Training records show staff have undergone some of the training provided by the home. The provider also needs to ensure that a manager is recruited, and registered with Social Care Wales (SCW)

The home is clean, warm, comfortable and bedrooms reflect individuality. Improvements could be made in regards cold water testing and the Fire Risk Assessment.

Care and Support

At our last inspection, we identified an area for improvement regarding personal plan documentation. At this inspection, we found the necessary improvements have been made. We saw personal plans are in place, are detailed, reviewed regularly, and give support staff enough information to undertake their role. We saw care plans and risk assessments give a detailed history of people's medical conditions and reflect outcomes in professional and health care professionals' documentation found in people's records. We also viewed day notes and handover notes which are detailed and give care workers an accurate overview of issues that arise, this was confirmed by care staff we spoke with and documentation we saw. Care workers told us personal plans and risk assessments give them enough detail to undertake their role appropriately and are an accurate reflection of the person they are supporting. We spoke with residents and relatives of people living at the home who felt staff support them or their relative in the way in which they require. One person told us the care and support they get *"is absolutely fabulous."* Whilst another person said, *"I couldn't be in a better place...I get the support I need and want, and staff look after me well."*

Care and support are provided in a way which mostly protects and maintains the safety and well-being of individuals. We viewed documentation which shows, for example, logs regarding people's food and fluid intake and weights and tasks around these activities are being undertaken and recorded regularly. We saw daily logs and care documentation which shows care workers are supporting people in line with professionals' documentation, and care staff also contact health care professionals in a timely and appropriate way. This was confirmed by two health professionals, as well as relatives and care workers we spoke with. One person living at the Conifers said, *"I'm in the second-best place after my home."* We saw care plans and risk assessments are detailed and reviewed regularly. A health professional we spoke with told us *"The "prospective" RI and staff are very good, the deputy is excellent, and staff are attentive, I don't have any concerns with the Conifers."* However, we saw some people's repositioning charts where staff hadn't acted in accordance with the person's personal care plan. We spoke to managers who told us this would be rectified.

We saw people's dietary requirements are clearly detailed in people's care documentation and this information is available for staff in the kitchen and in other areas of the home. Meals are designed and prepared in line with people's dietary requirements. We saw people are given a choice of what they want to eat, and the days menu was on the tables in the dining room, as a reminder of what was for lunch. People are also given the option of changing their mind as the food was being served. We saw people could have other choices if they did not like the options for that day. We spoke with managers, residents and care staff who told us people could have a cooked option at breakfast if they wished. One person told us they had *"A bacon butty every morning."*

Environment

People live in an environment that is suitable to meet their needs. The home is warm, welcoming, and decorated well throughout. There is space for people to choose where they want to spend their time and during the inspection, we saw people sat in both lounges and the dining area. We viewed a selection of bedrooms and saw they are warm, clean and people can personalise them if they so wish. People told us they are happy living at the home. We observed daily cleaning being undertaken by the domestic staff; the home was clean throughout the two days of the inspection. Communal areas are hazard free to ensure people's safety. The home shows evidence of recent investment by the owners as some flooring and decoration has been renewed. Managers told us further work to the home is planned with quotes for materials having already been received.

People cannot always be confident they live in a safe environment. The main entrance is secure, and our identification was checked before we were permitted entry. Call bells are in operation to alert care staff to when individuals need assistance, which are not intrusive. Though some testing and checks are being undertaken we could not see any proof that a Fire Risk Assessment had been undertaken or the cold-water testing had been done for several months. We spoke with the managers who told us they would speak with professionals in each field as a matter of urgency.

Leadership and Management

At our last inspection we identified an area for improvement around the training and experience of senior managers and their responses to staff concerns. At this inspection we found improvements have been made. There is a new prospective RI in place who was currently going through the Care Inspectorate Wales (CIW) process to become the RI of the service. There had been a fully qualified manager in place until recently, the deputy manager who had stepped up had experience and a formal qualification with the appropriate statutory body. At this inspection we found both the prospective RI and deputy manager to be courteous, helpful, professional, and transparent. Care workers we spoke with said they would be happy to raise concerns with managers, the deputy and prospective RI who are always around to give advice, and staff receive good management support. One member of the care team told us *“Support has been amazing”*. Others told us senior managers are very approachable and take matters seriously. Health professionals we spoke with say the RI and deputy manager are good and senior managers take advice constructively.

Individuals are supported by a service that provides appropriate numbers of staff to support people, but a registered manager needs to be employed for the day-to-day management of the service. We spoke with care staff, people living at the home and their relatives, who told us they felt there are enough staff on duty. We viewed paperwork which shows staffing levels are in line with what the managers advised us are expected. The service also provides an extra member of care staff at busy times, such as between 8 a.m. and 2 p.m. and 5 p.m. until 10 p.m. There is an activities co-ordinator employed Friday, Saturday, and Sunday. We viewed people and care staff undertaking activities throughout both days of the inspection which people clearly enjoyed. People told us there is plenty to do at Conifers. Throughout the inspection we saw care workers sitting with residents in the dining room and lounge, talking with them and interacting well. We also viewed care workers helping people to move from the dining area back to the lounge appropriately, with compassion and in an unhurried and relaxed way, explaining to the person to give reassurance. We also saw people in their rooms supported by care staff quickly when required. People living at the home and care workers confirmed people could get up and go to bed whenever they wanted, and they could have a shower when they wanted also. However, the service has been without a formally registered manager for at least the last twelve months. Though the provider is attempting to recruit a person who will meet the criteria for a registered manager and have them appointed, this is an area for improvement, and we expect the provider to take action.

People are supported by care staff who are not always fully trained. We viewed training records which showed gaps in staff training such as safeguarding; dementia care and infection control and though staff advised us they received training and people told us they received the care and support they required, this is an area for improvement, and we expect the provider to take action. We also viewed staff records which showed that on some occasions appropriate documentation is not always sought before people start

working at the Conifers. We spoke with senior managers who told us these issues would be rectified in future.

Arrangements are in place for the effective oversight of the service, through ongoing quality assurance processes. These review standards of care and compliance with the regulations and information and views of people are obtained for the continued development and improvement of the service. A six-monthly quality assurance review is undertaken which considers the views of people using the service to ensure they are satisfied with the service they receive. We saw the RI undertakes their three-monthly reviews of the service appropriately and produces a report regarding this. There are a range of policies, such as safeguarding and challenging behaviour, in place to ensure the service is run safely and as intended.

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
21	Updated care plans with updated risk management are not being used by the service or the staff and they are using handover notes instead of care plans. These do not give detailed or accurate information in relation to risk management and people's needs.	Achieved
9	The provider has not supported the RI to undertake appropriate and relevant training for herself and the RI has not supported the manager to undertake effective and appropriate training.	Achieved
66	Evidence shows that there is a failure from the RI to listen to individuals and respond accordingly, using prescribed systems and processes to enable proper oversight of the service, it's quality safety and	Achieved

	effectiveness and also to ensure the manger is supported effectively to undertake appropriate training, in line with the statutory guidance, national guidance and the statement of purpose document.	
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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
36	Some staff training has not been undertaken by care staff.	New
67	The service has been without a manager registered with Social Care Wales for at least 12 months.	New

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