



Inspection Report on

Woodlee - Short-term care

Buckley

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

17 August 2022

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About Woodlee - Short-term care

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Flintshire County Council
Registered places	3
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the care and support they receive at Woodlee. People engage in activities and interests and can continue with their routines during their stay. Personal plans and risk assessments are in place to provide staff with information to support and care for people in line with their identified needs.

The manager supports staff. A recruitment process is in place including all the necessary checks. Staff receive training and are skilled in their roles. Staff development in relation to supervision, appraisals and training have continued during the COVID pandemic. Staff receive relevant information regarding people's well-being. Improvements are needed in the recording of regulatory visits made by the responsible individual (RI).

The premises are in their own grounds and in close proximity to local community facilities. Attention is given to ensuring the home is clean and tidy with infection prevention health and safety measures in place.

Well-being

People stay in an environment that is supportive and provides appropriate care for them. Care staff are kind, polite and aware of the individual needs of the people they care for. Care staff build relationships with people by spending one-to-one time with them, seeking choices on an ongoing basis. People said they liked the staff and observations showed people were happy in the company of staff. We observed staff talk to people in a friendly and respectful manner.

People are supported to have control over their day-to-day lives. People can choose how and where they spend their day. The pre-assessment plan includes a summary of daily routines to continue during the person's stay. Emergency placements are arranged with information collated to ensure staff are aware of individual needs and choices. Evidence in photographs and records show activities are offered. Observation demonstrated people were comfortable and relaxed in the presence of staff. One relative told us *"The staff are lovely, happy with everything 100%, my daughter looks forward to going."*

Staff protect people from abuse and neglect and know what to look out for and how to raise a concern if they consider someone's well-being is being compromised. Staff follow a recruitment process including all the necessary checks and receive the training to be skilled in their roles. Management is approachable and has an open-door policy. Communication with people, staff, management and relatives, is good. Up-to-date written information about the service is available. Policies and procedures are in place to help protect people from harm or abuse. Risk assessments are in place to safeguard people and staff.

The Active Offer of the Welsh language is provided. Welsh speaking staff support people whose first language is Welsh.

Care and Support

People receive care and support that meets their individual needs. People and their relatives are involved with developing personal plans and include personal outcomes in relation to people's health and well-being. Personal plans and risk assessments are clear and provide staff with information to support and care for people in line with their identified needs. Prior to each visit a phone review is conducted with the person's next of kin to check the risk assessments and personal plans are still relevant. Daily notes and charts show people receive the care they need when it is required.

People remain as healthy as they can be due to care provided and effective administration of prescribed medication. People receive the medication they require safely. Medication is audited on arrival and following a period of respite care. Staff competency is checked before they can administer medication. People's dietary needs are considered, and nutritional meals ensure people remain healthy. Staff support people to access health appointments as and when required during their stay.

People receive good support from friendly, respectful, and caring staff. People have choice about how they spend the day, and their individual wishes are respected. Regular, appropriate activities and opportunities for people to pursue interests or hobbies are provided with photographs to evidence this. People are also supported to continue with their regular daily routines whilst staying at Woodlee.

People's safety is well maintained. There are processes in place to safeguard people. Individual risk assessments are in place and staff are aware of the importance of making the relevant referral to the local authority if they have any concerns about the people they work with. Care workers told us they are aware of the safeguarding procedures and staff receive up-to-date safeguarding training. Infection control measures are in place to ensure people are safe from COVID 19 and other infections. Staff continue to wear appropriate personal protective equipment (PPE) when providing personal care.

Environment

The respite service provides people with care and support in a well-maintained environment. The bungalow has three bedrooms, two bathrooms and a toilet. One bathroom is fitted with aids and adaptations to aid independence. Areas are decorated to a good standard and people can take small items of memorabilia to personalise their bedroom during their stay.

Overall, the maintenance of the building is to a good standard. Outside areas provide additional space for people to take part in outside activities during fine weather. Access to the garden area is suitable for people with mobility needs.

Health and safety of the home is professionally managed. Records show that utilities, equipment, and fire safety features have regular checks and servicing. All residents have a personal emergency evacuation plan specific to their individual support needs.

Leadership and Management

There are arrangements to maintain oversight of the service, and processes to monitor the quality of the service. The RI produces documented evidence following a visit to the service. The last report states the regulatory visit was conducted in April 2022. There was no record of the visit at the service. These visits should take place every three months and any documented evidence shared with the manager to ensure action is taken against any areas of development identified. Improvements are needed in relation to regulatory visits to fully meet the legal requirements. This is an area for improvement, and we expect the provider to take action. It will be followed up at the next inspection.

There is a culture of openness in the home. Care staff are positive about the home and the manager and assistant manager are easy to approach and provide support on both personal and professional levels with staff supervision and annual appraisals. One staff member described the manager and assistant manager as “*amazing*.” Staff meetings are arranged to share operational matters such as training and health and safety and provide opportunities for staff to share ideas and any concerns regarding the service delivery.

Records show required checks are conducted prior to commencing employment. The providers have a selection and vetting process, including obtaining references. Internal recruitment procedures within the local authority are in place. Limited face-to-face training has taken place since the pandemic due to government restrictions. Staff are provided with alternative learning opportunities, including mandatory and specific training. Training includes first aid, moving and handling and safeguarding. Staff told us they have received the relevant training to undertake their roles and responsibilities. Staff administering medication have received medication training and passed a medication administration competency test. Staffing levels are arranged dependent on the assessed needs of people receiving respite care.

The service has a statement of purpose, which clearly describes who the service is for and how it will be delivered. People are given information that describes the service and how to make a complaint.

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 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. 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
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73	The responsible individual does not visit the service at least every three months.	New
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