

Inspection Report on

Alastair House

15 Foryd Road Kinmel Bay Rhyl LL18 5BA

Date of Publication

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Description of the service

Alastair House is registered with Care Inspectorate Wales (CIW) to accommodate up to fifteen people over the age of 55 years with a diagnosis of dementia. Within this number two people with mental health needs can be accommodated. At the time of inspection there were 15 people living in the home. The service also provides day care to a number of people.

The home is owned by Alastair House Limited and there is a nominated responsible individual. The registered manager is Ms Samantha Leuty. The home is situated in Kinmel Bay in a residential area close to local amenities.

Summary of our findings

1. Overall assessment

Alastair House offers warm and caring support from a friendly and respectful staff group. The home is good at encouraging people to pass the day in pleasant and interesting ways. The environment is comfortable and clean and is subject to continual attention and improvements. The service benefits from leadership that provides good support to their staff and is committed to constant improvement.

2. Improvements

The last report recommended improvements to promote positive outcomes for people:

- Develop ways of demonstrating that people and their families are involved in their care planning. We saw that this had improved and relatives we spoke with told us they felt involved.
- Care plans should be written so they focus on peoples strengths and not be problem based. We could see that there was improvement, but it needs to be consistent.
- Safe recruitment should involve checking full employment history so any gaps can be explained. This had been addressed.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. These include the following:

- Improvements to the care planning process.
- The upstairs bathroom should be adapted so people will feel happy to use it.

1. Well-being

Summary

People are happy and safe living in Alastair House. They are supported to have a healthy diet and can join in a wide range of activities.

Our findings

People in Alastair House benefit from a healthy diet and lifestyle. We saw people had opportunities to access a healthy diet and were given choices. We observed people were offered a choice of two main meals at lunchtime, and were encouraged to have lots of vegetables. The cook told us they made fresh cakes on a regular basis; some were specifically made to healthy recipes. People who live in the home and relatives told us the food was good and were very complimentary to the cook. One family member said in a questionnaire the food was 'absolutely wonderful with plenty of variety'. We saw from people's care records that people had put weight on after moving into Alastair House as a result of access to attractive and nutritious food. People had many opportunities to enjoy a wide range of activities. We saw that there were planned activities three times a day, morning, afternoon and evening. We saw people were being encouraged to be physically active; a seated balloon table tennis game was enjoyed and also a ball catching game was played, both accompanied with lots of laughter. We saw from records that activities included outside entertainers, guizzes, word and math games. As well as planned activities people could access things to do independently, for example there were a range of printed scrapbooks left around, for points on interest. There were fiddle mitts, which help people keep their hands active, so people could use them where they were. The home had a resident's choir, who practice every week and have put on performances in the locality. We heard people enjoying singing, either spontaneously, or singing along as a group, supported by care staff. People could choose to join in activities, or sit in the quiet lounge and watch TV or read. People are supported to be as healthy and active as they want to be.

People appeared to enjoy being in Alastair House. We noted a happy atmosphere in the home, and visitors we spoke with also commented that this was the case. Some relatives said there was 'a family atmosphere' and another said they liked the 'good atmosphere'. One visiting relative said there was 'always a lot of laughter here'. We saw that people enjoyed positive and meaningful interactions with staff and other residents of the home. Visitors engaged with their relatives and showed a comfortable familiarity with other residents. People who lived in the home told us in questionnaires they were happy living in the home. People who live in Alastair House are happy.

People are supported to be as safe as possible. The service ensured all staff were trained on how to identify potential abuse and how to respond, and have ensured all staff have been subject to full vetting before being employed. We saw that where there were concerns, swift and proactive actions were taken to minimise the situations and find

resolutions. We spoke with one person who had been involved in an incident with another person who lived in the home and they told us they felt safe and confident and staff had supported them, and their family agreed. The home operated a locked door policy to ensure people were safe within the home, and where this could impact on people's liberty, they made referrals to the local authority for Deprivation of Liberty (DoL's) authority. People feel safe and supported in Alastair House.

2. Care and Support

Summary

People are supported in they way they want by kind and caring staff, who work with relevant healthcare professionals in a timely way. Care staff understand people's care needs, however we found documentation and recording should be improved.

Our findings

Care staff provide a caring atmosphere. People who lived in the home told us they were always treated with respect, and staff were always caring towards them. This was confirmed by visiting family members we spoke with and completed questionnaires by relatives and a visiting healthcare professional. We observed the lunchtime experience for people, and saw care staff respectfully offered choice and help and recognised individual's preference and own ways of doing things. A family member said what they liked best about the home was the staff, 'they are wonderful ladies, kind, caring and very patient'. People are treated with dignity and respect

Care staff know and understand people's needs. Overall, we observed that care plans were being developed to show a good level of detail about how to support people's range of needs. We saw that care files had been improved, so information for staff was easier to find. However not all contained sufficient detail, and we noted that where a persons needs had changed, the care plan did not reflect it, relying on staff to read the reviews as well as the care plan. The manager needs to ensure all care plans are of the same high standard, and that any significant changes prompt a new care plan to be developed. We saw that people had 'This is me' documents in their bedrooms which provided useful information that people and their families regard as important about them, including life history. We saw that care plans were generally reviewed monthly. Care staff told us that they had time to read the care plans and we noted that carers signed a sheet in everyone's file to indicate they had read the plans. We observed that care staff supported people in line with their wishes. A family member said 'the care my mother receives is first class'. People's individual needs and preferences are understood but the recording should be improved.

People receive timely, appropriate person centred care. We saw that people's individual preferences were supported, for example people told us they could get up and go to bed at a time of their choosing, and we saw this to be the case. Records showed that people were supported to see a wide range of health care professionals, including GP's district nurses, community psychiatric nurses and social workers. Relatives of people told us they feel the way the home arranges for people to be seen is very good. A visiting healthcare professional told us the communication between them and the home was very good and the staff and manager always responded in a timely and professional manner. We noted the recording of care provided could improve, and pointed this out to the manager, who said they would address it. People receive the right care in they way they want to receive it.

3. Environment

Summary

People live in a comfortable, well maintained, improving environment which meets their needs.

Our findings

The ambience in the home is light, clean, warm, and uplifting. The home was clean, and there was dedicated domestic staff who ensured this was maintained. The décor and facilities of the home had been designed to meet the needs of the people who use the service, as there are items around the home that provide points of interest to people who have dementia.

There is a large outdoor space that had easy access for people. There are plans to refurbish and enhance it this year which include, for example, safety flooring, raised beds and a sensory garden.

The home is well maintained. A recent food hygiene inspection, May 2017, gave the home a rating of 5, very good, which is the maximum rating. We saw records that evidenced necessary checks were carried out in a timely manner, including fire alarm, emergency lighting, portable extinguishers and water temperatures. The registered persons told us of plans they have to continue improving the ambience of the home, including decorating all bedrooms and purchasing new bedroom furniture. There is clear investment in the home.

We noted that the upstairs bathroom had an adapted bath and we were told people do not use it as they don't like it, instead they go downstairs to use the facilities there. People should be able to bathe/shower on the same floor as their bedroom to respect their dignity, and we pointed this out to the manager. The manager agreed and said she would aim to address this.

People live in an environment which meets their needs which is under regular review and improvements.

4. Leadership and Management

Summary

There is good oversight of how the home is operating and there is evidence that the management are committed to supporting staff and to constant improvement.

Our findings

People are clear about what the service provides. The statement of purpose described the vision, values and purpose of the service, and we saw that they were actively implemented. We saw that the service has a comprehensive range of policies and procedures for staff to follow and had purchased a new policies system. We recommended to the registered persons they identify key policies and encourage staff to read them and record when this has been done, to evidence that staff have read them. People can understand the support and opportunities available to them at Alastair House.

There is a strong commitment to driving continuous improvement. We saw that recommendations from the previous inspection had been carried out, and that there were further plans for improvement for example enhancing the outside space and an electronic care planning system. People had opportunities to influence the service. Annual questionnaires were sent to people who use the service, families and staff to seek their views and we saw the Quality Assurance report for May 2017. We saw minutes of resident and staff meetings which demonstrated that people's views were sought every three months. Whilst there had been no formal complaints, one family member told us they felt comfortable raising issues with staff or the manager when required. Some one else said 'I've not had to make a complaint yet, although I am sure it would be dealt with very well.' People benefit from care and support which is committed to innovation and is informed by best practice.

Staff are valued and supported, are given clear directions and their potential is developed. Staff were encouraged and supported to complete relevant nationally recognised qualifications. Care staff received training in mandatory subjects that included dementia, moving and handling and infection control. The manager and deputy manager had recently attended further dementia training and told us they were arranging the same training for all care staff as it was such good quality. Staff told us they felt well supported by the management team and felt that they were approachable and could contribute ideas. We saw staff and the manager had regular supervision. People benefit from a service where the well-being of staff is given priority and are well lead, supported and trained.

5. Improvements required and recommended following this inspection

- 5.1 Areas of non compliance from previous inspections None.
- 5.2 Recommendations for improvement
- All care plans should contain sufficient detail so that care will be provided consistently.
 They should be updated when there are significant changes for a person.
- Daily notes should contain more detail of a person's day and what support was given.
- The manager should ensure care plans and daily notes are completed appropriately.
- The upstairs bathroom should be adapted so people will feel happy to use it.

6. How we undertook this inspection

We carried out an unannounced visit to the home on 15 May 2018 between 9.30 am and 5 pm. This was a full inspection, undertaken as part of our inspection programme.

The following methods were used:

- We spoke with two people who use the service, four visiting family members, the registered manager, the responsible individual, one member of staff and the cook.
- We received completed questionnaires from a combination of people who use the service, relatives, visiting professionals and care home staff.
- We looked at a wide range of records. We focused on three people's care records, two staff files, training matrix, a Quality Assurance Review and the Statement of Purpose.
- Tour of the building and observations of interactions between people and staff.
- We used the Short Observational Framework for Inspection (SOFI 2) tool. The SOFI tool
 enables inspectors to observe and record care to help us understand the experience of
 people who cannot communicate with us.

Further information about what we do can be found on our website: www.careinspectorate.wales

About the service

| Type of care provided | Adult Care Home - Older | | |
|--|---|--|--|
| Registered Person | Alastair House Ltd | | |
| Registered Manager(s) | Samantha Leuty | | |
| Registered maximum number of places | 15 | | |
| Date of previous Care Inspectorate Wales inspection | 6 June 2017 | | |
| Dates of this Inspection visit(s) | 15 May 2018 | | |
| Operating Language of the service | English | | |
| Does this service provide the Welsh Language active offer? | This is a service that does not provide an 'Active Offer' of the Welsh language. Currently there is no negative impact on people who live in the home. We recommend that the service provider considers Welsh Government's 'More Than Just Words follow on strategic guidance for Welsh language in social care'. | | |
| Additional Information: | | | |

No noncompliance records found in Open status.