

# Inspection Report on

Oak

Alexander House Highfield Park Denbigh LL16 4LU

Date Inspection Completed
9 December 2021



#### **About Oak**

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Mental Health Care (Highfield Park) Limited
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	13 July 2021
Does this service provide the Welsh Language active offer?	This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people who use, or intend to use their service.

## **Summary**

This was an unannounced focused inspection, focusing on medication practices only. On this occasion, we did not consider all themes. Medication management has improved within the service. Care staff are familiar with people's preferences and how they wish to be supported. The service is well managed and the provider is proactive about making improvements.

## Well-being

As this was a focused inspection, we have not considered this theme in full.

People's physical, mental health and emotional well-being needs are being met. We observed happy and content relationships between people and the staff who support them. Care staff are able to discuss people's individual needs and are enthusiastic about providing the best care to the people they support. We observed care being provided in an active and supportive manner. People have their own routines in place and are encouraged to participate in activities and daily living skills.

People are safe and protected from abuse and neglect. Systems and processes are in place to protect people who use the service. The provider responds in a positive way to any concerns or incidents which occur, to ensure any future risk is reduced. Overall, safe administration and management of medication systems are now in place.

#### **Care and Support**

As this was a focused inspection, we have not considered this theme in full.

Overall, safe administration and management of medication systems are now in place. Although we did find some gaps in the Medication Administration Records (MAR) charts we did see significant improvements in the medication processes within the service. Robust medication audits and checks are completed by the registered manager to ensure improvements are sustained. Care staff receive the relevant training in medication and their practice is regularly observed to ensure the service's policies and procedures are being followed accurately. The registered manager has good oversight of medication practices within the service.

## **Environment**

As this was a focused inspection, we have not considered this theme.

# **Leadership and Management**

As this was a focused inspection, we have not considered this theme.

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	
58	Medication	Achieved	

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	
34	Staffing	Reviewed	

36	Staff training including specialist training as appropriate	Reviewed
44	Environment and external grounds	Reviewed

#### **Date Published**

10 January 2022