



Inspection Report on

Highfield Care Home

**Summerhill Road Stansty
Wrexham
LL11 4YE**

Date Inspection Completed

15/07/2024

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About Highfield Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Pendine Park Care Organisation Ltd
Registered places	112
Language of the service	English
Previous Care Inspectorate Wales inspection	07 March 2022
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 live in a warm, welcoming, and well maintained home that meets their needs. They are supported by good numbers of well trained and skilled care staff. People told us they like living in the home and feel well cared for by friendly staff who treat them like family. Feedback from relatives is also positive. Records show people have choice and control over their lives, and families and representatives are also involved in planning and reviewing their care. Personalised plans and risk assessments of people's care detailed and provide clear instructions for care staff.

The provider has good oversight and governance arrangements in place. The manager is well supported by the Responsible Individual (RI) and ensures routine audits of the quality of care and support are completed. The provider and manager ensure the home is clean and well maintained, as is the equipment used. Staff receive supervision and feel well supported by management. Many staff have worked for the provider and in the home for many years.

Well-being

People have control over their day to day lives. They and their relatives or representatives are consulted in planning and reviews of their care. They can choose how to spend their time in the home. We saw people participating in art sessions and singing along to a ukelele band during our inspection visit. There is a range of planned activities for people to choose from, and a variety of clubs to join, including an audiobook club and a gardening club. We saw people relaxing in their rooms on their own, and people walking in the grounds and gardens with visitors or supported by care staff. Care staff are kind; they do what people ask them to and treat people with dignity and respect. Information about the home and how the service is delivered is freely available to people and is translated into Welsh if people prefer. Care staff are encouraged to develop and use their Welsh language skills, and a display board at the entrance shows which staff are either fluent or learning Welsh. Records show the provider supports care staff to attend Welsh classes as part of their professional development.

People are supported to maintain their physical and mental health and well-being. Records show the manager ensures people have timely access to advice and treatment from healthcare professionals. Records of feedback from people shows they like the events and activities provided in the home; one person said they had never really enjoyed art but now they enjoy the art sessions the most, and another said, "*there's always things going on*". People have experienced improved outcomes since living in the home including gaining weight, accessing specialist equipment support for health issues, and an increase in positive physical and mental well-being. The home has developed close links with a local school and the children regularly come to the home to read to people or join in with art and singing activities. People from the home have also gone to the school to watch dress-rehearsals for concerts and plays the children put on.

People live in accommodation which meets their needs and the provider ensures is well maintained. The provider ensures the facilities and equipment in the home are serviced and tested regularly. They complete thorough audits of the decoration and repair of the home. We saw plans for the redevelopment and refurbishment of one of the lounges to create a larger open plan kitchen-dining lounge space which provides a more flexible seating and socialising space for people.

Care and Support

The manager ensures information is gathered from a variety of sources prior to admission and when assessing if the home can meet someone's needs. People are involved in planning their care and support. The plans are supported by appropriate assessment of any potential risks to people's health and well-being. Personal plans provide care staff with detailed, clear instructions on how people should be supported safely. They give care staff a good insight into people's individual history, preferences for care and language, and desired health and well-being outcomes.

People are supported by good numbers of trained, skilled, and friendly care staff. During our inspection we saw lots of warm, friendly, and respectful interactions between people and care staff. People and care staff have a good rapport; they smile lots at each other and care staff maintain good eye contact and engage well with people. We saw feedback records from people living in the service, commenting "*staff are amazing I don't know what I'd do without them*" and "*the staff are like family*". This was supported by feedback from relatives, who told us they are "*really happy with the home and the care staff fantastic*" and "*it's completely changed my view of care homes for the better*". Records reviewed show people receive care in line with their personalised plans and have timely access to healthcare, social care, and advocacy advice and support when required.

There are mechanisms in place to safeguard people from harm and neglect. Staff receive regular training in how to protect vulnerable people. The provider ensures care staff are guided by robust policies and know the current procedures for reporting concerns. Care staff are aware of their responsibilities in this regard. The manager ensures all aspects of care and support are routinely and thoroughly audited to ensure emerging issues are addressed swiftly. Records show the manager ensures random quality spot checks take place across both day and night shifts to maintain good quality of care. Robust on-call procedures are in place to ensure care staff can access management support outside of normal working hours.

The provider ensures there are robust measures in place to manage the risk of infection in the home. Staff receive regular training in hygiene practices and follow current guidance on the use of Personal Protective Equipment (PPE). Records show domestic staff are in the home daily and follow robust cleaning schedules to ensure the whole home maintains a good level of hygiene. We saw the home is clean and good numbers of domestic staff were on shift during our inspection. Our findings are supported by outcomes of recent external professional audits of hygiene and infection risk management in the home.

Environment

The provider ensures people live in a calm and relaxed home that has the facilities they need to achieve their personal outcomes. The home is surrounded by well-maintained grounds, and has smaller, secure courtyard gardens, which are accessible from the different communal lounges. The home itself is very well appointed and maintained, with wide and clutter free corridors and good bathroom facilities, including wet rooms and specialist bathing equipment. The home is warm and welcoming, with bright communal spaces decorated in a modern but homely style. People's rooms contain the equipment and facilities they need and are decorated and laid out to their preferences. We saw people can personalise their room with pictures, ornaments, and objects of importance to them. The different communal areas provide open plan kitchen-dining and lounge space with ample seating for people to socialise together at mealtimes if they wish. Records of feedback from people shows they like their rooms and the views of the grounds and gardens from their bedrooms and communal areas. We saw records of communications with timely referrals to external professionals regarding people's specialist equipment needs. We saw bilingual and pictorial signage on display in the home to help orientate people to where they are.

The provider has robust measures in place to identify and manage potential risks to people's health and safety. The manager ensures regular auditing and monitoring of all aspects of health and safety in the home, and outcomes are reported to the RI, maintenance, and estate management staff in a timely way. People have Personal Emergency Evacuation Plans (PEEPS) in place to guide emergency services personnel in the event of an evacuation; these are reviewed and updated weekly as part of routine fire drills in the home. Records show the provider ensures all equipment and facilities in the home undergo regular maintenance, testing and certification in line with current national legislation and guidelines. The home has a level 5, or very good, food hygiene rating. Feedback records show people really enjoy the food. We saw the kitchen spaces were clean and well maintained during our inspection. Records show staff receive training in health and safety matters, including safe food preparation. During our inspection we observed a hot meal served at midday looked and smelt appetising and people were eating well, with support from care staff where needed.

Leadership and Management

The provider has comprehensive and robust governance and oversight measures in place to ensure people get the quality of care they need to achieve their desired health and well-being outcomes. There are good policies and procedures in place to guide care staff in how to deliver safe and good quality care. These are reviewed regularly and updated in line with latest relevant national legislation and guidance. The RI visits the home regularly and meets frequently with the manager and senior management team as part of their oversight of the home. During their visits they speak with people, staff, and visitors to gain their opinions on the delivery of the service. They also review a selection of records in the home to ensure people are receiving the support they need and prefer. Records of routine management audits show good analysis of outcomes and action planning as a result. There is a complaints procedure in place and information is readily available to people and their relatives or representatives about how to raise issues or concerns about their care and support. Records show complaints are addressed in line with the provider's policy, and learning outcomes are discussed in management meetings with the RI and senior management. The provider is responsive to feedback from external professionals including commissioners, visiting professionals, and the regulator.

People can be assured there are effective recruitment processes in place for the safe recruitment of new staff. The manager has good understanding of these processes including appropriate vetting and risk assessment of new staff. Records show gaps in employment and education history are addressed and staff are vetted prior to confirming their appointment. There is a good induction programme for new staff including online and face to face training, shadowing experienced staff on shift and assessment of competencies and understanding of their role and responsibilities. Records show new staff complete their induction over a minimum period of 3 months, but this can be extended should further training or support be needed. Many staff have worked in the home for several years. They told us they enjoy working in the home and feel well supported by management. Records of supervision, annual appraisals, and training and development support this feedback.

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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