



## Inspection Report on

**3 CWLACH ROAD  
LLANDUDNO  
LL30 2HT**

## **Date Inspection Completed**

27/06/2019

**Welsh Government © Crown copyright 2019.**

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: [psi@nationalarchives.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk)*  
*You must reproduce our material accurately and not use it in a misleading context.*

## **Description of the service**

This service is a care home, situated on the outskirts above Llandudno, overlooking Deganwy and Conwy estuaries. This is a registered service and Care Inspectorate Wales responsible for inspecting the quality of care and support for the people who live there. This service belongs to a larger organisation called Prestwood Residential Homes Ltd, which is part of a larger organisation called Caretech Services Ltd. There is a registered manager and responsible individual for the service; the service can provide care for up to five people under the age of 65 years of age, who may have mental health needs.

### **1. Overall assessment**

People are included in the planning and monitoring of their care; they have their say about the care they receive and have choices about day-to-day life. Care staff respect the people they care for. People are encouraged to do things, which matter to them as individuals. They undertake recreational activities, which attribute to their physical, mental health and emotional well-being; these include working, education and contact with friends and family. There are established key processes and mechanisms in place to reduce the risk of harm to individuals and meet their needs; these include thorough, ongoing and consistent assessment of need, planning and consultation with people, their family and linked professionals. Staff know people well, aim to support, and enable people to become independent at their own pace. The premises and location is set out to allow people to achieve well-being. The layout and interior, including the views from the building are positive elements, which would enhance well-being. There is effective oversight of the health and safety and maintenance aspects of the service. The statement of purpose reflects the service provided to people. Managers have hands on approach and ensure effective oversight of care.

### **2. Improvements**

- Care staff consult with people who are involved in deciding communal activities.
- The service provided is consistent with the updated and revised statement of purpose.
- The responsible individual has planned the monitoring visits for the coming year.
- People who use the service are assisting care staff to devise a service user guide.

### **3. Requirements and recommendations**

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

- History of staff employment

## **1. Well-being**

### **Our findings**

People are encouraged and enabled to have control over their daily life. People told us, they are included in the planning and review of their care; the documents and records we saw confirmed this. We saw evidence, people are listened to and peoples' individual circumstances, wishes and feelings are considered. We found people could and had received advocacy support when required; one person we spoke with confirmed this. We found people were happy with their own routines and enjoyed social events with the people they shared the service with and staff. Staff take steps to secure peoples' rights to promote independence, confidence and freedom.

People experience physical, mental health and emotional well-being. Care staff supported and encouraged people to have a healthy and active routine and support to become independent; people we spoke with confirmed they felt supported by staff, and peoples' routines, preferences, likes and dislikes, had been recorded within care documentation; care plans had been personalised to meet individual need. Managers guided staff in line with relevant policies and procedures, to provide the right support for people at the pace of the individual, supported and to intervene to provide the right care, when necessary. We saw files, which showed staff, attended training which was in line with the service policies and procedures. People felt valued, because they felt listened to, and supported, which encouraged this, whilst being treated with respect and equality. People are happy and do things that matter to them, because support is geared to meet individual need.

Staff safeguard people in a way, which aims to prevent the risk of harm. We found evidence in documentation of risk assessments, personalized to peoples' individual needs; we found policies and procedures, which were relevant to the needs of people residing within the property. We found evidence, staff and managers attended relevant training and had read and signed peoples' individual risk assessments which were reviewed every month or when peoples' needs changed. We found all staff had read and signed the procedures, individual care assessments and individual plans. Staff and management take appropriate steps to safeguard people from harm, by working within and using a variety of supporting mechanisms and procedures to support them.

People have access to education, training and recreational activities, and are encouraged and supported by staff to develop to their full potential, to establish personal relationships, stay in touch with family and to undertake domestic tasks to become independent, and fulfil goals which matter to them. People visited family and friends and explained about activities they undertook independently and with other residents. One person told us they had returned from work, which they had undertaken for the last six years; they told us they

enjoyed this work. People told us about their own routines, activities they enjoy and the communal activities. People, staff and managers are keen to build on plans to be involved in communal activities following a recent outing with all staff and residents. People are encouraged to be involved, have their say and receive the help they need to develop skills to be independent; the accommodation, setting and surroundings enable them to be independent and supported to achieve personal goals and well-being.

## 2. Care and Support

### Our findings

The service provider considers a wide range of views, information and actions prior to them moving to the service, to ensure peoples' individual needs met, and their outcomes achieved. The statement of purpose included a summary of admission procedure. We viewed an admission and commencement policy, which highlighted the issues considered by the service, before people moved to reside in the service. These included pre assessments, visits to the service, consultations and decisions, prior to individual admissions. We reviewed three care files and found evidence people were consulted with, by the manager and staff, in line with this policy; they visited the service before moving in. We viewed the pre-assessments, undertaken prior to people moving to the service and consideration given to previous assessments, including risk assessments from a number of sources including, Local Authority, and health assessments. Peoples' individual needs and circumstances are considered and people are encouraged to have their say and contribute to decisions that affect their lives, demonstrates steps, taken by management and staff to ensure peoples' individual needs met prior to them moving into the service. .

People feel confident their needs are met because they are involved in the planning of their care. People were involved in their care planning and attended multidisciplinary meetings, arranged by the manager on behalf of the residents. We found evidence of their involvement within the care files we reviewed. On the day we visited, we observed a care meeting for one person to meet with their social worker; they discussed involving an advocate to represent them, in addition to the service manager and staff acting as their advocate. We spoke to two people; one person told us they have "*come on in leaps and bounds*" since residing with this service and feel more confident and independent. Another person told us they felt ready for independence due to the care and support they have received from staff. They told us they were in the process of planning to move to live independently. People are empowered to be involved in the planning of their own care and supported to understand the opportunities available to them and use these to help them achieve their well-being.

Staff and management are efficient in taking steps to prevent people from harm and are safeguarded from risk because there are a variety of mechanisms in place to ensure the risk to people is reduced. We viewed risk assessments, which were person centred, written in a way which could be easily followed by staff, reviewed and updated where required. These assessments took the individual needs and risks into consideration. We found evidence referrals had been made to partner agencies such as social services and a variety of healthcare professionals, at times where risk was heightened for individual residents. We reviewed a sample of the services policies and procedures, which included the services safeguarding policy and procedure, which we found, were accessible to staff, up to date, in

line with current legislation and were relevant to the needs of people residing with the service. We spoke with two care staff who told us they were familiar with the service policies and procedures including the process of reporting or raising a safeguarding concern, to protect the well-being of vulnerable adults. We found evidence all staff had signed these policies and procedures after having read the documents. We viewed supervision records within staff files, found discussions in regard the service policies and procedures, and linked training to accompany these. The training program demonstrated staff were in receipt of electronic and face to face safeguarding training, at induction to the service, this training was an ongoing training program, in line with regulatory requirements. Staff files contained training certificates, which were consistent to the training program. We viewed safeguarding records, filed in one area for management oversight and monitoring by the provider. Overall, people are safe and protected from harm because staff know people well, have been guided and trained in a consistent way, to take action to communicate and report effectively when circumstances or risk to people arises.

Staff provide support, guidance and assistance to people, by considering individual needs, wishes and aspirations to enable them to learn day-to-day tasks, whilst being supported emotionally to feel safe, be independent, and gain confidence. We spoke with one person who told us staff assist them in many ways and that they had been involved in their care planning; these included cooking their own meals, washing their own clothes, attend health appointments, and go on holidays. They said *"Staff are respectful; they don't do it for me, they do it in a way where they are helping me to do it; assisting, and showing me, and with me with things like, cooking, shopping, and emotionally when I might feel anxious or low"*. We viewed a sample of care documents, which we saw were personalised to reflect the needs and choices of the individual. These included detail, which gave staff appropriate instruction in how to support the individual; staff confirmed this and the people we spoke to told us support by staff was provided in a way which they wanted it to be done. The manager told us, people have key care staff, where the same staff support the same people. We found evidence of this within care records and people and staff confirmed this. People get the help and support from staff, which enables them to grow in confidence and become independent.

### 3. Environment

#### Our findings

Care staff provide care and support to people, in a location and environment with facilities and equipment, which promote achievement of personal outcomes. This service, based on the outskirts of Llandudno, where people have good access to public transport, in an outstanding situation with magnificent views, which would be a positive element to the promotion of the well-being of residents. This is a three-story accommodation, renovated to a high standard and is homely. This service contains separate flats; the layout promotes the independence of all residents; each flat is spacious and contains a kitchen, living area, bathroom and bedroom. We viewed three flats, all of which had been personalised and contained people's personal belongings. One person told us they had chosen their own décor and had made their own curtains, with the assistance of staff. They told us they had been collecting various items of furniture, in preparation for their move to independent living. They told us *'I love it here, and I am getting ready to have my own place'*. There are safe procedures in place, where all visitors sign the visitors' book on entering and staff check identification. Individuals are able to enter and exit the premises and we observed people coming and going throughout the day.

There is a system in place to ensure all health and safety requirements are present, maintained and appropriately documented, in line with the health and safety policy of the service. We reviewed the health and safety manual of the service, which demonstrated the monitoring and maintenance of electrical and fire equipment, was undertaken within appropriate timescales; these including fire extinguishers, and personal evacuation plans, which we found as being personalised, appropriate and accessible for staff. We viewed the maintenance file. This showed maintenance of the premises was planned, monitored and regularly audited. We also saw evidence repairs identified, reported and necessary remedial action was appropriately undertaken. People live in a home, which is set out and managed in a way which safe and the layout supports peoples' independence and well-being.



## **4. Leadership and Management**

### **Our findings**

The statement of purpose clearly and accurately reflects the service, provided. We reviewed this document, which described the service provided, it stated where and how the service provided, and explained the arrangements in place to support the delivery of the service. The manager explained the responsible individual had amended certain aspects of the document following recommendations by Care Inspectorate Wales (CIW). These recommendations included the age range of people receiving the service, the facilities available in the neighbouring areas, and specify to whom the service offered. We found the appropriate amendments made. A copy of the updated version was available upon request on the day of inspection. People can be confident the statement of purpose provides an accurate description of how the service provided to enable them to make informed decisions about the home.

We found there were a variety of systems in place to ensure to monitor the quality of care. We found evidence of this within peoples' care files and a sample of audits undertaken by the manager. We found evidence people; their families and other professionals had opportunity to give feedback about the service. The management know people, who reside in the service well but also take appropriate steps to monitor the quality of the care people receive, via a variety of sources, including the involvement of people residing with the service.

We found there were systems implemented to enable oversight of the management, quality, safety and effectiveness of the service. The manager told us they have a good working relationship with the responsible individual, who provided ongoing support through both formal supervision and informal communication, and was approachable. They said although they are not located close by, they have regular discussions, about the oversight and management of the service. We saw e-mail correspondence of their communication. The responsible individual follows the service provider's prescribed systems and processes. The appointed responsible individual planned to visit the service on a quarterly basis and report to the service provider. We saw written evidence the responsible individual would undertake a visit to the service in July 2019. The manager showed us the template, which the responsible individual will use to monitor the service. The manager told us they would inform CIW when they have visited, and provide subsequent dates of their planned visits. There are arrangements in place for effective oversight of the service, through quality assurance processes, which review the standard of care and compliance with regulations, and views of people using the service, their families and professionals used to improve the service. However, this is an area, which has not yet been undertaken and requires review to ensure visits to the service were conducted as planned and in line with regulation. Therefore, although the onsite management have robust systems in place to monitor care,

the oversight by the responsible individual is in need of becoming established and consistently engrained within the quality review processes.

## **5. Improvements required and recommended following this inspection**

### **5.1 Areas of non-compliance from previous inspections**

This is the first inspection since re-registration under the Regulation and Inspection of Social Care (Wales) Act 2016.

### **5.2 Recommendations for improvement**

We recommended the following:

Staff files should include historical information of employment to show if staff have worked in other services of the provider service.

## 6. How we undertook this inspection

We, Care Inspectorate Wales (CIW) undertook an unannounced, full inspection, following the re-registration of the service under Regulation and Inspection of Social Care Act 2016, (RISCA) on 27<sup>th</sup> June 2019 between 10:00 and 17:45. One inspector undertook this inspection.

The following methods were used:

We spoke with two residents, two care staff, the manager and two visiting professionals.

We viewed a ranged of documentation. These included;

- Risk assessments
- MAR charts
- Supervision records and training certificates
- Team meeting minutes
- Statement of purpose
- COSHH file
- Policies and procedures
- Quality report by provider
- Service templates

We reviewed two flats within the service, maintenance records, fire safety records, fire extinguishers.

Further information about what we do can be found on our website:

[www.careinspectorate.wales](http://www.careinspectorate.wales)

## About the service

<b>Type of care provided</b>	<b>Care Home Service</b>
<b>Service Provider</b>	<b>Prestwood Residential Homes Ltd and CareTech Community Services Limited.</b>
<b>Manager</b>	<b>Karlos Wilshaw</b>
<b>Registered maximum number of places</b>	<b>5</b>
<b>Date of previous Care Inspectorate Wales inspection</b>	<b>This was the first inspection undertaken under RISCA</b>
<b>Dates of this Inspection visit(s)</b>	<b>27/06/2019</b>
<b>Operating Language of the service</b>	<b>English</b>
<b>Does this service provide the Welsh Language active offer?</b>	<b>No</b>
<b>Additional Information:</b>	

**Date Published 20/08/2019**

