



Inspection Report on

Quality Care (Wales) Limited

**Quality Care (Wales) Ltd
Glan Rhos
Llanfairpwllgwyngyll
LL61 6TZ**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

15/08/2023

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About Quality Care (Wales) Limited

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Quality Care (Wales) Limited
Registered places	52
Language of the service	Both
Previous Care Inspectorate Wales inspection	22/10/2019
Does this service promote Welsh language and culture?	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

The home is well led and there is a commitment to improving the service for the benefit of the people living here. We found staff respect people's individuality and understand their different needs with a strong emphasis placed on providing person centred care. Positive relationships are formed and familiarity between staff, people using the service and visitors is evident. People are encouraged and supported to be as independent as possible. Personal plans contain detailed information regarding people's needs. Further development of personal plans to be more person-centred could improve outcomes for people.

People are cared for in a safe, clean and secure environment and there is an ongoing decoration programme in place. The home is welcoming, comfortable, homely, and personalised. Care staff receive training and regular supervision. People have opportunities to participate in meaningful activities and to pursue their interests in a supportive way with friendly enthusiastic staff. Staff are employed in sufficient numbers to spend one to one time with people.

Well-being

People have a choice about most aspects of their care in the service. We saw people responded positively to support offered. Observations throughout the day indicated that people's dignity is promoted. We saw staff knocking on doors prior to entering people's rooms. Staff approach was gentle, and people were not seen to be rushed. Staff used non-verbal communication such as gentle touching of the arm and kneeling beside people. People are very well presented, and attention had been paid to personal appearance. We saw a member of staff offering choice to an individual in which lounge they would like to sit during the day.

People are treated with dignity and respect and have good relationships with staff. We saw staff interacting with people during lunchtime. Staff were available to assist people to eat their lunch if required, this was done with patience and sensitivity. We saw a staff member help an individual with communication difficulties. They were able to communicate effectively and provided additional support to meet their needs. We observed a staff member interacting with people, this had a positive effect as we saw people smiling and expressing enjoyment.

People have a sense of belonging in the home. The service is a family run business and located in surrounding countryside. There are opportunities for people to be stimulated and active or have things to look forward to. People receive a service through the medium of Welsh. People have appropriate, healthy and nutritious meals and drinks. Meals are freshly prepared, using locally sourced produce. They receive a varied choice of food and vegetarian needs are catered for. People have a choice and if they can choose other meals if they do not like what is on the menu. People are given the choice whether to eat in the dining room or if they would prefer to eat in their own rooms.

People are safe as they can be. We saw from people's care files Deprivation of Liberty Safeguards (DoLS) referrals are made appropriately and in a timely way. Advocacy contact details are readily available in the home. Staff receive safeguarding and DoLS training as evidenced by the training records. Staff are vetted and induction given prior to commencing their role. A complaints policy is in place. The manager operates an open-door policy, staff and visitors told us how approachable the the management team is.

Care and Support

People receive person centred care which is clearly recorded in personal plans. Records showed that assessments take place before accepting someone new and people can visit the home to find out if the service was right for them. Reviews are arranged following admission, with the person concerned, to assess the suitability of the placement. People's care files are well organised. The front of each file had a very useful brief 'pen picture' of the person, their likes and dislikes outlined. This helped guide staff to provide individualised care. Daily care notes completed by staff, are detailed. Personal plans and risk assessments are reviewed monthly or whenever a significant change had occurred to a person's situation.

People are encouraged to keep fit and well. Records showed that people had a healthcare plan that included support from community healthcare and mental health professionals. People are supported to have health checks and to attend appointments. Our discussions and the records we saw confirmed that people's health was being reviewed and monitored along with their other care and support needs. Records showed people are referred to the professional services when required. People receive their medication as prescribed. Staff have received training in medicine administration. Regular audits of the medication systems are carried out. People who are at risk pressure damage are regularly monitored, the correct slings used and repositioned as prescribed.

People's individual needs and preferences are known and are clearly documented. People are treated with kindness and consideration by a familiar staff group who understand their individual needs. Staff are given the information they need and personal plans to provide the care to meet people's needs. We saw that staff in the home, work well together and there are a high proportion of positive interactions between staff and the people who live in the home.

People are valued for their individuality and are encouraged to actively express their interests and practice their hobbies. The home employs a dedicated activities person to support people with their interests and activities. We saw staff spoke with people in a natural manner and talked to people about their interests and families showing that they knew the person well and valued their individuality. We observed an activities session where people were preparing to engage in an arts and crafts session and other people were engaged in conversations with care staff. People had recently made scented pot pourri bags and some enjoyed knitting. A full activities schedule is available, and activities are tailored to individual's interests and capabilities.

Environment

People are safe from strangers entering the premises. We were unable to gain entry into the building without ringing the bell which was answered by staff. We were asked for proof of identity and encouraged to sign our name and our time of arrival and departure in the visitor's book. People's confidential information is kept securely. There are systems in place to ensure facilities and equipment is well maintained. We saw maintenance records for equipment including fire safety systems and hoists. Fire risk assessments are completed once a year. The fire safety management and fire safety logbook showed monthly checks were being carried out. Health and safety checks and measures in relation to fire certificates, gas installation and safety records, electricity, and Portable Appliance Testing are satisfactory and up to date. Personal Emergency Evacuation Plans (PEEPS) are in place for people in the event of emergency, general risk assessments were seen in the fire book. The Environmental Health department has awarded the service a level 5 food hygiene rating (the top rating) which demonstrates how well the business is meeting the requirements of food hygiene law at the time of their inspection.

People benefit from a clean and comfortable environment. The service is located within extensive gardens, surrounded with countryside. People are able to take a walk around the gardens if they wish to do so. We saw that the exterior of the home, including the gardens and parking areas, are in a good state of repair with outside seating available for people to use. Staff told us they provide support for people to go for a short walk outside if they are unable to go alone. The service employs staff specifically for cleaning. Throughout the home all areas are clean, and no undesirable odours were detected. The service has an ongoing programme of redecoration and refurbishment. We saw a number of bedrooms, many of which are personalised with photos, keepsakes which reflected the individual's personalities and interests which promotes a feeling of belonging.

Leadership and Management

The leadership and management have embedded a positive culture dedicating a significant amount of time providing support to both staff and people living at the home. People know what they can expect from the service. There are systems in place to monitor and improve the quality of care provided, which involves people living in the home. The Responsible Individual (RI) and manager are based in the home on a daily basis and provide hands on care. Staff, residents, and relatives we spoke with told us that the manager and RI are approachable and visible in the home, and they know how to raise concerns. Staff we spoke with said the 'door is always open'. The complaints policy is available to people showing the procedures that would be followed and response timescales. Visiting relatives told us they were confident the management team would act upon any concerns very quickly, but quickly told us these were very rare.

People receive care and support from staff who are vetted and receive training and regular supervision. Records showed there is a programme in place to deliver induction and ongoing training. This included adult protection, medication, mental capacity act, end of life care, manual handling, health and safety, and infection control. The service has aligned their induction with the recommendations from Social Care Wales and encourages a learning environment. Recruitment checks are carried out to assess whether people are suitable to work at the home and care staff receive regular one to one supervision meetings. Staff we spoke with confirmed the evidence we saw recorded and told us training they receive is very good and they feel well supported by the management and senior team.

People receive regular care from a consistent staff team, which enables people to receive continuity of care. We looked at monthly rotas and saw sufficient staff numbers are employed at the service. Staffing levels allow for staff to care for people without rushing and call bells are attended to promptly. Care staff have a caring approach towards the people they support. There is enough staff on duty and there is a focus on providing positive outcomes for people. Staff told us they were very happy and love working in the service, some members of staff having worked at the service for many years and have returned to work in 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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N/A	No non-compliance of this type was identified at this inspection	N/A
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