



Inspection Report on

Calon Lan Community Care

**Calon Lan
10 Vaughan Street
Llandudno
LL30 1AB**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

4 August 2022

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About Calon Lan Community Care

Type of care provided	Domiciliary Support Service
Registered Provider	Calon Lan Community Care Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	This is a service working towards providing an "Active Offer".

Summary

People receive person centred care and support from care workers who know them well and understand their likes and preferences. Personal plans contain important information for care staff which details how people want to be supported. People's needs are being met by small teams of staff who build positive relationships with them, offering them consistency and continuity of care. Care workers receive rotas and people are also asked if they would like copies of these so that they know which staff to expect. Any changes are communicated in advance with people or their relatives, where appropriate as well as care workers. There are systems in place to monitor calls, ensuring the right staff arrive at the right time.

Well-being

People have choice and control over their day to day lives, are listened to and their preferences are respected. Peoples likes, choices and preferences are clearly recorded in their personal plans to inform care workers about how best to support them. People are asked for their views about the service with feedback obtained in a variety of different ways. People and relatives where appropriate are involved in decisions about care and support and where possible people sign their own personal plans. The service informs people and others involved in their care and support about any changes.

Peoples physical, mental and emotional wellbeing needs are being met. Personal plans contain information about their health needs, medical conditions, how many staff are required and any input from professionals. Detailed risk assessments are also in place for staff to follow including those around mobility, any equipment and how many staff are required. Small, stable teams of care staff have built up good relationships with people and their families.

Care and Support

People are provided with the quality of care and support they need; they are listened to and any risks are considered. We looked at personal plans which contained detailed person-centred information about people, their care and support needs and their individual preferences. Any professional involvement and their contact details are also recorded. Daily notes reflect care staff are providing care and support in line with peoples plans. Feedback from people using the service is obtained in different ways for example through review forms, telephone calls as well as satisfaction questionnaires. Where risks have been identified detailed risk management plans are completed including health, mobility, medication, nutrition and the environment.

People are provided with consistency of care by familiar staff. People are visited by staff who know them well and can meet their needs. Management told us that the same staff are provided to people who build up a good rapport with them and their families. All calls are allocated using an electronic system and rotas are provided to care staff in advance. People are also asked if they would like to be sent a copy, so they know which care staff to expect. Calls are provided at the times required with a system in place to monitor any issues with staff attending visits so this can be followed up. Any changes affecting people are communicated with them and others involved in their care and support. There is an on call system in place so that any issues can be picked up and resolved.

Leadership and Management

People are supported by committed care staff and the recruitment of new staff is ongoing. We spoke with management about some difficulties with the recruitment of care staff which is now resolved with new staff being recruited. We also discussed occasions when solutions to staffing cannot be sought and an agreement is made with people/ families about the best way to proceed. Through discussions and rotas, we found that the correct numbers of staff are being provided to people including those requiring double handed calls. There is a process in place for when people's needs can no longer be safely met. The manager told us this is not a decision that is taken lightly and commissioners, people and families are informed of this within a certain timeframe.

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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Date Published 16/09/2022