



# Inspection Report on

**The Headlands Nursing Home**

**The Headlands Nursing Home  
Tower Road  
Llangollen  
LL20 8TE**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

**17 August 2022**

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## About The Headlands Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Deevale Healthcare Limited
Registered places	28
Language of the service	Both
Previous Care Inspectorate Wales inspection	29 March 2022
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

This inspection was conducted to test improvements in the home following identified regulatory failings at past inspections.

We found further staff members have been recruited to care for people and a core of regular staff who know people's needs well also remains. Agency staff are still used; however, the service tries to use the same agency staff to ensure continuity of care for people. The service is still actively recruiting further staff members to have continuity and have enough staff to meet people's needs.

The previous manager has returned to the home, and so there is an improved managerial structure. Staff spoken with feel well supported and say that the manager is approachable. Staff receive sufficient training and supervision.

People benefit from improved care practices and have personal care plans which are centred to their individual needs. Medications management is satisfactory, and people receive their medications as prescribed.

There have been improvements to the environment which are to people's benefit. This is an ongoing process.

## Well-being

People are cared for by staff who know their needs well. We observed staff give people time to express their needs and are kind and responsive in their approach. Where an agency care staff member did not display a patient attitude, the manager addressed the matter appropriately. People living in the home have a range of complex needs. We saw from people's personal plans and from speaking with the manager and staff, they have an understanding of people's individual health needs and can provide support skilfully. People's mental health needs often mean they are not comfortable to engage in group activities. We saw from personal plans that staff consider the activities needs of people and often provide this on an individual basis. Families and friends can visit people in the home and people are supported to remain in touch with them.

People have a choice of meals which are cooked in-house. They can access snacks and drinks as desired. People in need of a special diet are catered for. We observed staff are available at mealtimes to aid people to eat their food. The dining room has an improved atmosphere to aid enjoyment during mealtimes.

People can personalise their rooms with things of importance to them. The environment has been improved to ensure people's safety and comfort; this is an ongoing process. There are two main lounges for people to spend time in if they wish. There is a small sitting area outside should people choose to use it. The home has dedicated housekeeping staff to maintain hygiene in the home.

People are protected from abuse and neglect. The manager reports any incidents and accidents to Care Inspectorate Wales and appropriate authorities. People can access an advocate to speak on their behalf should they require one. The manager conducts frequent checks to ensure the quality of the care given and audits the care given to ensure good standards.

## Care and Support

People have personal plans of care which are written according to their individual needs. The plans are computer based and staff have handheld devices to update care records throughout their shifts. Some computers and handheld devices were not working on the day of inspection, the manager assured us this was in the process of being addressed. The computer software alerts staff when care plans and risk assessments need to be reviewed and so they are kept up to date. The software provides graphs for areas such as people's weight so that staff can identify any worrying trends that need to be addressed.

We saw people are referred to health care professionals in a timely manner. The manager told us the local GP 's are supportive of the residents and review them regularly, this includes reviewing people's medications to ensure they are still appropriate for their needs. Instructions from health care professionals are documented to inform staff regarding any required changes in care.

People are cared for by staff who are aware of safeguarding procedures. We saw from training records; staff receive appropriate training. Staff can describe the process of safeguarding should they need to alert authorities about any care practices causing them concern. We saw safeguarding policies are reviewed and up to date.

People receive their medication as prescribed. We saw medicines administration and storage has improved in the home. Stock management of medicines is appropriate. Staff receive training to ensure they maintain their skills as regards medicine administration.

## Environment

Health and safety issues in the environment have improved for people. This is an ongoing process. Tests regarding fire, water, and electrical safety are completed correctly. However, fire drills and tests need to be completed regularly and consistently. People have Personal Emergency Evacuation Plans (PEEP) to ensure their safe evacuation should there be an emergency. People can access equipment needed for their care and this is also serviced as needed.

The home has dedicated housekeeping and laundry staff to maintain hygiene in the home. Staff can access plentiful stocks of Personal Protective Equipment (PPE). Staff were seen wearing PPE appropriately. The home presented as neat and tidy.

The home has been improved and better maintained. People's rooms are neat and tidy. Public spaces are clean. The laundry room and other facilities were seen to be improved. The maintenance of the home is an ongoing process, we have been assured essential works will be completed within a month.

## Leadership and Management

The Responsible Individual (RI) visits the home regularly to ensure the care is good quality and to provide staff with support. The manager said they felt supported by the RI and could access supervision. The manager has returned to the home and so there is an improved managerial structure. A deputy position is to be considered to ensure a robust managerial structure in the home to maintain standards should the manager be absent.

People are cared for by staff who are recruited appropriately. Staff have updated checks in place to ensure they are appropriate to work with vulnerable adults. Staff spoken with said they felt well supported, supervised, and trained. We saw this was the case by also reviewing the training and supervision documents.

The provider has not declared any financial difficulties to Care Inspectorate Wales.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
44	The provider has not ensured the premises are maintained to an appropriate standard to meet the needs of people cared for. The environment is not always of a suitably clean and organised standard to meet the requirements of the regulation. The service is not always mindful of health and safety needs in order to mitigate risks for people as far as practicable.	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
N/A	No non-compliance of this type was identified at this inspection	N/A

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