



Inspection Report on

Llys Eliau

**Llys Eliau
Groes Road
Colwyn Bay
LL29 8RA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

19 August 2022

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About Llys Elian

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Conwy County Borough Council
Registered places	27
Language of the service	Both
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since it was re-registered under the Registration and Inspection of Social Care (Wales) Act 2016
Does this service provide the Welsh Language active offer?	Yes. This is a service that provides an 'Active Offer' of the Welsh language. It anticipates, identifies, and meets the Welsh language needs of people who use, or intend to use their service.

Summary

People are supported by trained and experienced care staff. The service provides good quality dementia care in an environment that promotes people's well-being and enhances their quality of life. People are stimulated by a range of dementia friendly activities and entertainment either by partaking in the activities or watching others do so. People have a choice about all aspects of their day, and they are supported to utilise their skills in a safe environment.

Staff are happy in their work; they enjoy their job and are proud to work at the home. Care is unrushed, calm, and respectful. Care staff are well trained in the field of dementia care and are supported by a management team which is proactive in seeking ways to improve the service. Although there have been some staffing issues with sickness and other absence, the service ensures it is adequately staffed with agency staff; care is taken to ensure the skills of these staff match that which is required, and use of the same agency staff when required helps ensure continuity. Recruitment is ongoing and good progress is being made.

The provider of the service has a good insight about how it is operating, with regular audits of various elements of care and a six-monthly Quality of Care review. Surveys are distributed to relatives, stakeholders, and staff to ascertain their views and identify any changes or improvements required.

Well-being

People have choice and control regarding the care and support they receive at the home. They choose how to spend their day and carry out their daily routines. Personal plans include person centred accounts of people's lives and history, their likes and dislikes, and the care and support provided reflects their preferences. People have choice around meals, activities and where they want to be within the home. Activities and entertainment are planned with people's needs, abilities and interests in mind and there are stimulating items around the home to pick up, hold and pet. Relatives praise the care provided; staff praise the culture of the service and the real choice people have.

People's physical, mental, and emotional well-being is looked after by experienced and well-trained care staff who seek professional advice when required. We saw records of appointments with health professionals are made and G. P's and district nurses visit the home when required. Staff are trained in the field of dementia care; they interact with people with kindness and care, respectful of their individuality. People's care and support needs are reviewed frequently so that any changes can be quickly identified. Equipment is purchased to enhance people's comfort and safety.

People are protected against poor practices, abuse and neglect as staff are trained in the subject of safeguarding and there are policies in place to guide them. The manager is approachable and is available to see staff should anyone need to raise any concerns. Regular meetings with staff, alone and in groups, allows opportunity to discuss concerns and share new information. The service has arrangements in place to ensure any decisions that restrict a person's liberty are made only in their best interest and with full consideration of the family and local safeguarding authority.

People benefit from accommodation that is laid out to enhance well-being and promote a peaceful and calming environment. There are four areas of the home each accommodating up to eight people who share some interests and are compatible with each other. The layout enables people to become familiar with each other and their surroundings more easily. It is a homely and comfortable environment with cheerful décor and clean bright rooms. Each area has its separate dining room, kitchenette, and garden; a small conservatory provides a view over the garden and a quiet, calming space with comfortable homely furniture.

Care and Support

People have the quality of care and support they need and prefer; their personal plans are kept up to date and consider their wishes, preferences, physical, mental, and emotional needs. This is a dementia care service and the layout of the environment, the furnishings and décor, and the expertise of the staff are all designed and developed to meet these needs well. All elements of care are considered in personal plans that are reviewed every three months, and we saw how people's needs and interests are catered for. There are lifelike cuddle cats and baby dolls to bring comfort to people and enhance their well-being. There are separate 'houses' within the care home that allow for a more intimate family feeling; people are compatible with one another and enjoy each other's company. Staff can spend time getting to know people and chatting with them. The housekeeper told us people will walk beside her as she works, and they chat. Memory boxes situated at each bedroom door afford a picture of what the person has enjoyed in their life and what matters to them. Welsh speakers are supported by staff who can communicate in their chosen language and information is provided, and posted on walls, bilingually.

Activities are varied and arranged daily. Quizzes, music, crafts, exercises, and bingo are some of the activities featured on the activities board, posted in the hall; a choir visits the home twice weekly. We saw staff interacting with people in a respectfully familiar manner, taking time to listen and chat to people. We spoke with a relative of someone living in the home. They said there are '*excellent activities here*', and praised staff for always involving people, even if they don't participate. A private social media group, set up by the service, posts photographs to inform relatives of the activities and entertainment people engage in. Mealtimes are a relaxed experience and we saw choice is afforded for every meal; a cooked breakfast is always on offer. Tables are set with tablecloths and condiments; there are snacks and drinks for people to help themselves to.

People's physical, mental, and emotional well-being is looked after by care staff who seek professional advice when required. We saw records of appointments with health professionals, and G. P's and district nurses visit the home when necessary. Nutritional intake is recorded, and people's weight is closely monitored. Risk management systems ensure potential hazards are identified and strategies are put in place to protect people. We saw medications are monitored and reviewed with changes made if required. Equipment has been purchased to enhance people's comfort and safety, and some people have brought in their own items of furniture such as a favourite reclining armchair.

Environment

The service provides an environment with sufficient space for people to move around freely and make choices about where they want to spend their day. Four 'houses' within the building accommodate up to eight people, creating a feeling of homeliness and allowing people to spend time with people with whom they are most compatible. Each area of eight rooms has its own private garden offering seating and shade, a quiet, small lounge overlooking the garden, a dining and kitchen area and a larger television lounge. Furniture is domestic in style and people are relaxed and comfortable. We saw people walking around, some in their own bedrooms and some sitting in various places around their accommodation evidently choosing where they wanted to be. While the home is comfortable, colourful, bright, and clean, some areas of the gardens have not been tended to recently; borders are overgrown; some furniture is worn, its colour faded, and plant pots are situated so they may pose trip hazards.

Bedrooms are personalised and provide furniture appropriate to meet people's needs; some have adjustable beds to enhance comfort and well-being for those with more mobility issues. Each bedroom has its own large ensuite wet room, so people are supported with personal care in privacy and with dignity. We saw there are plans for further enhancement of bedrooms and an emphasis on the need to further personalise each person's space. The service promotes practices to manage the risk of infection. Three cleaners work in the morning to help ensure the environment is kept hygienic. The Food Standards Agency has recently awarded the kitchen a rating of 5 which is the best it can be.

The service provider has measures in place to identify and mitigate risks, maintain important facilities and equipment, and keep people safe. We saw risk assessments have been completed in relation to the environment and in respect of everyone. Incidents of falls are monitored and evaluated to identify themes and make risk management more effective. Equipment such as sensor alarms alert staff when people are getting out of bed so they can act swiftly to prevent falls. Records show maintenance and safety checks are completed for water, fire equipment, gas, electrical appliances, and electricity installation. Staff have received training to enhance safety such as fire safety, first aid, food hygiene, health and safety and moving and handling.

Leadership and Management

The provider has governance arrangements in place to help ensure the service is effective and that there is good oversight. The manager has a program of audits she completes to check practices reflect written policy and procedures. The responsible individual visits the home at least every three months during which several aspects of the service are scrutinised including the environment, and the views of staff and visiting professionals is sought. There is a service improvement plan that is reviewed every three months to check progress is being made. A quality-of-care review is completed which identifies what is working well and what needs to improve, and this is based on information collated throughout the previous six months.

The service has a range of policies and procedures in place to instruct and guide staff and keep residents safe. The manager or deputy manager are always present in the home and the office is situated so that people may approach at any time. We spoke with staff who confirmed they feel supported and are very happy in their work. One said *'I love it here, it's completely different to other places (I've worked). People have choices, everyone does as they want and when they want'*. Another staff said they had worked in many places but *'this is the only place I know like this. I am proud to say I work here'*. Staff told us there is no rush and they have time to talk and interact meaningfully with residents. Our observations on the day of our visit confirmed this.

People are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge to provide the care and support required. We saw there are sufficient staff on duty to meet the needs of people living in the home in an unrushed manner. We spoke with a relative who praised the staff for being caring and attentive. Staff records show safe recruitment procedures are in place and people are properly vetted before employment. While the service does use agency staff to cover sickness and other absence of permanent staff, they use an agency that provides full profiles of staff, so they are able to choose those with the requisite skills and experience. They endeavour to select the same staff to ensure continuity. Recruitment is ongoing and the provider has made a decision to restrict admissions until they are confident of sufficient resources to draw from. The well-being of residents is a priority to this service.

Training includes a range of relevant topics, some of which is mandatory during induction and some which is desirable and provided to staff following employment. Dementia care is a key focus and staff progress with this, as well as other training, is monitored and captured on a training matrix. Staff are encouraged and supported to enhance their skills and expertise. Staff are supported by one-to-one meetings with the manager during which concerns can be raised, current practice and aspirations are discussed. We saw notes of meetings with staff where opinions have been sought of ways to further enhance record keeping and care planning. This helps staff feel valued and that their views matter.

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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