



Inspection Report on

Walls Residential Care Home Ltd

**Walls Residential Care Home Ltd
30 Vaughan Street
Llandudno
LL30 1AB**

Date Inspection Completed

13 October 2022

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About Walls Residential Care Home Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Walls Residential Care Home Ltd
Registered places	10
Language of the service	English
Previous Care Inspectorate Wales inspection	3 March 2022
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

This was a focused inspection, which concentrated upon areas of the service identified at the last inspection as needing priority action.

People living at Walls Residential Care Home Ltd are supported to live as independently as possible. People are supported by a care team who understand the needs of the people to whom they provide support.

People are happy with the support provided at the service. People we spoke with told us they feel safe at the service and feel comfortable to approach management with any concerns.

The service provider has made improvements to the environment to ensure the home is suitable for people living at the service. Improvement works are ongoing, and the provider have put systems in place to identify works required.

Staff feel supported by management and told us management operate an open-door policy, where they can discuss any issues in an informal manner.

Well-being

People living at the service have control over their day-to-day lives; they are able to make their own decisions on a day-to-day basis. People told us they are able to do what matters to them and are free to come and go as they wish.

The service supports people to maintain their physical, mental and emotional well-being. Care staff support people to obtain health appointments and these are clearly documented within the persons care file.

The service has measures in place to ensure people living at the service are protected from abuse and neglect. People told us they feel safe at the home and are able to approach management with any concerns.

The service has an ongoing refurbishment plan in place to improve the premises. We saw some rooms have been refurbished and there are plans in place for the remaining rooms. A new heating system is being installed to ensure all the floors have sufficient heating.

Care and Support

As this was a focused inspection, we have not considered this theme, in full.

People feel confident the service provider have an accurate and up-to-date plan for how their own care is to be provided, in order to meet their needs. We found personal plans are reviewed at least every three months and it is clear when changes are made. However, the introductory page of each personal plan is not updated to reflect the information in the specific care plans. This could lead to incorrect care and support provided by staff.

Care staff work from personal plans which clearly detail the support required to meet the person's needs. Personal plans promote positive risk taking and people are encouraged to be as independent as possible. Staff complete the relevant daily documentation, this is mostly written in a person centred manner and is in line with the personal plans.

People told us they are happy with the way the care and support is provided, one person told us "*It is the best care home I have ever been in*". People we spoke with said they feel supported by the staff at the home, they feel safe and are able to do what matters to them.

The service provider mostly considers the persons wishes and aspirations when developing and reviewing the personal plans. Staff at the service document when the person declines to participate in the reviewing of their care and support. There are mechanisms in place to help support people to manage their own money, this is carried out in consultation with the person.

People are supported to access healthcare and other services, to maintain their ongoing health, development and well-being. The service has clear records of relevant health appointments, including the actions required.

Most personal plans include the appropriate risk assessments, but a minority require further assessments to be included. Some risk assessments are too generic and do not contain enough information on how the risks are to be mitigated. The service provider assures us this will be resolved with a software update and will contain more detail, we will follow this up at the next inspection.

We saw positive interactions between care staff and people living at the service. People living at the service have a good rapport with care staff and the management team. We found people are treated with dignity and respect.

The service provider promotes hygienic practices and manages the risk of infection. People living at the service are provided with the appropriate facilities to maintain their personal hygiene. Appropriate facilities are in place to dispose of people's personal hygiene products.

Environment

The service provider ensures people receive care in a location and environment with appropriate facilities, which promote the achievement of people's personal outcomes. The facilities at the service enable people to live as independently as possible.

Risk assessments are in place for people who smoke in their own rooms, staff empty the ash trays on a daily basis. The smoking lounge is due to be redecorated and one of the extractor fans requires connecting to the electrics, to ensure the room has better ventilation. The service provider has assured us this will be completed as soon as possible.

The service provider has put measures in place to identify works required, we found works are being recorded when identified and documented once completed. A new heating system is being installed, to ensure all people living at the service have sufficient heating. Window restrictors have been installed for bedrooms above the ground floor and there are risk assessments in place.

Since the last inspection, two bedrooms have been refurbished, including the ensuite facilities, we found these were completed to a high standard and in consultation with the person. Some bedrooms and communal rooms require improvements, the service provider has a plan in place to complete this work. People told us they are happy with the improvements in the home. We spoke with one person who had recently had their room refurbished, they told us they are very pleased with the work completed and they were able to choose how it was decorated.

Toileting and bathing facilities are clean and appropriately equipped, to promote personal hygiene practices. Improvements are being made to the facilities; the flooring in the downstairs toilet has been replaced and the shared bathroom is due to be refurbished.

Leadership and Management

As this was a focused inspection, we have not considered this theme in full.

People are supported by a service which provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide support to people living at the service. Staff benefit from supervisions and these are carried out mostly every three months. Annual appraisals have not been held with staff. However, the service provider has put a plan in place for these to take place every twelve months. Staff we spoke with told us they feel supported by management and are able to approach management with any issues. However, formal, regular, staff meetings are not taking place. Staff we spoke with told us team meetings would be beneficial. The service provider has assured us these are now in place, we will follow this up at the next inspection.

The service is provided in accordance with the statement of purpose (SOP). The SOP has been updated to include the works completed at the premises. The SOP accurately describes the service being provided and it details the arrangements in place to support the delivery of the service.

Feedback from a professional we spoke with included, it is clear improvements are being made to the environment and people living at the service are very complimentary of the support they receive.

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
15	The service provider has not ensured all personal plans and associated risk assessments are accurate, up-to-date and complete for all people using the service.	Achieved
44	The service provider has not ensured the home is warm, well decorated, well ventilated and suitable for the purpose of meeting people's emotional, physical and mental health needs.	Achieved
57	The service provider has not identified all risks to the health and safety of individuals in order to reduce those risks as far as possible.	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
56	The service provider has not ensured satisfactory standards are in place to support and encourage people to adopt good hygiene practices.	Achieved

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