



Inspection Report on

Llys Cadfan

**Llys Cadfan
Brynhyfryd Road
Tywyn
LL36 9HG**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

25/10/2023

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About Llys Cadfan

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gwynedd Council Adults and Children's Services
Registered places	33
Language of the service	Both
Previous Care Inspectorate Wales inspection	28 September 2021
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

People appear happy living at Llys Cadfan. People are supported by kind and respectful staff who support people with their care needs in a dignified and timely manner. People are happy with the care and support provided by staff and the way the home is managed. The "Active Offer" of the Welsh language is promoted. Staff speak with people in their preferred choice of language, Welsh or English.

People are given opportunities to participate in a variety of activities. People receive visitors and the local community play an active role in promoting the wellbeing of people. People's personal plans and risk assessments provide good detail about how to meet people's needs.

Staff recruitment and retention is good. Staff told us they feel supported by the management. The responsible individual (RI) has good oversight of the service.

The premises are in their own grounds with secure areas for people to sit and safely walk outside. People are happy with their rooms and communal areas. Bedrooms are decorated with personal items, and communal areas display items of memorabilia. The home is clean and tidy with good practices regarding infection prevention and control measures.

Well-being

People can make choices regarding their daily lives. Staff treat people with respect and their views are respected. Staff are aware of people's food preferences and menu's seen show a variety of options available. People told us they enjoyed the meals served and our observations confirmed this. One person who sat in her bedroom watching television, told us this was her choice and is respected by staff.

People can choose where to spend their day, in one of the lounges or in the comforts of their bedrooms. Activities are offered to people daily, with a weekly programme of activities on display. We saw autumn activities in preparation with Halloween decorations around the home and autumn wreath decorations. People told us they like to sit outside and go for short walks. Beach wheelchairs are available for people with mobility needs to visit the beach safely. The gardens are being developed with enclosed sensory areas for people to access. Staff told us they have community links with local groups and schools. We saw a poem on display written by one person in recognition of the care and support provided by staff. One person told us *"It's alright, but there's no place like home, the food is ok, I had bacon and egg for breakfast. The staff are kind."* Another person said *"I'm lucky to have a place like this, the staff are kind, and the food is good. One thing I would like is for staff to wear name badges as I forget their names!"*

People are supported by care workers to be as healthy as they can be. Visiting professionals told us *"The staff go above and beyond; we don't have any concerns – they are all good here. At the end of the day, it's their home."* People are appropriately referred to health care professionals in a timely manner.

People are cared for by staff who are familiar with their needs. The Welsh language is offered, and many staff speak Welsh. Welsh language lessons are offered to staff. Staff retention is good with some staff working several years at the home. When agency staff is used the same workers are requested for continuity of care. Staff told us they attend training and supervision is provided.

The environment of the home supports people to achieve a good standard of well-being. Dining tables are set for meals with china crockery, condiments, and daily menus. The home is well organised, and people have a choice of lounges, conservatory or their bedrooms to spend their time.

Care and Support

People are supported to be as healthy as possible. Timely referrals to health professionals are made and there is effective administration of medication processes in place. People's dietary needs are considered with healthy, nutritious home-made meals offered to ensure people remain well. We saw hot and cold refreshments served throughout the day. The dining experience includes people and care workers having their meals together and chatting. People's weight is monitored, with any concerns regarding weight loss being referred to health professionals.

People can influence their care. People told us how they spend their days, when they get up and what choices they have in relation to what activities and meals. We saw people enjoying walking around the grounds. People's plans are person centred and reflect their daily and nightly routines. One visitor told us they were very happy with the care and support provided as their relative had improved physically since moving to the home. They told us *"It's like a social club – all the staff are kind."* Relatives told us they are consulted and involved in care reviews and personal outcomes in relation to people's health and well-being. Personal plans and risk assessments are reviewed and reflect how people would like to be supported. Daily records and charts show people receive the care they need when it is required.

People can choose how they spend their days. We saw photographs on display of activities that take place. A weekly programme of activities is on display for people to decide should they wish to take part. People's choice not to participate is respected by staff with people preferring to sit and watch the television following the previous day's activity of autumn wreath making. We saw care workers interact with people in a friendly way, people who preferred to stay in their bedrooms is respected by staff. The individual daily records evidence what activities have taken place.

There are processes in place to safeguard people. Individual risk assessments are in place and staff are aware of the importance of making the relevant referral to the local authority if they have any concerns about the people they work with. Staff receive up to date safeguarding training. Staff are required to pass a competency test prior to administering medication. A record of personal possessions and items brought into the home by people receiving respite care are in place. This is an area for development for people moving to the home on a permanent basis.

Environment

The environment is safe, homely, and warm. Bedrooms and communal areas are decorated and furnished to a good standard with matching furniture and furnishings. People are surrounded by their personal items and belongings. People told us they liked their bedrooms and could choose where to sit. There are aids and adaptations to support people to access all areas. A locked door policy is in place to safeguard people from risk of harm if they look to leave the premises unsupervised.

The provider ensures the environment supports people to achieve their personal outcomes. The layout of the home, together with the provision of aids and adaptations helps to promote independence. Ceiling hoists are located in some bedrooms and bathrooms. The outside areas of the dementia unit are secure enabling people to sit outside or walk around the patio area safely. This area is being developed to enhance peoples well-being.

Health and safety of the home is managed. The provider acts on the views of external agencies. Records show that utilities, equipment, and fire safety features have regular checks and servicing. The manager is reviewing the frequency of testing emergency lighting and fire extinguisher inspection as they are not consistent. The home has a 5-star food rating from the Food Standards Agency (FSA). People have Personal Emergency Evacuation Plans (PEEPS), so they can be evacuated safely in the event of an emergency. Information recorded includes specialist aids used and any behaviour problems when confronted by strangers.

Infection control measures continue to be in place to ensure people are safe from infections. Visitors to the home are requested to follow the home's current guidelines in relation to infection control.

Leadership and Management

There are arrangements to maintain oversight of the service, and processes to monitor the quality of the service. The RI conducts regular visits and considers residents views, staffing, the environment, complaints, health and safety, and compliance. Care workers told us the manager is easy to approach and very supportive.

People are supported by staff who are suitably fit and have the knowledge and skills to meet their needs. Staff recruitment and retention is good. Records show required checks are carried out prior to commencing employment to ensure staff are appropriate to work with vulnerable adults. Staff employed are registered with Social Care Wales (SCW). Documentation provided shows staff have undertaken training to support their roles. Refresher training in safeguarding and staff Welsh language lessons were taking place during the inspection. Staff rotas show there is sufficient staff on duty to meet the needs of people living in the home. Agency staff are used where there is a shortfall of employed staff with the same agency staff requested for continuity of care. One agency staff told us they have regularly worked at the service. Staff meetings are arranged to share operational matters such as training, health and safety, and provide opportunities for staff to share ideas or any concerns regarding service delivery.

The service has a statement of purpose, which is available to people and visitors. In addition, people have access to the quality-of-care review report produced by the provider which highlights any improvements and developments. People are given information that describes the service and how to make a complaint.

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
73	<p>There are arrangements in place to maintain oversight of the service. Processes are in place to monitor the quality of the service and ongoing support is being provided by Local Authority officers to improve the service. The RI has supported the service and management through the recent pandemic; this has been done through telephone calls and virtual meetings. The regulations require the RI to speak with people and staff at least every three months. This has not taken place on a three monthly basis during the pandemic. The Local Authority area manager supports the manager and staff team by conducting regular visits and telephone/virtual meetings. While no immediate action is required, this is an area for improvement and we expect the provider to take action.</p>	Achieved

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