



Inspection Report on

Llys Herbert

**Llys Herbert
Ty-draw Road Lisvane
Cardiff
CF14 0AW**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

27/02/2024

Welsh Government © Crown copyright 2024.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Llys Herbert

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Care UK Community Partnerships Ltd
Registered places	75
Language of the service	Both
Previous Care Inspectorate Wales inspection	26 February 2024
Does this service promote Welsh language and culture?	This service provides an 'Active Offer' of the Welsh language and demonstrates a significant effort to promote the use of the Welsh language and culture.

Summary

People are extremely happy with the care and support they receive. They receive care and support from dedicated, kind, and friendly care staff. Care staff complete a range of training topics to meet the needs of those living in the home. The service people receive is further enhanced by the skilled and enthusiastic catering, housekeeping, and maintenance teams. The way the teams work together is a strength of the service because they meet collectively to review a person's needs and outcomes. Personal plans and care documentation fully informs care staff of how a person wants to be cared for. People are actively participating in reviewing their care. The service promotes them to be as independent as they can be. There are good governance arrangements in the home. The responsible individual (RI) has good oversight of how the service is being managed. The management complete sound monitoring and auditing activities. The voice of people living in the home is of great importance to everyone working there, people are listened to and valued. Care staff receive timely supervision. Staff culture and team morale are mostly positive. People live in an outstanding environment which promotes their very best outcomes.

Well-being

People know and understand what care, support and opportunities are available to them to help them achieve good well-being outcomes. They are well informed about the service prior to admission. People's initial enquiries are well organised and managed by customer services. Information is accessible, and time is taken to explain what the service can provide. The service provides people with an up-to-date service user guide, literature about groups and activities and a tour of the home. This means people are given enough information to help them make the right decision about their care and support before signing a service agreement. People and representatives told us information was clear.

People's individual circumstances are considered. The service strives to meet cultural and religious needs. Welsh culture and heritage are strongly represented throughout the décor of the home and information is available in Welsh. Some people recently took part in an activity called Recipes to Remember, where people baked with catering staff, preparing foods of significance to their culture or to evoke special memories. The service respects people's needs and wants around religious beliefs. Religious services take place in the home, and people continue to visit their own places of worship should they choose.

People are treated with dignity and respect. All staff across the teams working together at the home know people very well, and this positively impacts on their well-being. Care and support are person-centred, kind, and professional. People told us they appreciate the '*Little things*' which make a difference to them on a day-to-day basis. For some, it was how catering and care staff serve tea and snacks, and how the kitchen team '*Go beyond*' when catering for specific preferences.

People are protected from harm and abuse. Care staff complete safeguarding training and access up to date policies and procedures. There are established systems in place for reporting and recording concerns, complaints and matters of safeguarding. People have a high level of confidence in the whole staff team, and the management would be proactive to address any worries they may have. Care staff understand their roles and responsibilities to keep people safe, maintain accurate records and to sustain their skills, knowledge and competencies.

There is an up-to-date statement of purpose (SOP). The SOP is a regulatory requirement which accurately describes the service. People can have confidence the service is operating in accordance with their SOP.

Care and Support

People contribute to decisions about their care and support. The service involves them and their representatives when completing assessments and writing personal plans. Personal plans are informative and tell care staff of a person's primary needs. Personal plans focus on supporting people to be active and be as independent as they can. They fully participate in reviewing the plans, which captures their feedback on all aspects of living in the home. Information about a person's life and what is important to them is available to care staff, most people's profiles are detailed but this is not the same for everyone.

People get the right care and support at the right time. They receive continuity of care from dedicated and skilled care staff. People are treated with kindness and respect. Care staff complete daily records which tell us people receive support in-line with their personal plan. There is valuable oversight of people's physical health and records tell us they see healthcare professionals. District nurses and GPs visit the home on a weekly basis and other services such as chiropody is available. The service provides sensitive care and support to those with declining health and work well with other healthcare specialists to make people comfortable.

The service appropriately manages medication and enables people to be independent with self-administration when it is safe to do so. Care staff complete training to safely administer medication to those who require it. Most records relating to medication management are accurate. A medication policy fully informs care staff and there is good clinical oversight. The service is proactive at making changes to continually improve how they support people with medication.

Catering services are of a very high standard and people consistently praise the quality, availability, and choice of foods. Catering staff are highly experienced in meeting people's specific dietary needs, and modified diets are catered for. We found ample availability of drinks and snacks available to people throughout the day. Dining areas are set out to restaurant standards. Positive interactions between care staff and people at mealtimes is not as consistent as it should be, meaning people may not always get the social communication they would like. Care staff monitor a person's eating and drinking for a short time after admission and keep records of people's weight which is good practice. The service audits the information and monitors people's well-being, and make suitable referrals when needed.

Environment

People live in a home which supports them to achieve good well-being outcomes. The home is beautifully decorated to an impeccable standard. Soft furnishings are well thought out to meet the needs of people, especially for those with dementia care needs. The atmosphere is calm and relaxing. Levels of cleanliness and infection control is excellent. People are extremely happy with the standard of housekeeping and maintenance.

People especially value the café area, where they meet visitors, and socialise with each other at any time they choose to. The café area is impressively stocked with a range of hot and cold drinks and freshly baked snacks. People told us this area of the home gives them a sense of normality, as it feels like going to a coffee shop with friends. People receive visitors as and when they choose to. Visitors to the home complete the visitor book but checks on identification is not as strong as it should be. The provider is making immediate changes to ensure all visitors are received safely.

Equipment is available to enable people to complete daily care tasks, and to move around the home freely and safely. There is a strong emphasis on people keeping active and the provider supports positive risk taking. People take part in groups such as Move it or Lose it and Falls Prevention. There is ample storage for moving and handling equipment, meaning all equipment is out of sight, providing a more homely setting. Some rooms are locked to keep people safe. Bedrooms are personalised, and on-suite facilities are pristine. Communal bathroom suites are exceptionally equipped.

Fire safety records evidence all care staff have had at least one opportunity to be involved in drills, the fire safety maintenance file is in good order. Records and certificates relating to maintenance of the home are complete and there is excellent oversight of the environment.

The home has excellent facilities for people, such as a bar, a cinema, and salon. There are multiple rooms across the communities for activities and hobbies. These rooms are superbly equipped, extra care and thought is given for suitable and interesting objects and activities for people with dementia. People have access to outdoor areas, which offer ample furniture, and green spaces. The service involves people when planning the development of the green spaces with their input and ideas.

Leadership and Management

There is effective leadership and management at the service and the organisational structure is clear. The RI is responsible for the quality of the service people receive and has oversight of how the home is managed. The RI completes regular visits to the home to speak with staff across the teams and engage with people to get their views and opinions on the service they receive. Quality assurance activities are done well. The RI produces a quality-of-care review, which is a regulatory requirement. The quality-of-care review informs the provider what is working well and what the service could do better based on feedback, observations, and auditing of records. There are strong auditing procedures in place throughout the service, and we found improvements are made after incidents or accidents. Current quality assurance activities tell us the service is working well.

Obtaining people's views and opinions is a strength of the service and people have a strong voice. The service actively encourages people to provide feedback and to nominate any staff member for recognition of their work. Resident meetings are regular and highly valued by the management.

The service follows safe recruitment procedures and there is effective oversight of staff records. Induction and probation for new care staff is robust. Disclosure and Barring Service certificates are in place for all staff. Records relating to care staff qualifications and Social Care Wales registration, the workforce regulator are complete. Care staff receive regular supervision. The range of training care staff complete meet the needs of people using the service. Records relating to the skills, knowledge and competency of care staff administering medication are good.

Most care staff told us they feel valued and supported in their role, but not all. The RI is aware and is taking steps to ensure all care staff understand where to raise matters with confidence and anonymity.

Care staff access up to date policies and procedures and the service arranges monthly meetings. The service strives to celebrate and recognise good work across their team. Majority of staff told us their well-being is important to management, and teamwork is strong which positively impacts on people's outcomes. But some care staff would like better communication on matters impacting their well-being. We found staffing levels properly managed, but feedback told us care staff sometimes experience something different. The provider is actively recruiting for known gaps in the staff team.

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
N/A	No non-compliance of this type was identified at this inspection	N/A

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 18/04/2024