



## Inspection Report on

**Llys Meddyg**

**Llys Meddyg  
4 Station Road  
Denbigh  
LL16 3DA**

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

**This report is also available in Welsh**

**Date Inspection Completed**

11/04/2024

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## About Llys Meddyg

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	John Roberts
Registered places	18
Language of the service	Both
Previous Care Inspectorate Wales inspection	<a href="#">7 July 2023</a>
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 receive care from attentive, kind care staff who enjoy their work and have formed respectful, compassionate relationships with them. Relatives are happy with the care provided and are confident people live in a caring, effective home. Care provided reflects that which is documented in the comprehensive care plans; people's needs and preferences are catered for, and choice is respected where it is at all possible and safe to do so. Care plans are designed following collation of information from health and social care professionals, so staff know how to meet people's needs. The facilities provided in the home do not currently fully reflect that which is offered in the statement of purpose, but there is a plan in place to address enhance the building, its facilities and garden. Staff are safely recruited as the provider carries out all required checks prior to employment. Care staff are trained in a range of relevant areas and progress is monitored so the provider is aware of when and which training needs to be updated. Some staff still require training in some areas, and this is to be arranged.

## Well-being

People have control over day-to-day life. Information is gathered at the time of admission which informs the service of the person's preferences, how they have spent their life and what they love to do, their favoured routines and interests. They are supported to dress and keep their appearance as they want; a visitor commented that clothes are nicely laundered and returned carefully to their rightful owner and a hairdresser visits the home. People are treated with respect for their privacy and dignity with more personal items stored discreetly; care staff address people with kindness and care. Some people choose to stay in bed until late morning and they go to bed when they wish. Personal preferences are catered for in diet and activities.

The care staff provide the right support to ensure people are healthy and happy as they can be; care staff are familiar with the needs and preferences of most people living in the home as they read care plans for each person. There is always a trained nurse on duty and health is monitored and recorded. People do things that interest them and activities are arranged to occupy people during the afternoon. The provider refers to assessment documents prepared by professionals involved in the care of the person so they can design a plan of care, but the assessment process is an area for improvement. The provider must complete their own full assessment, so they can be sure the service is able to help the person reach their desired outcomes.

People are protected from abuse and neglect as staff have received relevant training and can access the right policy and procedure. Staff told us there is always someone to talk with in the office. Regular staff meetings and one-to-one supervision sessions provide lots of opportunity for staff to raise concerns about practice should they have any. Staff have training in dementia awareness so they are better equipped to understand how this affects the people they care for and can support them in a positive way.

People continue to enjoy their relationships with their family and friends as visiting is positively encouraged between mealtimes. Rooms are personalised with photographs of family to remind them of special occasions and other memories. Care staff describe their work in the home as a pleasure; *'it's not just work to us'*. They enjoy the family, homely, feel of the home and the relationships they form with the people they care for. Family visitors are reassured that care staff genuinely care for their relative in the home.

## Care and Support

The service provider considers a range of views from people and their family, and any professionals involved with the person's care prior to admission. Assessments completed by health and social care professionals are referred to when designing the care plan and an 'all about me' document outlines people's preferences and details about their life. The service records basic information about each person but needs to complete a more comprehensive assessment of need upon admission, to accurately assess the service's capacity to meet the desired outcomes. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Care plans cover a range of areas specific to the person's care and each of which is reviewed every month. Daily records evidence actions specified in care plans are taken; staff know how to meet people's needs and follow instruction effectively. Risk management strategies are followed; we saw records of specific care kept in each person's room where they are not able to get out of bed. Measures are taken to protect skin integrity and ensure continued hydration. One care plan highlighted someone enjoys finger food and fruit and we saw them eating finger toast and a banana for breakfast.

People are provided with the quality of care they need as the service is designed in consultation with them and others who know them well. There is a range of activities people enjoy in the afternoons including some live, musical, entertainment. We saw some activities are individual to suit preferences, such as gardening and shopping. The service provides an active offer of the Welsh language. Visitors told us people *'always look well cared for'* and *'staff are kind'* *'food is excellent'*, *'there are plenty of Welsh staff so people can speak in their chosen language'*. Relatives praise the kindness of staff. We observed a care staff attend to someone who was becoming agitated. The care staff distracted the person with a life-like, mechanical toy cat, and, speaking with a gentle tone, encouraged them to stroke and pet the toy. The person calmed.

People access health care when they need it; there is always a nurse on duty and additional health services are sought when necessary. We saw letters of appointments and professional guidance for staff in management different health issues.

There are safe systems in place for medicines management. The community pharmacy has recently completed an audit and were very happy with the arrangements in place. Appropriate records are kept of medications administered and there is adequate, appropriate secure storage. Only trained nurses are permitted to administer the medication in the home.

## Environment

The home is in a town, close to shops and other places some people like to visit. The home is kept clean with the employment of two domestic staff. We saw cleaning schedules set up, so areas do not get missed and are cleaned regularly. The home is bright, warm, and homely.

There is a lift so people can get to the first floor easily. There are wet rooms making it easier for people to have a shower and everyone has adjustable beds so they can always be comfortable and safe when sleeping. People have lap tables to eat their meals from and there is a small dining room to accommodate a few people. People have equipment that helps them get around the home and to help them transfer from chair to bed. New flooring has recently been fitted to communal rooms and we saw one bedroom was being redecorated.

We saw some areas for improvement such as curtains in a poor state of repair, some of which had come off the curtain tracks; stained and damaged ceiling tiles; chipped and scuffed décor in places ; the need for more suitable lighting in some bedrooms; and the need to replace the kitchen. The room with an assisted bath is currently out of use and the garden is not safe or secure as there is no secure boundary and there are trip hazards. One person's care plan confirmed they like to be in the garden, but they were not able to use it without staff support which wasn't available at that time. Materials have been purchased in preparation for redesigning the garden. We saw a development plan for the premises to address some but not all of the issues we identified. A more frequent and comprehensive audit of the environment should be undertaken so issues can be identified and resolved promptly. This is placing people's well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this.

The provider has arrangements in place to ensure the health and safety of the building. We saw certificates and other evidence of required checks being carried out to ensure safe electrics, water, gas, fire safety and equipment. We saw the lifts and other aid have been tested and serviced. Risk assessments have been reviewed and updated including the fire safety risk assessment. Health and safety, fire safety and cleaning audits are completed.

## Leadership and Management

The provider has governance arrangements in place to help support the smooth running of the service and be sure that care provided helps people reach their outcomes. There are a range of policies and procedures in place to help ensure safe practices and these are reviewed to keep them relevant. Staff can access these and are required to adhere to them. There are audit systems that keep check over the health and safety of the home. The management structure as stated in the statement of purpose is multi layered so there are several people with oversight who can provide feedback to the responsible individual.

There are arrangements in place for effective oversight of the service through ongoing quality assurance processes. In the foyer of the home, there are feedback forms for visitors to give their view of the home and a box to post them in anonymously. These are collated and considered so changes can be made if necessary. Audits are carried out on medication, health and safety of the home, and policies and procedures. Checklists and spreadsheets help ensure procedures such as recruitment, supervision of staff, induction of staff and training are closely monitored to ensure compliance. Quarterly reports indicate the responsible individual visits the home every three months to check the service is running as it should and biannual quality of care reports indicate the provider knows what is working well and where improvements need to be made.

People are supported by suitable numbers of trained staff who have been properly vetted to ensure they are suitable for the role. Some, less mobile people use the lounge on the first floor and others use the ground floor lounge and two care staff are allocated to each floor. There is always a lead nurse also on duty and the manager on most days. In the case of unexpected absence, there is a bank of staff the manager can draw on to cover the shift. We saw recruitment procedures make sure prospective staff are fully vetted prior to employment and they follow an induction programme before both parties decide they are suited to the role. All staff complete a range of training to ensure they have the required understanding and knowledge specific to their role in Llys Meddyg. Some auxiliary staff have not completed manual handling training; some staff have not completed training to ensure a good understanding of the Mental Capacity Act within the context of people living in the home with dementia. This was an area for improvement in the last inspection. This is placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

### 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
43	The facilities provided to people living in the home do not reflect that which is offered in the statement of purpose. While there is an action plan in place to address these issues, a more frequent and comprehensive audit of the premises is required to ensure areas for improvement are identified and resolved promptly.	New
36	The service provider must ensure all staff are supported to complete the training required by their roles and which meets the needs of people living in the service. This includes ensuring compliance records reflect the training achieved by staff as well as training required by individual staff’s roles.	Not 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
18	The provider does not complete their own comprehensive assessment of a persons needs, wishes, preferences and risks. There is no evaluation of how the resources available to the service can meet the persons needs and support them to achieve their outcomes. The provider must ensure a full assessment is completed for each person and that this assessment is reviewed in line with the care plans at least every three months.	New

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