

Inspection Report on

7 Clarence Road

Llandudno

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

22/04/2024



About 7 Clarence Road

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Prestwood Residential Homes Ltd and CareTech Community Services Limited.
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	01 November 2022
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 are happy with the support they receive, and they get on with those working at the service. Choices are provided in relation to how people want to live their lives and what activities they want to participate in. Opportunities for people to be a part of the community are actively facilitated by care workers. Care documents are detailed, up to date and include information regarding each person's care and support needs. Care workers understand how to best support each person and they respect people's preferences. Risk assessments are used to manage known risks to people's safety.

The environment is comfortable, clean and safe. It encourages people to be as independent as possible and to learn new life skills. Improvements have been made to the environment following the previous inspection and it is now well maintained.

Care workers enjoy their work, and they are committed to enabling people to achieve positive outcomes. Recruitment processes are safe and care workers receive appropriate training. Improvements have been made to the frequency of supervision sessions following the previous inspection. The service provider has effective systems in place to regularly monitor the quality of the service provided.

Well-being

People are supported to have positive relationships. We saw people are relaxed in the company of the manager and care workers. They told us they have good working relationships with those supporting them and they feel accepted for who they are. We saw care workers speak with people in a kind and respectful manner, which people responded to in a positive way. People are supported to have regular contact with their families, if this is their choice. Opportunities are facilitated for people to make friends in the local community. For example, we saw people attend religious gatherings, volunteer, and attend a community gym.

Choices are provided which ensure people's rights are protected. People choose their own preferred daily routines and decide how they want to spend their day. During our visit we saw people are supported to participate in social activities within the community that are of interest to them. Where possible, people are encouraged to independently access the facilities within the local area which increases people's confidence in their own abilities. The manager is proactive in their approach to ensure people have as much freedom as possible to make their own choices. When Deprivation of Liberty Safeguards (DoLS) are in place in people's best interests, the manager ensures these are the least restrictive possible. Advocacy services are also facilitated to support people to make choices in their lives. Care workers told us they accept each person who uses the service as unique individuals and differences are respected.

Arrangements are in place to ensure people's voices are heard. People are involved in creating their personal plans and have ongoing opportunities to say how they wish to be supported. These discussions are recorded, and people are supported to express their views and opinions using communication methods which work best for them. Formal processes are also in place to monitor people's satisfaction with the service provided.

People's physical and emotional well-being needs are met. Arrangements are made for people to access the provider's psychological support service when required, to assist people with difficult emotional and psychological issues. Community support groups are accessed, and people's religious beliefs are respected. People's physical health is supported in various ways such as encouraging a healthy diet and lifestyle, having medication as is prescribed and accessing health appointments when necessary.

Care and Support

People's personal wishes, their aspirations, and the outcomes they want to achieve informs their care and support. Personal plans are created with people, and they record in detail how each person prefers to be supported. They include guidance regarding how care workers can meet each person's needs and enable them to achieve their individual outcomes. This facilitates a consistency in the support people receive. Personal plans also record what people can do for themselves and promoting independence is encouraged. Risk assessments are used to enable people to live the life they choose to live, with measures in place to manage known risks. Personal plans are regularly reviewed and are updated when changes occur in people's needs. Records show the care and support provided is in line with the personal plans in place. People told us they are happy with the service they are receiving.

Arrangements are in place to protect people from abuse, harm and neglect. There is a safeguarding policy in place and care workers complete relevant training. Care workers are confident in the action they should take if they have any concerns regarding people's welfare. The manager reports safeguarding matters appropriately to the Local Authority and Care Inspectorate Wales (CIW) are also notified. People told us they feel safe at the service. The manager works closely with other multi agency professionals to protect people so far as possible from potential abuse and harm they may experience in the wider community.

Support is provided to enable people to live a healthy life. People's physical and mental health conditions and how they are managed are recorded in their care documents. Medication charts record people are receiving their medication as prescribed, which helps to manage their conditions. Medication is stored safely. Records show health and social care professionals are contacted in a timely manner for advice when any changes occur in people's circumstances. The guidance provided is recorded and followed to ensure people receive the correct support. People are supported to participate in regular exercise and encouraged to make healthy food choices. The risks to people's health are identified and recorded. Measures are in place to manage the risks, so far as possible, whilst allowing people to make their own choices how they wish to live.

Environment

Support is provided within a safe and homely environment which encourages independence. At the last inspection we found not all areas within the home were kept well maintained. At this inspection we found appropriate action had been taken and all areas of the home are properly maintained. The care home includes four separate, self-contained flats. People have keys to the main entrance and to their own front door. Each flat consists of a living room, kitchen, bedroom, and shower room. People told us they are happy with their flat. We saw people can personalise their flat by choosing their preferred décor and by making it homely by adding framed photos and art prints. Kitchen and bathroom facilities are replaced when required. This work is completed at a time which causes the least disruption to people, such as when they are away on holiday.

There is a garden available at the back of the care home, which people can use to take part in gardening activities, if they want to. People can sit outside as there is an accessible patio area and seats are provided. A smoking area is available at the front of the care home for those who require this facility.

People are encouraged to care for their own living environment which increases their independence. We saw each flat was tidy and people told us they keep their own living space clean. Support is provided to motivate people to complete their household tasks and assistance is provided, when required.

Health and safety risks within the home are well managed. Checks are in place to ensure risks to people within the environment are identified and appropriate measures are in place to manage the known risks. Records show fire safety mechanisms are present to ensure the necessary precautions are in place in the event of a fire. Practice evacuation drills take place, and their findings are recorded and acted upon. Each person has a personal emergency evacuation plan (PEEPS) in place which records the assistance they require to leave the building in the event of an emergency. The servicing of gas and electrical appliances, and the monitoring of the water quality and temperature take place as required.

Leadership and Management

People can access written information regarding the service provided, which can be used to inform their decision whether the service is suitable for them. The provider's Statement of Purpose (SoP) is updated annually and accurately describes the service provided. Information regarding how to make a complaint and how complaints are responded to is included in this document. People told us they felt able to raise any issues they may have with the care workers and the manager.

Processes are in place to ensure care workers are safely recruited. Records show suitability checks are completed before persons come to work at the service. Care workers told us they worked shadow shifts as part of their induction to the service which prepared them well for their roles. Relevant training is provided which promotes care workers' knowledge, skills, and their understanding of the needs of the people supported. Care workers are also encouraged to complete relevant social care qualifications. Staffing levels are in line with the SoP and according to the agreed number of support hours people should receive.

Care workers enjoy their work and feel supported in their roles. At the previous inspection we found care workers were not receiving one-to-one supervision meetings as often as is required. At this inspection we found action had been taken and care workers are receiving regular supervision meetings. Care workers told us they support each other and can always speak with the management team if they require any guidance. Team meetings take place on a regular basis which provides the opportunity for sharing information and group discussions. The manager has close oversight of the day to day running of the service.

Arrangements are in place to regularly monitor the quality of the service provided. People are asked on a weekly basis what they feel worked well for them over the week and what they would like to do differently in the coming week. This discussion is recorded within people's care documents. This shows people are consistently asked if the service they receive is meeting their needs and provides an opportunity for checking if people's outcomes are being met. The manager completes regular audits to check the service is running smoothly and in line with the SoP. Formal quality of care reviews take place twice a year which measures how well the service is performing and to seek opportunities for further developments. The responsible individual (RI) visits the service regularly and discusses the service provided with people who live at the home. Reports are available to evidence the outcome of their visits which includes action plans where required.

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
44	Not all areas within the home are kept well maintained.	Achieved
36	Not all staff working at the service have received formal supervision every three months.	Achieved

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