



Inspection Report on

3 Cwlach Road

Llandudno

Date Inspection Completed

24/11/2022

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About 3 Cwlach Road

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Prestwood Residential Homes Ltd and CareTech Community Services Limited.
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	27 June 2019
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People receive care and support which increases their independence and facilitates the achievement of positive outcomes. Opportunities are provided for people to make a genuine contribution to their community, which improves people's confidence and their sense of self-worth. People have positive relationships with the care staff and the manager. Care staff have a good understanding of people's individual needs and provide support in a kind, respectful and dignified way. Risks to people's safety are known, recorded and managed, as far as possible.

Improvements are required to the safe storage of confidential information. The environment is homely, comfortable, and safe. People can personalise their own living space and make it feel like their own home, where they feel settled, and they belong. Improvements are required to the overall maintenance of the premises to improve people's comfort and sense of pride in their home. The home is well run, with good leadership in place. Care staff are employed safely, and supervision support is provided. Training is completed; however, care staff should also receive additional specific mental health training. This is to further enhance care staff's understanding of the conditions people are living with. The provider has measures in place to regularly monitor the quality of the service provided.

Well-being

People are happy and praise the support they receive. Feedback from people includes: “*Good place*”, “*Nice atmosphere*”, “*Everything is ok*”, “*Staff are good, supportive, approachable*” and “*Absolutely brilliant*”. Increased support is provided when people experience difficult life events, which enable people to cope better and remain emotionally well. We were told “*I wouldn’t be the person I am today without the staff*”. People like and get on with others who live at the service and feel a sense of trust in the care staff providing their support. People share examples of the positive impact care staff have upon their lives and tell us “*They genuinely care for me*” and “*(the service) saved me*”.

Support is provided by staff who have been recruited safely and who feel supported by the manager. Staff would benefit from undertaking further specific mental health training to enhance their knowledge and support them in their roles.

People have control over their day-to-day life. Care documentation is created with people and includes their individual needs and their preferences. Staff listen to people’s views and show people respect. By developing people’s strengths and providing person-centred support, people’s confidence grows. People are proud of their achievements as their independence is maximised. We are told the care staff “*praise my achievements and are happy for people when they do well.*” The provider is interested in people’s views regarding the service, and regular feedback is sought regarding how the service can improve.

People are engaged with their local community. Opportunities are facilitated for people to work and to participate in volunteering roles. This provides people with a sense of purpose and of contributing to their community. People enjoy attending social events, with support if required, which enables people to build their own social support network. This contributes to people’s positive sense of well-being.

People are protected from abuse. Systems and processes are in place to ensure staff are trained in how to safeguard people from harm and the action to take in response to safeguarding matters. Care staff understand their roles and responsibilities in relation to protecting the people they support. People feel safe living at the service.

The home is comfortable, but improvements are needed to maintain the environment. People can personalise their own living space and make it their own home. This promotes people’s sense of belonging. People’s sense of pride in their home could be further enhanced by living in premises which are better maintained.

People’s personal data is not always fully protected. Action is required to improve this aspect of the service.

Care and Support

People decide how they wish to be supported and the care provided meets people's needs. Discussions take place, between people and care staff, to understand how each person prefers to be supported. Personal plans record people's views regarding what good care looks like for them. There is clear and detailed information recorded within people's personal plans. This includes the support each person requires and how this should be provided. Plans are reviewed regularly and updated when required. People are encouraged to set individual goals they would like to achieve, and progress made is monitored. Increasing people's independence is encouraged. Where possible, people are supported to aim towards moving on to more independent living, in the wider community. Known risks to people's safety are recorded, as are the measures in place to manage and reduce the risk of harm. People are confident care staff understand their care and support needs.

Support is provided to enable people to be as healthy as they can. People are encouraged to manage their own medications, where possible, and systems are in place to facilitate this safely. When required, staff assist people with managing their medication. Medication is stored and administered safely. Staff support people to access health appointments, when required. Health and social care professionals are also kept informed of any changes in people's situations, to ensure the correct support is in place.

People choose how they spend their time and have their own individual daily routines. Participation within the community is promoted in various ways. People tell us they spend their time working, volunteering, or learning new skills. Efforts are made to get to know what people enjoy doing, or what activities they would like to partake in, and support is provided until the person feels confident to go by themselves. People are also supported to keep in contact with their families and to join local groups.

Mechanisms are in place to protect people from abuse and neglect. Staff have completed safeguarding training and are aware of their responsibilities to report any concerns they have. There are safeguarding and whistleblowing policies in place. People tell us they feel safe at the service.

Support is provided in people's preferred language. There are Welsh speaking staff working at the service, should persons prefer to receive their service in Welsh. Key documents are available in Welsh, should people want them.

Environment

Care and support are provided within a clean, warm, and homely environment. The building is divided into five self-contained flats. There is separate office space for the staff. Each flat has a kitchenette, bathroom, bedroom, and lounge. People's own rooms are decorated and furnished to each person's own tastes. People are happy with their own rooms and feel at home at the service. Each flat has its own front door, which people can lock if they wish. One flat was unoccupied during our visit, and we saw new carpets had been fitted and the walls were freshly painted in preparation for the next occupant.

There are seating areas provided at the front of the house which allow people to sit outside and enjoy the panoramic views of the sea and mountains if they wish to. Flowerpots and a rockery area bring some colour to the garden. A sheltered smoking area is also available for people who wish to smoke.

Health and safety checks are in place; however, improvements are required to the maintenance of the premises. Records show gas and electrical servicing take place when required. The fire alarm system is also tested weekly and serviced annually. The water quality is tested annually for legionella purposes. Heavy furniture in people's own rooms is freestanding, and this poses a risk to people's safety. There is a sloped footpath from the street up to the front door. This is cracked and damaged in some parts and poses a risk to people's safety. The outside walls of the premises are showing signs of wear and look unkempt. There is also water damage to a ceiling in the foyer area. The manager had previously reported these issues to the maintenance team, but there has been a lack of timely action to address the issues. The RI had also noted during their visit the exterior of the building required repainting, and this was recorded within their report. These are areas for improvement, and we expect the provider to take action.

Leadership and Management

Arrangements are in place to ensure the service runs smoothly. The manager provides oversight of the quality of the service, regular auditing and checks are in place. The RI visits the service every three months to monitor how the service is delivered. Reports are available to evidence the checks undertaken by the RI during their visits. The manager tells us they receive “*fantastic*” support from the RI and the locality manager appointed by the provider. Quality assurance processes are in place to review the standards of care provided and to check people’s satisfaction with the service they receive. There is a complaints policy and process in place, and people feel able to raise any issues with the manager. People are confident action would be taken in response to any matter they raised.

Care staff are recruited safely. Appropriate checks are completed before new staff are employed to work at the service. Managerial supervision is provided, training and development needs are discussed. Staff tell us they feel supported in their roles, and they describe the manager as “*approachable and fair*”. The manager receives supervision from the locality manager, they feel “*well supported*” in their role. Training records indicate care staff have completed mandatory training, mental health awareness and training related to some mental health conditions. The Statement of Purpose states staff can access “*specialist training courses*” and “*bespoke training*”, dependent on the needs of people using the service. The manager told us further specific mental health training had been arranged twice, but the training did not go ahead as planned. We discussed with the manager and the RI all staff should undertake more in-depth mental health training, related to the needs of the people using the service. This is an area for improvement, and we expect the provider to take action.

People can access written information about the service provided. The Statement of Purpose and the Service User Guide documents are up to date. They contain information which enable people to make an informed decision if the service is right for them. The Service User Guide is written in an easy-to-understand format which assists people to understand the service they can expect.

Action is required to improve the storage of confidential information. People’s personal information is not always securely stored, which places people’s personal information at risk. The manager was unaware not all information was securely stored, until we brought it to their attention. We have issued a priority action notice and the provider must take immediate action to address this issue.

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
59	The service provider has not ensured all records are securely stored in accordance with data protection legislation. Ensure all confidential documents are stored securely.	New

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
44	The service provider has not ensured all areas of the premises are kept free from risks to people's safety and that they are properly maintained.	New
36	The provider has not ensured all staff have completed appropriate in depth mental health training.	New

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