



## Inspection Report on

**Walshaw House**

**2 Churton Road  
Rhyl  
LL18 3NB**

**Date Inspection Completed**

*26/05/2022*

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## About Walshaw House

|  |  |
|--|--|
| Type of care provided                                      | Care Home Service<br>Adults Without Nursing  |
| Registered Provider  | Walshaw Care Homes   |
| Registered places  | 18   |
| Language of the service                                    | English  |
| Previous Care Inspectorate Wales inspection                | <a href="#">01/09/2021</a>   |
| Does this service provide the Welsh Language active offer? | Working Towards. 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

This was a focussed inspection to test if the service has made the necessary improvements to the way the service is run since the last inspection.

People are happy living in the home and are well looked after by kind, attentive and caring staff. Visiting health professionals praised the communication skills of staff and people told us they like living here. People have choice over their daily life. Staff are skilled and competent and support people to have do things that are important to them.

The service provider and responsible individual have processes in place for governance and oversight of the management of the service and the quality of care delivered. However, a formal improvement or maintenance plan is required to support the planned and ongoing work to upgrade the building and environment in the home.

## Well-being

People have choice over their day to day lives and can choose where to be and what to do throughout the day. People personalise their rooms and display pictures and objects that are important to them. People and their relatives or representatives have a say in what care they receive. People have access to the specialist care and equipment they need in a timely way. A variety of food options are available for each meal and people are supported to maintain a healthy diet and lifestyle that meets their needs and preferences. The home is secure, safe, and comfortable. People told us they like living there.

People's mental health, well-being and physical health is monitored, and they are kept safe from abuse and neglect. Staff know people well and support people in a kind and attentive way using personal plans designed to help people achieve the things that are important to them. People have access to the specialist healthcare support and equipment they need in a timely way. Visits from friends and relatives are encouraged. Visitors we spoke to said they were very happy with the care their relatives were receiving there. New staff undergo a thorough process of pre-employment checks and induction training. All staff receive regular training updates to ensure they safely and effectively support people to reach their desired health and well-being outcomes.

People enjoy taking part in activities that maintain and enhance their well-being. People are encouraged to join in with group activities but can also chose not to participate or to do an individual activity. There is dementia friendly and age-appropriate activity equipment available, and staff devise activities based on what people enjoy doing. In the absence of a dedicated activities coordinator, having a more structured timetable of activities would ensure the consistency and variety that meets people's needs and preferences.

## Care and Support

People can be sure they will receive dignified and person-centred care and support from patient and kind staff in a service that can meet their needs. Before people arrive in the home management conduct a thorough pre-assessment to ensure the service can meet their needs. Personal plans are used to help people achieve their desired outcomes. Personal plans are created with input from the individual resident, their relatives or other representatives, and relevant health professionals. People's personal plans are regularly reviewed and updated to ensure staff are fully aware of people's current support needs.

Care staff are sensitive to people's needs and support people in a dignified and respectful manner. People are well dressed and well presented with their hair brushed and clothes clean and tidy. People told us they are happy living there and feedback from visitors and visiting health professionals is also very positive. One health professional told us staff were always approachable and potential issues were communicated to them very quickly to ensure people receive the medical care they need.

People receive good levels of care and support, and records of multi-disciplinary review meetings show they are well supported to achieve their desired outcomes. We observed staff include people in conversation and activities in a way that helped them to be fully involved with what was going on around them and enhanced their well-being. However, staff are not recording all care and support people receive throughout the day and the electronic record does not reflect the full extent their activity. The manager is aware of this and working to improve the quality and consistency of information recorded by staff as part of existing governance and oversight processes.

People are kept safe by staff who are trained and knowledgeable in caring for their particular needs. There is a wide range of training available to staff in specialist areas. Staff are aware of the importance of reporting concerns and how to report them. Staff are informed of changes in people's care needs via shift hand overs and the electronic care record system. Staff seek out medical advice and professional help for people in a timely way and a health professional told us communications with the home are excellent.

People and visitors told us the food is good and people told us they enjoy it. A specialist caterer supplies nutritionally balanced meals to support people's dietary needs. The kitchen offers a variety of menu choices for each meal, including freshly prepared options for those who want them at breakfast and midday. Snacks and drinks are available throughout the day and night.

## Environment

This was a focussed inspection and therefore we did not look at the environment in detail. However, we saw the home is calm and relaxed, homely and had a welcoming atmosphere. People have comfortable and bright airy rooms to socialise in. The dining homely and tables are set for meals with tablecloths and place settings.

The service provider continues to invest in upgrading and maintaining the environment. They have followed recognised programmes and taken professional advice to ensure the environment is more dementia friendly.

The ground floor has undergone extensive refurbishment and redecoration. The manager and responsible individual (RI) told us they are working through upgrading the whole property from the ground floor up. Plans include upgrading flooring and wall coverings and creating walk-in bathroom facilities on the upper floors. Storage in the laundry is currently inadequate and does not ensure staff have clear access to the freezer room or to laundry machinery. Some work has already been completed and some is currently underway, however the manager was not able to provide a planned schedule of works that demonstrates identified priorities and progress made across the home. The manager agreed to provide a maintenance schedule moving forward. This is an area for improvement and will be followed up at the next routine inspection.

The home is very clean, and staff follow policies and procedures to control the risk of infection and keep people safe. Domestic staff clean all areas of the home daily. All communal areas and corridors are kept clean, tidy and free of clutter. All bedrooms seen during inspection were clean and tidy and beds had been made. The electronic system used to record staff activity in real-time does not truly reflect the activity of cleaning staff and shows some gaps where activity is not being recorded when done. We discussed this with the manager who told us this is being addressed as part of ongoing audits of the system and staff training.

The service provider ensures specialist equipment is available for people who need it. This equipment is maintained and serviced regularly, including the lift. Compliance with health and safety, fire safety and environmental checks, maintenance and servicing is monitored by the RI and records show these are up to date.

## Leadership and Management

The service is financially sustainable, and the responsible individual (RI) has processes in place to ensure their oversight the management of the service and monitoring of all aspects of the quality of care and the service people receive.

The service provider has invested in an electronic system for recording all care and support people receive from staff. This system has been in place for approximately eight months and supports monthly management audits. These also form part of the RI's governance and oversight of care quality and delivery.

The RI visits the home in person multiple times each week and knows people living in the home well. He talks to people, staff, and visitors at each visit to gain feedback. Keeping a log of these visits electronically or via a diary will ensure they are more fully evidenced.

People can be sure that staff are employed following appropriate pre-employment checks to ensure people are kept safe. The manager told us they are actively working to fill current vacant posts. The service provider ensures staff have access to training they need, access to professional development opportunities, and regular formal supervision meetings with management. New staff undergo a formal induction and probationary period lasting six months in total.

There are some staff vacancies currently. The manager told us that rather than use agency staff existing staff are helping to cover these shifts. There has been some recruitment recently and management are actively trying to fill ongoing vacancies.

Staff training is monitored by management to ensure it is up to date and meets the needs of people living in the home. Staff training in various subject areas is offered by the service provider to ensure staff have adequate care skills and knowledge and people are kept safe. Staff have regular opportunities for formal supervision with management. Staff told us they enjoy working here and find the management team approachable and supportive.

Policies and procedures are in place to keep people safe and management ensure staff are following them and aware of updates through regular staff meetings and governance processes.

### 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   |
|------------|---|----------|
| N/A        | No non-compliance of this type was identified at this inspection          | N/A      |
| 6          | Ensure the service is managed with sufficient care, competence and skill. | 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 |
|------------|--|--------|
| 43         | The provider has not provided a maintenance plan and schedule of improvements to demonstrate | New    |



|  |   |  |
|--|---|--|
|  | evidence of prioritisation and monitoring of ongoing and planned maintenance, upgrade and repair works throughout the home. |  |
|--|---|--|

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