



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Inspection Report on

Prestwood - 36 Trinity Avenue

Llandudno

Date of Publication

8 May 2018

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Description of the service

36 Trinity Avenue, Llandudno provides care for a maximum of five people with a diagnosis of learning disability/ mental health needs, within this number one person aged over 65 with a learning disability can be accommodated. 36 Trinity Avenue is located a short distance from the seaside and is close to local amenities. On the day of the inspection there were five people living in the home. Prestwood Residential Homes Limited is the registered provider with the Care Inspectorate Wales (CIW). The responsible individual is Charlotte Smith. The registered manager is Mark King.

Summary of our findings

1. Overall assessment

People living at the home are encouraged and supported to have choice and influence over their lives. The service provides person centred care which supports people to make decisions relating to their lives through access to activities, access to the local community and by supporting people to live as independent as possible. There is a sense of community at the home and people are settled. The home is managed well and provides people with good quality of care. Improvements are required in the quality of the environment to promote people's sense of well-being within the environment they live in.

2. Improvements

Since our last inspection, the following improvements have been made to the service:

- During our inspection on the 25 May 2017 we identified areas where the registered person was not meeting the legal requirements. A non compliance notice was issued in relation to Regulation 13 (4) (a) (c) the registered person shall ensure that all parts of the home which service users have access are so far as reasonably practicable free from hazards to their safety; and unnecessary risks to the health and safety of service users are identified and so far as possible eliminated. Compliance in relation to the safety of the environment has been partly achieved.
- During our last inspection we identified many hazards within the home that could have posed unnecessary risks to individuals living at the care home. We were provided with evidence prior to this inspection and saw there is no longer exposed gas pipework within a person's downstairs bedroom, the risk of the pipework becoming damaged and causing a gas leak has been greatly reduced as the pipework has been relocated to the outside of the building.
- During this inspection we found the missing tiles on the bathroom walls had been replaced, the sealants around the bath had been refreshed and were no longer mouldy, the floor in the bathroom did not appear stained, however appeared well worn and in need of updating. The downstairs shower room shower seat had been repaired and fit for purpose. The broken towel dispenser had been replaced. A risk assessment is in place for two people who use the raised toilet seat downstairs.

3. Requirements and recommendations

Section five of this report identifies our recommendations to further improve the service.

These relate to:

- The service continues to be non-compliant with Regulation 13 (4) (a) (c).
- Regulation 27 formal provider visits.
- People reading and signing their own care plans.

1. Well-being

Summary

People told us they are happy and settled living at the home. People are able to make decisions about their everyday lives and are encouraged and enabled to make choices about how they spend their time.

Our findings

People have good relationships with care staff. We spoke with individuals who stated they were happy in the way they were being supported and felt their wishes and feelings were listened to. One person stated: *"I am happy; staff are nice, they help me."* Another person stated *"I like living here. I like the staff."* We observed positive interactions between people and care staff, people were engaged in meaningful conversations, were relaxed and familiar with the care staff supporting them. People experienced enhanced well-being because their needs are understood and catered for.

People living at the care home are enabled to do things for themselves, and have their individual identities recognised and valued. On the day of our visit two people living at the home were supported by staff to go shopping within a local city of their choice. People told us they enjoyed their shopping trip and purchased items of their choosing. One person told us they would book the vehicle allocated for the household when they wanted to go out for the day. Two people told us how they are freely able to access the local community and felt their independence was supported. People are able to access local activities and do things that matter to them.

People are able to exercise some choice and control over their everyday lives. We saw people were involved in making decisions relating to their evening meal. We were advised that some people shop for food supplies for the home accompanied by care staff. One person told us how they enjoyed cooking their own meal with the support of care staff. Three people we spoke with stated they were freely able to choose when they go to bed or get up in the morning. Four people told us they liked their room as they had chosen the colours, personal objects and pictures they currently had within their bedrooms. People told us that they would often talk around the dining room table with care staff about what meals they would like and how they would like to spend their time. People told us that they would speak to the manager relating to what they would like to do and felt their ideas were listened to. We saw evidence of this on the day of the inspection. People's views and opinions are acknowledged, promoting a sense of belonging and value.

2. Care and Support

Summary

People benefit from being supported by a caring and familiar team of care staff who are knowledgeable about the needs of the people they support. Care records are detailed and person centred. People receive support when and in the way they want to receive it.

Our findings

People are as well as they can be, because their individual needs and preferences are understood. We examined two people's care files and found they had been written in a person centred way, in sufficient detail, updated regularly and signed by care staff to confirm they had been read and understood. However, they had not been signed by people to confirm they were happy with their plan of care and support. We saw care files detailed essential information in relation to people's preferences, personal care needs, medical conditions and medication requirements. Referrals had been made in a timely manner to health and social care professionals. We spoke with care staff who were able to tell us about the way they supported people, the information reflected the information we had read within people's care documentation. We have seen records of regular meetings attended by staff where they discuss the individual health, social and emotional needs, outcome planning, appointments and ways to support the people who live in the care home. We therefore conclude, people are able to receive the right care at the right time and care staff have a good understanding of people's individual needs.

Generally, people's medication is managed safely. We saw that staff received training to safely administer medications and the care home has a medication policy in place. The service has recently received a pharmacy audit in relation to their storage and administration of medications and the registered manager completes regular in-house audits of the Medication Administration Record (MAR) Charts. We had been appropriately notified of one medication error since our last inspection and appropriate actions had been taken by the manager. We conclude that people are safeguarded by the home's medication procedures.

3. Environment

Summary

The care home is clean, warm and there is sufficient space for people to socialise or to spend time on their own. Whilst many areas of the non-compliance notice issued during our last inspection has been met, there are areas of the care home that require updating and maintaining for the benefit of people living within the care home.

Our findings

On the whole, people are protected and their safety is maintained. We found the entrance to the home to be secure. Visitor identity was checked before entering the property along with signing of the visitor book. The care home has been inspected on the 12 January 2016 by the Food Standards Agency and had been awarded a food hygiene rating of 5, which is very good; we also saw evidence fridge temperatures were appropriately recorded. We were provided with a copy of the home's fire safety and fire risk assessment policy and the health and safety manual policy; we saw evidence regular fire drills and fire tests are completed. We saw people's personal emergency evacuation plan (PEEP) was easily accessible in the case of fire or other emergencies, so that people can be evacuated from the building swiftly and with consideration to their individual needs. All confidential files including care and staff files were stored securely in a locked office. People's right to privacy is respected within a secure environment.

People living at the care home live within a clean and warm living environment; however the maintenance within the care home could improve. Individuals have their own bedrooms, four people provided us with a tour of their bedrooms which were spacious and decorated to people's preferences. There is a lounge and kitchen/dining area within the home. We observed people moved freely around the home, and were able to choose where they wanted to spend their time. The service has a large front garden and a smaller rear garden which people can spend their time if they wish. People live in accommodation which supports their independence within the care home.

People live within a care home which requires updating and improvement in areas to promote their sense of well-being. The upstairs bathroom is in need of modernisation, there is a cracked tile near the bath and the floor appears very worn. There is a broken towel rail within the upstairs bathroom, which is not uplifting to look at and could pose people at a possible risk of injury due to the broken edgings. We found the carpets on the stairs and upstairs landing to still appear stained due to heavy signs of wear. We found the radiators within the home to be uncovered; the care home requires a risk assessment in place to establish if the radiators pose a risk to any of the home's residents.

We found there were condensation black spots in the downstairs laundry room and to the adjacent hall and side external door; the floor was wet both in the laundry room and on the floor outside of the laundry room. This poses people and care staff at risks of slipping on the wet floor. We received an explanation by the registered manager that an extractor fan had been installed in September 2017 to tackle issues with condensation; however staff are forgetting to turn it on, this needs to be addressed to reduce the risks posed to both people and care staff.

We requested copies of the person in control three monthly quality monitoring visit reports; these were unavailable as they had not been carried out. The responsible individual should visit the care home every three months and complete a report following each visit detailing areas such as health and safety, the dates of when any maintenance checks are completed plus any other maintenance issues that need attention. In order for the care home to become compliant with Regulation 13 (4) (a) (c), all areas highlighted as needing improving in the home's environment require addressing.

4. Leadership and Management

Summary

The Care home has a visible and approachable manager in place which benefits people living and working at the home. There is a stable staff team in place and staff turnover is low. Care is provided by a sufficient number of skilled and competent staff who feel well led and supported. The care home promotes safe practice in relation to employing new care staff.

Our findings

People receive care and support from staff who are safely recruited, appropriately trained and supervised regularly within their role. We examined two care staff employment files which contained the information which is required to ensure the suitability of staff and their fitness to work with vulnerable people. We saw two references had been sought for each employee and disclosure and barring service requests had been completed. Care staff had received all mandatory training as well as additional courses relating to the individual needs of the people living within the care home i.e. autism awareness and training relating to emergency medication administration. Care staff spoke positively about the quality of training provided and understood their role in protecting people. We saw the required percentage of staff had achieved Qualification Credit Framework (QCF) at level two, level three and level five as recommended by the Social Care Wales occupational qualification framework. Supervision records demonstrated care staff received bi-monthly supervision. People benefit from a service where care staff have sufficient knowledge and skills to carry out their role.

People and care staff benefit from a manager who is visible and approachable. The manager demonstrated a good understanding of the people who live at the care home and their needs. We saw people knew the manager and approached them with ease, during the day of inspection two people came to the care home's office and engaged naturally in warm conversation with the manager. We spoke with three members of staff who spoke positively about the manager. One staff member stated: *"I think Mark is very approachable, he is a good manager, he is very supportive of staff and people living in the home"*. People benefit from a service where the well-being of staff is given priority and staff are well led and supported.

People are supported by a stable team of care staff, satisfactory in number. We examined five weekly staff rotas and found staffing numbers were consistent with the needs and number of residents at the home. During our observations, we saw the support and supervision people received was provided in a calm unrushed manner. We saw care staff spent time with people resulting in their needs being adequately met. People benefit from care staff who have sufficient time to spend with them.

Generally, people benefit from systems in place to assess the quality of the service people receive. We were provided with evidence the care home had completed an annual review of the quality of care provided at the home which sought the feedback from people's relatives and care staff. We were not provided with evidence that the person in control three monthly quality monitoring visits were being undertaken by the responsible individual, there

is a requirement for the responsible individual to prepare a written report on the conduct of the care home through carrying out regular visits of the service to review the quality of care provided by consulting with service users, their representatives and staff working at the home, to inspect the premises, records of incidents and any complaints. People are provided with opportunities to be consulted about the service, however this could be improved by the completion of three monthly visits by the person in control, furthermore, this would ensure the quality of the environment is regularly monitored by the responsible individual.

The statement of purpose and service user guide clearly set out the care home's aims, objectives and care responsibilities to people who live at the care home. We saw that the service user guide had been created to be accessible and easy to read for the people who live or wish to live at the care home. The statement of purpose states that the care home aims to offer the 'Active Offer' of the Welsh language. The service currently has five Welsh speaking members of staff, there are currently no Welsh speaking people living at the care home.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

- **Regulation 13 (4) (a) (c)**
- **(a)The registered person shall ensure that all parts of the home to which service users have access are so far as reasonably practicable free from hazards to their safety. and**
- **(c) Unnecessary risks to the health or safety of service users are identified and so far as possible eliminated.**
- **There are risks of damage to the internal exposed gas pipes in a ground floor bedroom.**
- **The bathroom is in a poor state of repair and is a risk of cross infection. The manager must devise a written risk assessment regarding the risk of cross infection, showing how the risk has been managed and where possible eliminated.**
- **The specialist equipment provided to an individual is being used by others placing them at risk of other health needs.**

5.2 Recommendations for improvement

We have advised the registered manager the service is continually non compliant with Regulation 13 (4) (a) (c) as people live within a care home which requires updating and improvement in areas to promote people's safety and sense of well-being. A non compliance notice has not been issued on this occasion, as there was no immediate or significant impact on people using the service. We expect the registered persons to take action to rectify the areas highlighted as recommendations for improvement which will be followed up at the next inspection.

These relate to:

- The upstairs bathroom is in need of modernisation, there is a cracked tile near the bath and the floor appears very worn. There is a broken towel rail within the upstairs bathroom, which is not uplifting to look at and could pose people at a possible risk of injury due to the broken edgings.
- The carpets on the stairs and upstairs landing still appear stained due to heavy signs of wear.
- The care home requires a risk assessment in place to establish if the radiators pose a risk to any of the home's residents.

- We found there were condensation black spots in the downstairs laundry room and to the adjacent hall and side external door; the floor was wet both in the laundry room and on the floor outside of the laundry room. This could pose as a slip hazard to people and care staff.

We also recommend that:

- The responsible individual ensures formal provider visits are conducted three monthly to ensure compliance with regulation 27. Written reports following the visits should be produced on the conduct of the home and be available in the care home.
- People should be encouraged to sign to confirm their agreement and involvement with the content of their care planning documentation.

6. How we undertook this inspection

We carried out an unannounced focussed inspection on the 20 March 2018 between 09:43 and 16:35. This was to see if the non compliance notice issued following the inspection on the 20 February 2017 and 27 February 2017 had been met relating to the quality of the environment. We also looked at themes around peoples' quality of life, the quality of leadership and management and the quality of staffing.

We used the following sources of information to formulate our report:

- The previous inspection report;
- the statement of purpose;
- service user guide;
- the quality assurance report for 2017;
- observations of daily routines, care practices and activities at the home;
- discussions with the registered manager and three members of care staff;
- examination of the care documentation relating to two people living at the home;
- examination of two staff files;
- tour of the building;
- review of five of the home's weekly staff rotas;
- staff training matrix record;
- staff supervision matrix record;
- records of the last staff meetings relating to people living in the service;
- medication, fire safety and fire risk assessment policy and the health and safety manual policy.

We sent out four service user, four relative, four care staff and four professional feedback questionnaires. We haven't received any completed questionnaires.

Further information about what we do can be found on our website www.cssiw.org.uk

About the service

Type of care provided	Adult Care Home - Younger
Registered Person	Prestwood Residential Homes Ltd
Registered Manager(s)	Mark King
Registered maximum number of places	5
Date of previous CSSIW inspection	20 February 2017 and 27 February 2017
Dates of this Inspection visit(s)	20/03/2018
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The service is currently working towards the Welsh Language active offer.
Additional Information:	

