



Inspection Report on

Hafod y Green Rehabilitation and Nursing Centre

**Hafod Y Green Nursing Home
Trefnant
Denbigh
LL16 4UN**

Date Inspection Completed

02/08/2022

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About Hafod y Green Rehabilitation and Nursing Centre

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Hafod y Green Rehabilitation and Nursing Centre
Registered places	34
Language of the service	English
Previous Care Inspectorate Wales inspection	
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 look at the care and support provided in the service, and therefore we did not look at all themes of inspection in full.

People living at Hafod Y Green receive person centred care and support from a caring, familiar, skilled, and motivated staff team. Each person's unique circumstances are considered to promote their independence and encourage engagement in meaningful activities. Personal plans are risk assessed and contain good detail about people. Positive relationships are built between people living at Hafod Y Green, their families, staff, and management. People like living in the home and the staff who support them.

Well-being

People have control over their day-to-day life. We saw personal plans with good detail about people's preferences for how they like to spend their time and go about their daily activities. People are offered a selection of dishes at mealtimes and told us they liked the choices on offer. We saw people can feedback to management about any changes they would like to see to the menus through resident committee meetings.

People's physical and mental health and emotional wellbeing needs are supported and promoted. There is a dedicated activities coordinator who plans a variety of activities each day. People can choose to participate in group and individual activities and have access to an activities room containing computers, printing equipment, games, and art supplies. There is a physiotherapy room for people to receive therapy from in-house specialists, and people are supported to access health care and social care services when needed.

People are encouraged to maintain family and personal relationships. We saw people have developed good friendships with each other in the home. People told us they like the staff and enjoy the company of the other residents. Visiting is encouraged and there are infection prevention and control procedures in place to keep people and visitors safe.

People live in a home which meets their needs. There is specialist equipment available which is serviced regularly and well maintained. People have access to different areas of the home where they can either spend time with other people or on their own. People told us they like their rooms and enjoy spending time in the bright and airy communal areas. The home is well decorated and well maintained. People can personalise their rooms with colour schemes of their choice, and pictures and items of importance and interest to them.

Care and Support

People's needs and expectations are fully assessed before they arrive in the home to make sure they can be supported to achieve their desired outcomes. Personal plans are developed within the first four weeks after admission. These provide good detail of people's needs, likes, dislikes and preferences. This is achieved by drawing on information from people themselves, their relatives, or representatives where required, and health and social care professionals. We saw people living here have achieved positive outcomes through staff's ongoing efforts to understand their needs and get to know them well.

People's care and support needs are risk assessed to consider individual vulnerabilities and risks and put measures in place to protect them. This helps to promote their mental and physical health, wellbeing, and safety. Individual risk assessments are drawn through people's relevant personal plans, but we did not see one in place for a resident at risk of choking. This was discussed with the manager.

People can be confident that staff know their care and support needs and can support them effectively. Management review personal plans monthly and update them with any new changes as they occur. The manager told us that staff receive updates on any changes at handover each shift. Staff supporting people one to one record daily care on multiple different forms. We saw that information recorded in daily one to one support forms is not always summarised accurately or consistently on shift summary forms. This could lead to inaccurate shift handovers. We discussed this with the manager and action is being taken to improve the consistency and detail of record keeping and communication at handovers between shifts.

People have a warm and friendly relationship with staff. A person told us staff "*look after me well;*" staff come when people call for help and know what people like and dislike. Another person told a staff member "*You are a really good carer.*" During our visit there was lots of laughter and joking which created a lively and happy atmosphere for people living there. We saw staff are patient and reassuring in their manner and inclusive in their approach. People of all levels of communication needs or abilities were brought into activities and conversations.

People are supported by motivated, trained staff who have the skills and knowledge needed to support them effectively. Safeguarding, whistleblowing, and concerns policies are in place to protect people. Staff are aware of their roles and responsibilities in protecting people and feel confident talking to management about any concerns they have.

Environment

This was a focussed inspection and therefore we did not look at this theme in full.

People are cared for in a clean and homely environment which meets their needs. The home is welcoming, comfortable, and has a calm and relaxed atmosphere. People can personalise their bedrooms by choosing the colour of the walls, and adding photographs or pictures, ornaments, and other items of meaning and interest for them.

There is evidence of ongoing investment by the service provider both inside and outside the building; the grounds are well maintained and used regularly by residents with support from staff. On the day we visited the main foyer was being re-painted by one of the owners. People told us they liked their rooms and the views out to the gardens and surrounding countryside.

People have access to the specialist equipment they need to achieve their desired outcomes. We saw some larger pieces of equipment are kept in the wider passageways and rooms in the home. However, the corridors are not cluttered, and people can move around with ease.

Training records showed staff complete training in first aid, food hygiene, infection control, fire awareness, and health and safety. The service provider has health and safety systems, policies, risk assessments, and procedures in place to keep people safe.

Leadership and Management

This was a focussed inspection and therefore we did not look at this theme in full.

People can be confident the service provider has governance systems and processes in place to ensure the smooth running and oversight of the service. The responsible individual is based at the home daily and works closely with management. The responsible individual's quality review reports show feedback from staff, residents, relatives, health care, and social care professionals is used to develop and improve the service. A recent example of changes made following feedback is the purchase of a digital printer for the activities room to enable people to design and make models, ornaments, and games.

People can be certain that staff undergo thorough checks prior to employment. New staff must complete an induction and training programme to ensure they have the skills and knowledge required to support people well. Staff training and competencies are monitored by management, and staff are supported to update their training as required.

People can achieve their individual personal outcomes because staff are supported in their roles. Staff told us they really like working there and the training offered gives them the skills and knowledge to support people living there. Care staff told us they had really valued additional training they received around diabetes and epilepsy. Training records do not reflect the full extent of additional training listed in the statement of purpose and completed by care staff. This has not impacted on people living in the service; however, this is something to address to ensure the service can show the depth of staff knowledge and development is consistent with the statement of purpose.

Many of the staff we spoke to have worked in Hafod Y Green for many years, however there are some ongoing vacancies advertised at present. The manager told us they ensure the same agency staff are used to cover gaps in the rota; this provides familiarity and continuity of care for people. Agency staff complete an induction and supervision period when they first work in the home to ensure they understand people's support needs well before working with them one to one.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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