



Inspection Report on

Y Gelli

**Vale Of Clwyd Mind
Y Gelli
61 Vale Street
Denbigh
LL16 3AP**

Date Inspection Completed

16/08/2023

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About Y Gelli

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Vale of Clwyd Mind Association
Registered places	10
Language of the service	English
Previous Care Inspectorate Wales inspection	27 December 2018
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the person-centred care and support they receive living at Y Gelli. They are involved, have control, and make choices about their lives. People have positive relationships with one another and with the care staff supporting them which provides comfort, reassurance, and a sense of belonging. Personal plans contain detailed information for care staff to follow, which encourage and promote independence with a focus on people achieving their outcomes.

People are supported by a skilled and stable staff team who know people really well and provide care with consistency and continuity. Care staff feel supported and are supervised and trained to carry out their roles and responsibilities effectively.

The Responsible Individual (RI) visits and spends time at Y Gelli, working closely with the manager. They have identified improvements that are needed to the service, some changes have been made and there are action plans in place.

Peoples living accommodation is referred to as flats and they are responsible for looking after these with care staff support if required. Improvements are needed to ensure that these areas are kept clean, well maintained and safe including general fire safety checks.

Well-being

People have control over their day-to-day life. They make choices about how they spend their time, doing the things that make them happy and matter to them. People told us about college courses, their own interests, socialising with friends and going away on holidays. There are photos of a recent holiday which some people had been on, they told us all about this and are looking forward to going again. Resident's meetings provide an opportunity for people to have a say in what happens or raise any issues. Staff said, *"It's a lovely home"* and people have *"choices with everything, as much independence as they want"*.

Peoples physical, mental health and emotional wellbeing needs are being met. People attend appointments and professionals are contacted as and when required. Information is made available to people about different health conditions, health promotion and activities/ events in the local area. People told us they are happy living at Y Gelli. Comments include *"it's great I love it I do and the help staff give me"*, *"happy, love living here"* and staff are *"really supportive"*. There are positive relationships between people living at the service and care staff supporting them. When asked what people like about the service they told us, we are *"like a family"*, sit and *"chit chat"*, we *"all get on"* and *"know each other well enough"*.

People are protected from abuse and neglect. People told us they feel able to raise any concerns they have with either care staff or the manager. There is a complaints and suggestion box on the wall for people to use. The policy for safeguarding is being reviewed and care staff are aware of their responsibilities regarding this.

People live in accommodation which promotes their independence but improvements are needed. Flats provide a place for people to be more independent. Comments about their accommodation include *"flats great happy, like a bungalow"*, *"mines like a cottage, lovely very nice in my flat"* and *"I have everything I have ever wanted"*. We found that improvements are needed regarding the cleanliness, safety and maintenance of the flats.

Care and Support

People are provided with the quality of care and support they need through a service which involves and listens to them and considers their personal wishes and aspirations. People are involved in putting together their personal plans and can attend reviews. Plans are informative and provide clear and detailed information for care staff to know how best to support each person and encourage/promote their independence. Outcomes are set and achievements are recognised and celebrated with their proudest moments recorded. Resident's meetings are held and provide an opportunity for people have a say about what happens in the service.

People are supported to access healthcare and other services. Care staff support people by providing information and advice about keeping healthy and well. Leaflets are readily available for people to read to find out more information and prompt further discussions. A team of stable, dedicated care staff know people really well and can identify when needs change. They can offer support at the earliest possible opportunity, contacting professionals as needed. Staff handover meetings ensure important information is passed on to all staff. Care staff comments include *"I love it here, all about the residents, they come first and foremost"*. Professional comments include *"the staff at Y Gelli go over and above with the care they provide"* and meet people's needs at all times.

The service promotes some hygienic practices and manages risk of infection. Care staff receive training in infection control and there is a policy in place. Infection control audits are completed. The cleanliness of people's own flats needs to be addressed and we discussed this with the RI.

Environment

People live in an environment which promotes their independence but more robust arrangements are needed to keep the premises clean, safe and well maintained. Communal areas are kept clean and tidy. There is a lounge where people like to sit together and socialise. A new room has been created with peoples input to provide a place where they can go and relax or play games away from the main building. There are pleasant outdoor spaces for people to relax, enjoy and either spend time together or have time alone.

Flats we visited are personalised and reflect peoples' different tastes and interests. People are required to keep their own accommodation clean and tidy with staff support where needed. Cleaning schedules are in place which staff check on. We visited some flats and found the general standards of cleanliness and safety need to be improved. This includes disposal of food and general waste, clutter which may be a potential fire risk and cleaning products being left out. We saw rusty cookers in two kitchens and the flooring in one bathroom is in need of replacing. The RI and manager told us some plans are already in place to make improvements to the kitchen areas in peoples flats and other parts of the home. There is a maintenance record for the day-to-day jobs which need to be completed but there is no maintenance schedule in place to prioritise work. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The provider does not have robust fire safety checks in place, including fire evacuations and drills. People are able to smoke in their own flats and we discussed this with the RI and manager. We looked at records of fire equipment checks which have not always been completed at the required frequency, in line with risk assessments and relevant policies. Records of fire drills show these are not being completed as often as stated in the policy. These records do not include what could be improved next time or evidence fire drills at night to ensure people can be safely evacuated during this time. Personal emergency evacuation plans are in place but do not stipulate where people are to meet in the event of a fire. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Leadership and Management

Governance arrangements are in place to support the smooth operation of the service. The RI is aware of improvements that are needed to the service and is working with the manager to address issues. The manager feels well supported by the RI and meets with them every two weeks for a management meeting. Audits are completed and governance meetings are held to share information about the service. The RI informed us that all policies have been reviewed and are awaiting final approval. The RI visits the service regularly and their three-monthly visits contribute towards the six-monthly quality of care review. Professional comments include *“the care they provide is at a high quality”* and *“the new manager and staff are approachable, flexible, trustworthy, professional”* and show empathy towards people.

People are supported by care staff who are trained and supervised in their roles. Care staff told us they feel supported and work well together. We looked at supervision records, care staff said they have supervisions and told us the *“doors always open”* and we *“speak to each other”*. Training certificates and discussions with care staff show they receive training to meet people’s needs. Comments from care staff include *“training a lot through the year, new ones come up”* and we can make suggestions. Team meetings are held for care staff to share information and discuss any issues they may have. Handovers are also carried out and communication books are used to pass on important information between care staff. The manager told us there is a *“really good staff team here”*.

The service provider has oversight of financial arrangements and investment in the service. Meetings are held to discuss finances every two months; reports are produced and there is a finance team in place to monitor this.

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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44	The provider has not ensured that the service is kept clean, safe and well maintained. Ensure there are systems and processes in place to prioritise and improve the levels of cleanliness, reduce hazards to health and safety and address maintenance issues.	New
57	The provider has not ensured that risks to health and safety have been identified and reduced. Ensure there are robust fire safety checks in place, including fire evacuation and drills.	New

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