



# Inspection Report on

**The Headlands Nursing Home**

**The Headlands Nursing Home  
Tower Road  
Llangollen  
LL20 8TE**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

07/09/2023

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## About The Headlands Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Deevale Healthcare Limited
Registered places	28
Language of the service	Both
Previous Care Inspectorate Wales inspection	23 January 2023
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

This was a focused inspection, which concentrated upon areas of the service identified at the last inspection as needing priority action. On this occasion we did not consider care and support, the environment and leadership and management in full.

People are happy and supported to live their lives as they choose. People's voices are heard as their experiences living at The Headlands are sought, and their independence is promoted. People's health needs are clearly understood by care staff, and timely referrals are made to seek advice and guidance when needed. The home is supported by a range of visiting health professionals to help ensure people receive the care they need to remain as healthy as possible.

Care is delivered by an enthusiastic and familiar staff team. Care documentation reflects the person being cared for. Staffing levels are adequate and meet people's needs and outcomes. The provider has recently recruited to the staff team. The home provides a comfortable environment for people to live in which is safe, well looked after, and meets their needs. The environment is warm, clean, and well decorated. The Responsible Individual (RI) and senior managers have oversight of the service, support care staff and visits the service regularly. There are clear systems in place to monitor the quality of care provided, through numerous and detailed audits and layers of governance. The provider has a rolling programme of investment in the service. Activities take place daily. Food stocks are good, and people enjoy a choice of meals and snacks throughout the day.

## Well-being

People are protected from potential harm, abuse, or neglect. Care staff records are checked robustly. Training records show care staff have undergone appropriate training to ensure people meet their outcomes and there is now a robust set of management audits in place which ensure any risk is minimized.

People are supported with their physical and social wellbeing. People, professionals, and relatives we spoke with are complimentary of the staff and management of the home. Care staff, both full-time and agency, clearly know the needs of the people they are supporting. We observed staff assisting people calmly with dignity and respect. Care records are detailed and give care workers the instruction required to support people accurately. We saw documentation and witnessed visits which showed referrals to relevant health care professionals are made in a timely way. We observed care workers refer to people in a positive way, we saw people being helped by care workers appropriately in a kind and gentle manner, and at their own pace.

People can exercise choice and control over their every-day lives. We observed people were offered the choice of where they wished to sit, and people were enjoying the company of others. People were supported by staff in the person's own reality, support was not opinionated nor judgmental. We observed interactions with people by care staff are considerate and respectful of people's wishes. There is a choice regarding meals, and we were told people can have alternatives if they do not like the choices on the menu. The provider seeks the views of people living at The Headlands and the staff team.

The home is clean, warm, comfortable and bedrooms reflect individuality. We viewed documentation which showed maintenance work and testing are being undertaken appropriately and there is clear investment by the provider in the home.

## Care and Support

As this was a focused inspection, we have not considered this theme in full.

At this inspection we found improvements have been made regarding the care and support people receive. People's needs are assessed and information from professionals is received before they move into The Headlands. We saw personal plans are detailed and give care staff enough instruction to undertake care and support with people effectively and appropriately. We observed care workers, both full time and agency, who clearly know the needs of people well, supporting people appropriately, in a kind and dignified manner and at the person's own pace. This was confirmed by people we spoke with and their relatives. We saw an incident which was resolved speedily by care staff who were able to diffuse the situation very effectively and support people afterwards in a professional and caring way. We saw people were well kempt, were clean, tidy and we evidenced people's oral healthcare was attended to. This was confirmed by a relative we spoke with, and a health care professional who visited during the inspection in regards people's oral health at the request of the provider. We viewed personal plans which clearly evidenced people's support requirements were attended to and monitored throughout the day. We viewed risk assessments which showed risk is being assessed and dealt with. We saw people being supported by care workers to mobilise around the home. The provider has appointed an activities co-ordinator whom we observed involving people in various activities during the inspection. People have choice in the meals they can have. We observed people being offered choice at mealtime. A relative we spoke with confirmed this and told us, in their opinion, people get plenty to eat, including snacks throughout the day.

People can be confident the service is provided in a way which ensures individuals are safe and protected from abuse. Care workers told us they receive safeguarding training; this was confirmed by records we saw. The provider has appointed care staff as safeguarding champions who actively promote safeguarding with colleagues. We also observed possible safeguarding issues are reported to the appropriate external agencies. We viewed people's personal plans and risk assessments which showed they are reviewed regularly to assess possible changes in people's support needs. We saw details regarding people's care and support in professional documentation which was reflected in people's documentation on their file. We saw appropriate referrals were being made to professionals and appropriate documentation is being kept on people's personal plans. One person's relative told us *"Staff talk to me about my relative's support, and I am kept fully informed. Staff have been really supportive, if people were less caring my relative wouldn't still be in this home... I don't think you could get any better than this home, no one else could give my relative the care they get off The Headlands, I can't speak highly enough of the staff."* Professionals we spoke with confirmed care staff are receptive and follow instructions well, take and follow advice, and report issues appropriately.

At this inspection we found improvement have been made around the service's hygienic practices and management of the risk of infection. We saw the home is clean and cleaning programmes are in place, with appropriate staff being employed throughout the week. We observed the laundry was being used solely for the purpose it is intended. We saw systems are established to monitor levels of cleanliness and action is taken where shortfalls are identified. We saw cleaning rotas are in place, and senior managers regularly audit the environment of the home. We also viewed evidence care workers have undergone infection control training and infection prevention and control audits are also being undertaken.

People can be confident the provider has arrangements in place to ensure medicines are stored and administered safely. We saw medication is being stored correctly and procedures around medication storage are being followed. We saw appropriate members of the care staff team have received training in regards medication administration and dispensing, and we viewed evidence that showed medication is being dispensed appropriately. We observed that there are procedures in place for the appropriate ordering and re-ordering of medication.

## Environment

As this was a focused inspection, we have not considered this theme in full.

The service provider has made improvements that ensure people live in a home that promotes the achievement of their personal outcomes. We saw the building and equipment being used is well maintained and clean. We saw the decoration of the building is being continually maintained with the paint work being “refreshed” during the inspection. The home was suitably furnished and equipped to meet individuals needs and outcomes. We saw equipment was organised and located appropriately to ensure ease of access for both care workers and people living in the home. The home is warm and welcoming and there is adequate space for people to decide where they want to spend their time. We viewed several bedrooms and saw they are warm, clean and people can personalise them if they wished. We spoke to people and relatives who said they / or their relative were happy at the home.

People can be confident they live in a safe environment. The main entrance is secure, and our identification was checked before we were permitted entry. People’s care documentation is kept electronically, and this is password protected. We saw the homes health and safety records and saw safety checks are being undertaken as required. We saw the home was free from clutter and from hazards to the health and safety of individuals. We saw previous issues with the lift servicing had been proactively addressed by the RI. Call bells and crash mats are in people’s rooms and plugged in. The home has achieved a food hygiene rating of “5” which equates too very good.

## Leadership and Management

As this was a focused inspection, we have not considered this theme in full.

At this inspection we found improvements have been made in regards the care competency and skill the service is providing and how effectively the RI supervises the management of the service. We spoke with senior managers who told us management checks and audits are being undertaken, this was confirmed by documentation we viewed. The manager told us management spot checks are also being undertaken at night. We saw issues which had been identified throughout the home at the last inspection have been rectified appropriately. We viewed the RI's three-monthly checks which are being undertaken in line with regulatory requirements. The services 6 monthly quality of care report has been completed. Both documents are comprehensive and show consultation with stakeholders. The quality-of-care audit is also open and transparent in its findings, and analyses the information received. We saw there is a comprehensive management structure in place, incorporating weekly manager reports, monthly area manager reports and monthly governance reports and meetings, which the RI attends. The manager told us senior management was accessible and took their views seriously. An action plan has been formulated and is used which reviews information about the service from several different sources. We saw that policies and procedures are in place such as those for falls, safeguarding and challenging behaviour. We also witnessed senior managers take appropriate and decisive action in regards a staffing issue during the inspection.

People can be confident they are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills, and qualifications to provide the levels of care and support required to achieve the individual's personal outcomes. We viewed records which showed care workers receive supervision and appraisals in line with regulations. We spoke with care staff who told us they receive plenty of training and an induction. This was confirmed by documentation which we viewed. We saw staffing rotas which showed staffing levels are adequate for the needs and outcomes of people living at The Headlands. We saw evidence staff recruitment is robust, and care staff have undergone all the necessary checks. The provider has recruited a Regional Manager and an Area Manager. We also saw care workers are registered with the appropriate professional body.

The provider has improved its reporting to the regulator. We have received timely notifications from the provider that meet the requirements of the regulations.



### 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	The provider has not demonstrated over-sight of the management of the service.	Achieved
21	There is little over-sight and supervision of standards of care in the service.	Achieved
26	We could not evidence during inspection that staff and the manager had sufficient knowledge to safeguard people in a robust manner.	Achieved
35	Comprehensive pre-employment checks are not fully completed prior to new staff being employed to work at the service.	Achieved
36	The provider has not ensured staff are updated	Achieved

	regarding the knowledge and supervision required for their role. The provider has not ensured that new staff receive a robust induction in line with the requirements of Social Care Wales.	
44	The provider has not ensured the environment enables safe, dignified and respectful care for people.	Achieved
56	The provider has not ensured the hygiene and infection control in the home is sufficient to meet the requirements of the regulations.	Achieved
57	We identified health and safety issues during our inspection which were not identified by the provider.	Achieved
60	The provider has not ensured notifiable events are reported to CIW.	Achieved
66	The provider has not supervised the management of the service to ensure quality care.	Achieved
80	The provider has not ensured there is an effective process in place to measure the quality of care.	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
N/A	No non-compliance of this type was identified at this inspection	N/A
58	We found issues concerning the administration and storage of medicines during inspection.	Achieved



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