



# Inspection Report on

**Rhyd y Cleifion Ltd**

**Mold**

## **Date Inspection Completed**

10/05/2023

## About Rhyd y Cleifion Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rhyd y Cleifion Ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	26 October 2021
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

Since the last inspection, people's personal plans have been improved to provide more detail for care staff. People are settled and comfortable with care staff, who know them well and give consistent care.

People can do things that matter to them and are able to participate in activities both within and outside of the home. People are encouraged to maintain contact with family members and friends.

The environment is safe with systems in place to protect people's health and safety. The redecoration of the communal areas has improved the quality of the environment, and further improvements to people's bedrooms and bathrooms are planned. Overall, people live in a homely, comfortable home which is suitable for their needs.

Safe recruitment processes have not always been followed and this is an area for improvement. The systems in place to monitor the quality of the service provided require improvement. The responsible individual should ensure quality assurance arrangements are suitable for the service provided. The responsible individual (RI) must complete a quality of care review every six months to ensure good oversight of the running of the service.

## Well-being

People told us they are happy living in the home and get on with care staff and the manager. Each person has a personal plan, which includes what is important to them and what care staff will do to support them. House meetings are held regularly to discuss trips and holidays and what they have enjoyed doing over the preceding month. People are not accessing an advocacy service currently, the responsible individual (RI)/service provider should access an advocacy service to ensure people's views are represented.

Support is provided to promote people's physical and mental health. Personal plans record people's health care needs and how they should be met. Arrangements are in place for people to have their medication, as prescribed, which helps to maintain their health. People are encouraged to seek professional health advice, when required, and appointments are sought on people's behalf, when appropriate.

Overall, people have positive relationships with care staff supporting them. We saw care staff spending time with people, listening, and providing support with day-to-day activities. People are supported to do the things they enjoy, which enhances their sense of well-being. Some people volunteer at local community projects, which helps people to feel valued and a part of their local community. People's interests and hobbies are known to staff and are recorded within people's personal plans. People go out together regularly due to staffing levels. Additional care staff on shift would enable people to have one to one support so that they can attend activities individually.

Systems are in place to safeguard and protect people from harm. Care staff attend safeguarding training, and care staff know the processes to follow if they suspect or witness abuse.

The living accommodation is homely and overall promotes people's sense of belonging. People's own living areas are personalised to their own tastes and preferences. Improvements have been made to some areas of the environment, and further refurbishment is planned.

## Care and Support

People are cared for in a home where there is a consistent care staff team, with many employed at the home for several years and know people well. People have good relationships with the care staff supporting them. During our inspection we saw people were comfortable expressing their views and feelings with the care staff supporting them, and care staff responses were mostly positive. We saw care staff communicate effectively with each other during shifts to ensure continuity of care.

Personal plans provide care staff with information how to meet individual's care and support needs on a day-to-day basis. Care staff know people's daily schedules and how to support them to meet their well-being outcomes. Plans are reviewed every three months and information added if needed, to show changes in behaviour or health needs.

People are happy and feel safe. They like living at the service and they praise the care staff who support them. Planned support is provided to enable people to keep in contact with their friends and families. Feedback about the quality of the service was sought from families for this inspection, and responses varied from *'excellent'* to *'needs improvement.'*

Arrangements are in place to enable and support people to be healthy and to access health support. Records are available regarding health appointments attended and information is available regarding the outcome of the appointment and the professional guidance received. Care staff attend training specific to people's health needs. Appointments with health professionals are facilitated, which enable people to stay as well as possible.

People are supported to receive their medications, as prescribed, and this assists with managing their health conditions. Arrangements are in place to administer medication safely and in accordance with people's prescriptions and staff undertake medication training. The manager oversees the management of medicines within the service.

The manager is aware of the Welsh Government's *'More than just words follow on strategic guidance for Welsh language in Social Care'*. However, there are currently no fluent Welsh care staff employed at the home and people cannot receive a service in Welsh. None of the people living in the home want to receive care through the medium of Welsh.

## Environment

The home is located on a working farm but close to a residential area and local amenities. The building and facilities are as described within the statement of purpose. People are happy with their own rooms, and they are personalised with their own belongings and photos. Choices are available regarding how each person wishes for their room to be furnished. This creates a homely feel and enables people to feel settled in their environment.

Overall, the environment is kept clean and tidy, but some areas require refurbishment and redecoration. Since the last inspection, the service provider has redecorated the kitchen. Further redecoration and refurbishment are planned, including new bathrooms, new carpets and redecorating people's bedrooms. People are encouraged to keep their own room clean, and staff provide practical support with this task when required. There is a garden for people to use which is a pleasant area to sit and contains suitable garden furniture.

Health and safety risks are managed appropriately. Fire evacuation drills are completed and the fire alarm system, electrical installation system, boiler and appliances are checked, as required. This means people are supported within a safe living environment.

## Leadership and Management

People can access written information regarding the service provided. There is a statement of purpose in place, which accurately describes the service provided and the arrangements in place to support the delivery of the service. This document contains information about the home and the service is provided in accordance with the statement of purpose.

The service provider has quality assurance systems in place to monitor the operation of the home. The service provider is also the responsible individual and the manager of the home. They complete regular checks on the service, speak to people living in the home, their families and care staff and provide a formal report of their findings every three months. They also undertake a quality-of-care review and produce a report, however this has not been completed at the required frequency and is an area for improvement. As the person undertaking the monitoring of the quality of the service also undertakes three roles in the provision of the service, they are reviewing their own practice. Also, care staff are restricted in who they can approach should they have a concern or issue about the management of the service. Additionally, the manager employs family members as part of the staff team, which poses a risk of conflict of interests as they are managing their own relatives. To ensure an open culture within the home, the service provider should consider how the quality assurance monitoring systems can be improved to provide a more independent evaluation of the quality of the service provided. This is an area for improvement, and we expect the service provider to take action.

The service has not always followed safe procedures when employing care staff. This is an area for improvement, and we expect the service provider to act. Care staff receive individual support every three months with the manager. Team meetings held every three months and records show a good level of discussion about the people living in the home and their care and support needs. Care staff provided feedback for this inspection and responses varied regarding how valued and supported they feel. Care staff attend training relevant to their roles, however, most of this is on-line and feedback from care staff varied regarding its effectiveness in developing their practice.



### 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

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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35	The service provider had not followed safe recruitment processes. The service provider must ensure two written references are sought, including a reference from the last employer.	New
80	The current arrangements for the monitoring, reviewing and improving the quality of care and support provided by the service are unsuitable. The RI must ensure the systems in place to monitor the service give assurance that the service provides high quality care, achieves the best outcomes for people and improves their well-being. The RI has completed a quality of care review but not at the frequency required by the regulations. The RI must undertake a quality of care review at least every six months.	New

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