

Inspection Report on

Llys Nant

Denbigh

Date Inspection Completed

02/02/2023



About Llys Nant

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	John Roberts
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	05 June 2019
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

People life fulfilling lives because they can take part in activities they enjoy and what is important to them is respected. Dependant on individuals they are encouraged to follow their own routine. Meals are prepared with support from care staff, and a healthy varied diet is available.

People confidently share their views because they are consistently consulted on important matters. Days are filed with relaxed conversations, individuals talk about what is important to them, and care staff provide support in line with people's wishes. A stable and consistent care staff team know those living at the service well, the homely environment is welcoming and enables people to relax.

Information is gathered about people living at the service; recent changes to personal plan's mean they are current and meaningful.

The service provider is heavily involved in the day to day running of the service, and they have a strong vision about how they want people to experience the care they provide. The appointed manager is experienced and is implementing positive changes.

Well-being

People are supported to engage in activities they enjoy, meaning they achieve positive well-being. They are familiar with those they live with; days are relaxed and adaptable dependant on people's needs at the time. People enjoy living with their friends and they choose to take part in activities together. People are supported to find employment, and if suitable they have access to their own key and can come and go as they want. Plans adapt and change, for example, trips to local places of interest or the shops are added to daily activities regularly.

People's physical and mental health is promoted, they are consistently active and are healthy. They regularly take walks locally and enjoy community activities. People are supported to visit friends, visit places locally and enjoy meals out. People are registered with local medical services, and they are supported to attend routine appointments. Additional support is provided to those needing help with day-to-day tasks.

People are cared for by a consistent care staff team, nearly all having been employed at the service for several years. This contributes to a sense of belonging in the home. People had monthly meetings where they discuss matters of importance, and everyone has an allocated key worker. Evening meals are enjoyed together around the dining table in the kitchen. There is a wide variety of food available, and evidence people are provided with specialist diets when required. People are safe because care staff have attended safeguarding training to ensure they are familiar with current legislation, policies, and procedures.

People benefit from positive interactions from care staff. They sit and chat about day to day events or discuss future plans and aspirations. There is a closeness and warmth in the relationship between the care staff and people. They have also formed a close bond with the newly appointed manager, who will often advocate on behalf of those living at the service. The environment in the home is relaxed and supportive. People told us they liked each other and got along with the staff, we witnessed good-natured banter and pleasant, friendly exchanges. People are shown respect and in turn, they feel safe and listened to and have good relationships with staff. The service does not provide an active offer of the Welsh Language, but at present the people living in the home are not first language Welsh speakers. The service is working towards providing an 'Active Offer' of the Welsh language and demonstrates an effort to promoting the use of the Welsh language and culture.

The service follows their admission procedure as outlined in their statement of purpose. Information is gathered, and an informed decision made as to how the service will meet identified needs. Consideration is given to the compatibility with those already living at the service, and how competing needs will be met appropriately. Most of the people living at the service have done so for several years, and they are considered part of the 'family'. High importance is therefore placed on planning new admissions carefully to aid smooth transitions.

Personal plan formats have recently been updated, they are now personalised and have been produced in partnership with the people living at the service. The document outlines peoples' individual needs and preferences. The document outlines what care staff need to do provide care in line with individual wishes, what will help them, and what will not be helpful. The personal plans are directly linked to positive behaviour support plans and risk assessments. The information is meaningful and directly relates to individuals, the new format has yet to be reviewed in line with regulations. The manger acknowledges this will need to be done to make sure information remains current and up to date. We found that provider assessments were not being completed, the purpose of such assessments it to build on the information gathered. This assessment informs the personal plan and is a tool for assessments to reflect on good practice and can identify where a personal plan is not supporting the individual to achieve their personal outcomes. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Care staff are experienced and know the people living at the service well. This helps them to provide tailored care that makes people happy. They have detailed knowledge of personal interests and hobbies, because of the familiar and close relationships formed, this creates a relaxed and caring atmosphere, like that of a family home.

The service provider has the required number of care staff and resources needed to provide a service in line with the statement of purpose. There have been some minor changes in staffing arrangements, however, the service continues to provide consistency. Where replacement staff are needed it is always with consistent staff members, who are familiar with the service and the people living in the home. There are regular opportunities to gather the views of the people living at the service, be this through formal methods or day to day discussions. There is also access to an advocacy service.

Environment

Llys Nant provides a comfortable and homely environment for people. Improvements are planned for the next few months, for the home to be painted and decorated. The location allows for easy access to local amenities in Denbigh with transport links to larger towns nearby.

Furnishings and equipment are provided to assist the service in achieving its aims and objectives, and where needed they consult with specialist services to ensure the required equipment is available. Where assessed as suitable people have their own key to the home, thus promoting their independence. They are also supported to use the laundry facilities and can do so safely.

Communal spaces are available to meet the needs of people and are easily and independently accessible. This included a room for people to meet privately with visitors and family, take part in activities and recreation. The back garden is shared with next door and is used for socialising during warmer months. Those living at the service can choose how they want to decorate and furnish their individual living space.

The home has appropriate health and safety arrangements, which ensure people, remain safe. There are systems in place to monitor any required maintenance, and repairs are completed promptly. The service's registered manager has access to a specific budget for the decoration and maintenance of the home. Prior to completing any wok those living at the service are consulted with and their views taken into consideration. Making sure the home reflects personal tastes and needs is of paramount importance.

Procedures for the management of hazardous waste meet the requirements of relevant Health and Safety legislation and guidance. People's health and safety is maintained through a robust programme.

Leadership and Management

Since the last inspection the service provider has appointed a registered manager who has the experience required to lead the service. The manager oversees two homes located next door to each other and is supported in her role by a deputy manager, who takes a leading role in the day to day operations of the neighbouring home. The service provider has clear arrangements for the oversight and governance of the service, and there are clear lines of communication between the responsible individual and the manager. There is also strong administrative support.

Care is delivered consistently and reliably, and it is a family run service. The core values are shared by the whole staff team. The responsible individual visits the service and prepares a report in line with regulations, and this highlights areas for improvements, and where the service has performed well. They are also supported in the role by family members who play a key role in the day to day management of the service. During the inspection an updated statement of purpose was submitted which was an accurate reflection of how the service operates.

The newly appointed registered manager has several changes and improvements planned, and these have been discussed with the responsible individual who provides support in implementing these changes. Planned changes have not happened at the speed initially hoped, meaning there remains areas in need of improvement. Information was missing from care staff files, meaning it is not possible to confirm if safe recruitment checks have been completed. Care staff have worked at the service for several years, and know the people they care for very well, they are familiar with their roles and responsibilities, however, they have not been provided with consistent and regular one to one supervision, and annual appraisals have not been completed. We did not find evidence that these breaches in regulations are having an immediate or significant risk to the people using the service, therefore we highlight these as an area for improvement. We expect the provider to take action to rectify this and we will follow this up at the next inspection.

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		
		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
18	The service provider has not been completing provider assessments.	New
35	The service provider has failed to fully complete fitness checks on care staff.	New
36	Care staff are not provided with one to one supervision with their line managers, neither do care staff have an annual appraisal to provide them with feedback on their performance.	New

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