



Inspection Report on

Avalon

**3 Betws Avenue
Kinmel Bay
Rhyl
LL18 5BN**

Date Inspection Completed

1 March 2022

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About Avalon

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Mental Health Care (Avalon) Limited
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service following registration under the Registration and Inspection of Social Care Act (Wales).
Does this service provide the Welsh Language active offer?	This 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 Welsh language and culture.

Summary

People are happy living in Avalon. They are involved in every aspect of their care from care planning, activities, social opportunities, the environment and the staff who support them. Most staff have worked at the home for many years and are very familiar with the people they support. Interaction between people and staff is warm, friendly and respectfully familiar.

Staff training is relevant to the needs and aspirations of people living in the home and the manager ensures an enduring enabling culture. Support is carefully designed so as to protect skills and always promote further development, staff intervening only when necessary. People's talents are celebrated, their art work and photographs of various achievements displayed. People enjoy the same activities of daily living as their peers; shopping for their food, going to the hairdressers, visiting the zoo. People enjoy their day doing what they want to do.

The home has been redecorated in places and facilities have been updated. There is more work to do and a programme of refurbishment is underway. People decide what they want their home to look like and staff accommodate their wishes. The garden provides a private space for getting together outdoors and they have been involved in planting and designing this area. People live an active happy life in a home they enjoy.

Well-being

People have autonomy and control over their day to day life. For example, they choose how they want to spend their day, where they want to go, how they keep their own rooms and what they eat. People partake in daily tasks such as shopping, cooking and cleaning; their abilities and skills are fully recognised and developed. Every element of support is carefully planned so as to promote independent living skills. Recruitment arrangements ensure people have a choice about the staff who support them

People's physical, emotional and mental health is always considered and promoted. People see the experts they need to keep them well and healthy. Most of their activities are community based and create the opportunity to socialise. People's skills are valued and encouraged art work displayed with pride. People go to college, they work in local café and shop,

People are protected by policies and procedures designed to ensure they are safe. Staff are trained in areas related to health and safety including the safeguarding of people's well-being. The provider completes audits to ensure good quality care and support is offered and people live in a safe environment. People are happy and healthy and enjoy living in the home.

The house is homely and comfortable. It is designed to allow choice, with three lounges each having a television. People's rooms reflected their own choice of décor, soft furnishings and furniture. The home is equipped so that people can be encouraged to do their own laundry and prepare meals if they wish. The home is in the process of further redecoration and refurbishment and people are involved in the process.

Care and Support

Individuals are provided with the quality of care and support they need through a service which involves them and takes into account their personal preferences, risks and particular needs. We saw care documentation which is very thorough and provides detailed instruction to care staff to ensure people have exactly the amount of support they need while maintaining and developing life skills. Our conversations with people confirmed they have autonomy and choice in all aspects of their lives. Their personal wishes and preferences are fully respected and catered for. People arrange activities in the community such as visits to the zoo, appointments at the hair dressers, doing their own shopping in the supermarket. Activities in the home are varied too and include assisting with daily chores such as cooking and cleaning their rooms. There is a Welsh language policy in place and the manager described how the provider is looking to have key documents translated so an active offer of the Welsh language can be provided. Some staff are able to speak Welsh.

People's physical, emotional and mental health is promoted their creative work is displayed around the home so they can feel proud of their achievements. Records clearly evidence physical, emotional and mental health is promoted through practices in the home and by seeking and arranging advice and support from external health care agencies. Personal plans are reviewed very frequently by key workers and the manager, in recognition of people's changing needs and aspirations and people are fully involved in these reviews. The ethos of people's home and people's choice is evident when observing staff interaction. We heard familiar but respectful conversations and friendly advice between staff and people at the service. One staff told us, *'this is their home, we are just lucky enough to work here'* and *'we do with, rather than for'*. People are happy and enjoy living their lives in a way they want to.

The service promotes hygienic practices and manages risk of infection. We were asked to do a lateral flow test for Covid before being allowed in the home and we completed a Covid safe questionnaire. We saw hand sanitiser around the home and care staff wore face masks. The home has managed the risk of Covid well, supporting people and staff to keep safe and adhere to the public health guidelines.

Environment

The service provider ensures individual's care and support is provided in a location and environment with facilities and equipment that promotes achievement of their personal outcomes. The premises looks like other houses on the street and provides a real home for people. People's bedrooms are kept as they like them; people have chosen their own furniture, soft furnishings and colour schemes. Key workers support people to keep their rooms clean and tidy. The home is conveniently located so that people can enjoy facilities in their own community and we saw this is encouraged. Three lounges all have a television so people have more choice about what they watch. Some parts of the home are in need of redecoration and we saw one toilet seat is broken, however, a programme of refurbishment is currently underway. We saw one bedroom has been recently decorated, a refurbished shower/bathroom, a newly decorated and refurbished en-suite and, on the day of inspection, a local tradesman was assessing the home for new flooring.

The service provider identifies and mitigates risks to health and safety. We saw records for fire safety procedures. Extinguishers and emergency lighting has been tested and there are regular fire drills. Four of the staff are fire marshals and all have had fire safety training. Staff must sign to confirm they have read the policies that protect people and ensure good practice in the home. Staff have received training in a range of health and safety topics.

Leadership and Management

There are governance arrangements in place to ensure the smooth operation of the service. The responsible individual (R.I) has regular meetings with the management of the home to make sure everything is running smoothly. We saw the manager has policies and procedures in place to achieve the aims of the home and these put people at the centre of the service. Records show there are systems in place for care planning and ensuring care is delivered reliably include detailed, personalised documentation and well trained, safely recruited staff.

Conversations with staff, together with records, evidence the RI visits the home and completes an audit of the service. Records show the RI identifies areas for improvement and progress is reviewed on the subsequent visit. The RI completes a 'quality of care review report' every six months to evidence 'what we do well' and what areas require further development. It is clear from these that people using the service are heavily involved in the process.

Individuals 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.. We saw staff are employed in sufficient numbers to provide a quality service including one to one support for some activities. The training records evidence the manager has good oversight of which training has been completed by whom and which training is needed. We could see the range of training provided is relevant to people using the service and takes into account staff appraisals. Staff have worked for the company for many years. We spoke to one staff who praised the organisation for the support staff have to further their career and promote their personal development. The manager described the processes for recruitment of new staff and it is clear people using the service have full involvement in selecting people with compatible interests and hobbies.

The service provider has oversight of financial arrangements and investment in the service so that it is financially sustainable and supports people to be safe and achieve their personal outcomes. The manager showed us what has changed in the home over the last twelve months and what changes are planned. The provider is investing in the service with training and improving the environment.

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

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