

Inspection Report on

Queen Elizabeth Court

Queen Elizabeth Court Clarence Drive Llandudno LL30 1TR

Date Inspection Completed

25/04/2024



About Queen Elizabeth Court

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	The Royal Masonic Benevolent Institution Care Company
Registered places	62
Language of the service	English
Previous Care Inspectorate Wales inspection	26 Oct 2021
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are very happy with the service they receive and praise the staff for their genuine care. They feel this is their home and do not feel it could be improved. Quality of care reviews, carried out every six months, show very positive feedback from satisfaction questionnaires and plenty of written compliments and thank you cards are further testament to this. There are lots of activities to choose from every day, offering stimulation to those who want to take part and these activities cater for different needs. The home is laid out in separate units, enabling people to mix with those they are most compatible with, and each unit has a lead staff who are an expert in their area. Staff are safely recruited, well trained and familiar with each person they support, having to familiarise themselves with every care plan prior to commencing their role. Plans are thorough; they capture people's needs, interests and outcomes and are kept up to date through regular review. Through regular audits of various aspects of the service, the provider ensures the home is always running at the standard they aspire to and in compliance with regulations. They know what is working well and where improvements might be made.

Well-being

People have choice and control regarding the care and support they receive at the home. Their views are sought during the preadmission assessment and thereafter during reviews of care plans and in monthly residents' meetings. People are asked about what food they want more or less of and what activities they'd like to try, and preferred trips out in the mini bus such as a recent request to visit art galleries. Their religious needs are catered for with the home's own church and regularly arranged services. The television in the main lounges connects to the internet so people can watch films of their choice, sports and music concerts. The availability of small kitchens enables people to choose to make their own snacks and drinks if they wish. There are Welsh/English bilingual signs identifying different areas of the home for Welsh speakers.

People's physical, mental, and emotional well-being is looked after by trained care staff who seek professional advice as it is required. They partake in exercise and other activities to help keep them mentally and physically well. Preserving and promoting independence is a key focus in the home and people are encouraged to do what they can for themselves. They spend time where they want to, doing things that make them happy. Everyone we spoke with told us they are very happy in the home, and they live their lives as they want to. People's health is monitored closely, and care is quickly adapted to suit their daily and changing needs and wishes.

People are protected against poor practices, abuse and neglect as staff are provided with mandatory training in safeguarding and there are policies in place to guide them. Care staff we spoke with know what to do if they have any concerns about practice in the home and they feel confident any concerns would be acted on promptly. Each unit in the home has a separate staff leader who is available all the time.

People enjoy living in the home. It is clean, tidy, warm, and bright; it is a homely and welcoming environment. The whole building is designed to enable people to get the best out of their environment, with separate units to facilitate greater compatibility of interests and needs. This allows for individualised care and support and successful activities catering for the collective needs of a smaller group. All areas are accessible and safe, including a large secure garden, although it currently needs some maintenance.

Care and Support

The service provider considers a wide range of views prior to a person coming to live in the home. People, their families and health professionals are consulted and fully involved in the assessment and care planning process. Assessment documents are very comprehensive and cover everything about the person; they show how available resources are evaluated to ensure needs can be met by the service. People's desired outcomes are recorded as priorities.

Care plans are reviewed monthly to ensure continued accuracy and changed more frequently if needs alter. Outcomes are not currently part of the review, but the deputy manager told us future reviews will consider the extent to which outcomes have been met. We saw staff providing care according to people's preferences identified in plans. One person enjoys jigsaws and word puzzles, another enjoys listening to the radio in their own room, while someone else likes to knit, and chat with staff. We saw people happily doing these things.

People are provided with quality care and support. Staff induction includes the need to read care plans, and they are allocated to work in specific units where they can become very familiar with the needs of the same group of people. Staff supporting people with dementia do not wear uniforms; they blend in with others in the lounge, connecting with people in a familial way. Staff and people receiving the care told us it feels like a big family unit, and we felt the homely atmosphere. We saw staff talking to people about events coming up, while they painted their nails or sat next to them on the sofa knitting. People told us 'it's a lovely place to be. Staff genuinely care and are so obliging' and 'there is so much good about it'. We saw lots of cards and notes of thanks to the home from grateful relatives and learned how one family chose this home because others had said how good it is.

Records evidence people are supported to access healthcare and other services to maintain their health and wellbeing; there are always nurses on site and regular visits from other health professionals for example to ensure people are vaccinated and have the right equipment. Each activity is risk assessed to maintain people's health and well-being. Activities such as 'movement to music', and 'giant scrabble', helps keep people physically and mentally stimulated. People are supported to maintain their preferred appearance and we saw they all looked clean and smart. Some people wore complimentary costume jewellery and had their hair and makeup applied. They are happy being themselves in the home and feel respected.

Environment

The home is purposely designed to help people live how they want to and achieve their desired outcomes. There are three units to the home, dementia, nursing and residential each with their own staff and separate housekeeper. This helps staff become very familiar with a smaller group of individuals and vice versa. Each unit is designed differently to appeal to the group of people accommodated in that area. The lounge in the dementia unit is very calming and domestic in style and each bedroom door is painted a different colour to aid orientation; memory boxes are next to bedroom doors and wall décor reminds people of the time, the date and season. Lounges in other units are also homely, comfortable, and modern in design. Bedrooms are personalised and reflect peoples' individuality with mementos, pictures and other things that matter to the person. Most bedrooms have adjustable beds to ensure people's comfort and there are assisted baths and showers.

Each unit has its own small kitchen and dining room; murals depict cafes scenes. Each is laid out with tables dressed to suit peoples' needs. There is a rolling programme for improving and replacing fixtures and fittings, furniture, and soft furnishings. New dining furniture has been purchased and there are plans to change furniture in one of the lounges. New flooring is also planned in the corridors.

There is a large, central, square garden surrounded by the building on all sides, so it is safe and secure. There are plans to improve the garden with general maintenance now the warmer weather is imminent, so people can enjoy being outside safely. A sensory room provides quiet space to help people relax in peace, and the home has its own church where multi faith services are held.

The provider has systems in place to be sure the home is always safe. We saw individual risk assessments for people living here and environmental risk assessments. Accidents incidents and near misses are audited, and subsequent action plans implemented to minimise risks. Regular audits are carried out on all areas of the home to ensure it is well maintained and safe. We saw certificates and other confirmation of recent electrical, gas, water, and fire safety checks; inhouse monthly home safety checks are also carried out and safety reports written. We saw a range of audits on various aspects of the home to ensure it is safe and compliant. There is a maintenance log which staff add to if staff see an area for repair or renewal and dates show matters identified are remedied quickly.

Leadership and Management

There are excellent governance arrangements that help ensure the RI (responsible individual for the home) has good oversight of the service. The home is well managed with leaders for each of the separate units in the home, reporting to the manager and deputy manager, and Regional Operations Managers above them. The RI visits the home at least every three months and they, along with the management team, carry out audits and develop action plans, the progress of which is checked at each visit. These include reviewing the monthly care plan evaluations.

Quality assurance systems include issuing surveys to people using the service and their relatives. We saw the home receives very positive responses, including various communication from grateful relatives. We saw minutes of residents' meetings and evidence of a 'you said, we did' response to issues raised. Records evidence numerous, regular audits of various aspects of the home are carried out; this helps to ensure the best quality of care and support is being provided, the environment is well maintained, and the service is compliant with regulations. The RI ensures a full quality of care review is completed every six months so they know what is working well in the home and where any improvements might be possible.

The service operates on a culture of openness, honesty and candour and staff feel they can share their views openly at any time. There are weekly clinical meetings between all the leads who represent their teams, the catering team, housekeeping, maintenance and management to share information such as upcoming events, plans for the home, changes in needs and ideas. The leaders appreciate and value staff input, and staff feel respected. Staff told us 'we love working here' and 'it's the best place I have worked for great team work; staff genuinely care here'. Staff also praised the care culture of the home, in particular the way in which spending quality time with people is encouraged.

There are always appropriate numbers of staff on duty. Rotas showed how staffing is deployed across all units depending on needs. We saw staff always had time to sit and chat with people they care for. Recruitment procedures are robust, and every staff is properly vetted, inducted and trained before they start to support people. Staff told us they feel valued through incentives such as awards for going above and beyond and for long service; the employee assistance programme available to all, Christmas gifts and through regular feedback in one-to-one supervision meetings and appraisals. We saw training is thorough with most of it being mandatory for all staff. Staff feel training is one of the services biggest strengths; they all feel very competent.

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	N/A
	inspection	

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