



# Inspection Report on

**Clement House**

**5 Clement Avenue  
Llandudno  
LL30 2ED**

## **Date Inspection Completed**

28/06/2024

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## About Clement House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Potensial Ltd
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">18 January 2023</a>
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

People are provided with good quality care which promotes and enables them to reach their individual well-being outcomes. Individual routines are planned around their choices, preferences and care needs. Personal plans are detailed and are recorded clearly so that care staff can follow individual requirements. The way they are recorded is respectful and written specifically around individual need. Care staff are safely recruited, supported and trained, to enable them to undertake their caring roles successfully. Activities and celebratory events are provided to ensure people have various opportunities to socialise and stay active. This service provides a happy home for individuals who live here, and this was evident during our inspection visit. Management ensures ongoing investment in the service provided and the environment to promote positive well-being.

## Well-being

People have control over their day to day lives. We found people are happy with their routines, the care they receive and their environment. Some people are more independent than others and care is planned around individual care needs and well-being outcomes. Care staff know people well. Management also knows people well and are focused on ensuring effective oversight. The environment is set out so that people can be as independent as possible.

People's physical and mental well-being is pivotal to the planning of individual care plans. The care plans we viewed demonstrate records are detailed, and include information about people's individual care needs, interests, routines and choices. Care staff focus on people's well-being and are tuned into individual care needs. Management monitor health and well-being on a regular basis and adjust according to any changes. The environment is planned and decorated with the aim to enhance people's physical and mental health and well-being.

People are safeguarded via effective planning and support, where individual risk assessments and safeguards are incorporated within their daily care routines. Care staff have been trained in the necessary areas, to ensure they can safely support people. There are up to date policies and procedures which underpin the training, and these include safeguarding training. Management monitors any incidents, risks and changes in care to ensure records and care staff are updated accordingly. Records show how any restrictions on people's liberty are made only in people's best interests and with full agreement from all concerned. The environment is monitored to ensure any possible risk is removed and living areas are safe.

The accommodation is a large family home. Rooms are spacious and homely and furnished with good quality fixtures and fittings. Every bedroom is personalised to reflect the individual's personality with their own chosen colours, furnishings, posters, and photographs. People have things that matter to them in their room.

## Care and Support

People have an individual plan which is written so that care staff can work toward meeting their daily and ongoing care needs. A 'This is me' document provides a personalised account of people's needs and what matters to individuals. The care people receive is a clear reflection of personal planning records and we observed this on the day we visited. We saw how care staff are patient and spent time with people throughout the day and staff respond in a way that prompts a positive reaction in people.

People are encouraged to be as independent as possible, in and away from the service, We saw people coming and going throughout the day. Some people are able to do so without the support of care staff. Records show people choose to go walking, shopping, and have visitors. Care staff support them by driving them to the location and encourage them to do what they want to do safely. One person told us they feel supported to be independent; their routine consists of going into the local town on most days. They said they are supported to prepare shopping lists, meals and washing. They said they feel more confident since living at the service. The personal files we viewed show there are individual risk assessment in place to allow for positive risk taking. Risk assessments ensure such activities are safe and specify what support is required by care staff, during activities. We saw while in the home, people listen to music, play on games consoles, watch television including films, partake in arts and crafts. There are regular residents meetings and minutes evidence people's views are sought on a range of matters such as where to go, what food to have. We saw events are celebrated and some had enjoyed taking a trip out to see a pantomime recently.

People are supported to access healthcare services and appointments so that their health and well-being can be maintained. The sample of personal plans we viewed show care staff and management communicate regularly with health professionals to receive guidance and to arrange health appointments on behalf of individuals. We saw care records are amended according to advice and guidance provided. We saw various adaptations have been made throughout the service so that people can maintain independence and have improved access throughout the service.

## Environment

The provider monitors and maintains the environment. Maintenance records demonstrate regular checks take place within required timescales. These include checks on lighting, fire safety equipment and alarms, legionella, and the safe storage of chemicals. Fire safety tests take place every month and a risk assessment of the environment takes place annually. There are regular fire drills and staff have received fire safety training. Regular audits are undertaken by the management team. We saw information gathered about the environment via the audit, which identifies areas in need of repair or improvement. Any risks identified are rectified and the audit record shows timely responses to issues highlighted. There are food hygiene measures in place. Kitchen staff are trained in food hygiene and the food hygiene rating is five, which is the highest possible score. Fridge and room temperature are monitored and recorded correctly.

The environment of the service is planned to accommodate people's overall well-being. The service is a large town house, which has been organised and decorated to be homely. All rooms are spacious and bright; bedrooms have en suite facilities. There is a communal bathroom with a jacuzzi and a room with sensory lighting to aid relaxation. The lounge has three large comfortable sofas. There are photographs on the walls of residents at different events and the manager told us there are more to be put up. There is a separate dining room and a kitchen large enough to accommodate people who want to make their own snacks or help staff prepare them. We observed people preparing snacks for themselves during our visit. A back garden is split into recently decked areas with seating and tables.

## Leadership and Management

The provider has effective governance arrangements in place to support the smooth operation of the service and ensures there is a sound basis for providing high quality care and support for individuals using the service to enable them to achieve their personal outcomes. The responsible individual (RI) visits the home every three months and completes their own audits of the service. The sample of audits we viewed show they check progress made on previously identified actions. The RI seeks other's views on the service and is proactive in identifying areas for further improvement. We viewed a variety of audits including medication, care plans, health and safety and environment. We found policies have been updated and staff are required to sign they have read these. We spoke with the manager who discussed a variety of documentation with us. These demonstrate effective oversight and show people are involved in the planning of their care.

People are supported by appropriate numbers of staff on duty at any one time. We saw rotas ensure sufficient staffing to provide support and take people to appointments or activities. Safe employment checks are undertaken to ensure people are thoroughly vetted before they work at the home. Staff are provided with the training necessary for them to work safely and effectively and they feel valued by the manager. They have regular formal supervision with their manager, giving them opportunities to reflect on their performance, plan their career and discuss practice and their well-being. Care staff praised the manager for their support; they feel valued and listened to. We heard how the manager accommodates people's childcare arrangements when planning the rota whenever possible. Staff told us they feel confident and competent in their role and the manager is always available if staff need to ask questions or raise concerns. Recorded minutes show regular meetings with staff are used to ask their views about the service and identify ideas for further improvement.

There is a budget for the home and the manager can make decisions about where further investment will enhance the service for people living here.

### 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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N/A	No non-compliance of this type was identified at this inspection	N/A
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**Date Published** 14/08/2024