



Inspection Report on

Valley Lodge

**Llanarmon Road
Llanferres
Mold
CH7 5TA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

16/11/2023

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About Valley Lodge

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Roberts Homes North Wales Ltd
Registered places	34
Language of the service	Both
Previous Care Inspectorate Wales inspection	22 February 2022
Does this service promote Welsh language and culture?	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 live in a home which is warm and welcoming. They are supported by kind and caring staff who are trained and skilled. Staff follow detailed personal plans which demonstrate how people wish their care and support to be provided and know people well. Appropriate processes are followed to support people who lack capacity to make decisions about their own care. People enjoy good relationships with the staff supporting them, and relatives are happy with the care and support provided in the home.

The provider ensures the home is well maintained and has an ongoing programme of redecoration underway. They ensure staff are recruited safely and receive the training needed to meet people's needs. The manager ensures good numbers of staff are on shift at all times to maintain continuity of care. The manager has good oversight of the day to day running of the service and reports to the Responsible Individual (RI) routinely. The RI attends the service regularly to support the manager and oversee the smooth running of the home. There are appropriate governance arrangements in place and the RI reports their findings of quality of care reviews to the provider as part of continuous improvement and development of the quality of the service provided.

Well-being

People can make choices about how to live their day to day lives. We saw people are supported by staff to move freely about the home as they wish. There are menu options available each day for people to choose from, and people are supported to get up and dressed when they are ready. There are a variety of communal spaces people can choose to spend time in, or they can spend time resting in their room if they wish. People's rooms are personalised with pictures, ornaments, and objects of importance to them. The provider gathers feedback from people and their relatives about their views and opinions of the home and the service they receive.

People are supported to maintain and improve their emotional, mental, and physical health and well-being. Records show people have timely access to medical care and advice. Visitors are encouraged and made to feel welcome in the home and we saw visitors enjoying lunch with people. Relatives told us they were very happy with the care and support they receive. There are staff who coordinate activities for people; these range from music and singing, to external entertainers and craft activities. We saw people enjoying these activities during our inspection. The manager ensures families are kept informed of any upcoming events through information posters and regular meetings for relatives, and they are encouraged to participate in events and activities themselves. People are supported with visiting relatives outside of the home. Relatives are also well supported by the service. They are encouraged to attend coffee mornings to meet each other and are offered one to one support by the manager if preferred.

People are protected from abuse and neglect. The service provider has policies and procedures in place and ensure staff receive training on how to keep people safe. Staff we spoke to understand their responsibilities in this regard and felt confident going to the manager or the RI if they had any concerns. The manager ensures appropriate processes are followed for those people who lack capacity to make decisions about their care and support. They ensure people have access to advocacy professionals where required and work closely with professionals to ensure people are safe and receiving the care and support they need.

People live in accommodation that supports them to achieve their desired outcomes. The provider ensures the equipment and facilities in the home meet people's needs. They ensure staff receive appropriate training in how to use equipment. The home is well maintained and appropriate health and safety checks are completed in a timely way.

Care and Support

The manager has robust pre-assessment processes in place to ensure people's needs can be met prior to their admission to the home. They use information gathered from a variety of sources including people themselves, their relatives, professional assessments, and individualised risk assessments to do this. Once the suitability of the home is confirmed, the manager ensures written personal plans detailing how people's care and support needs should be met are in place ready for their arrival. We saw these plans are thorough and gave clear instructions to care workers about how to support people. Plans are reviewed on a routine basis and updated in a timely way as changes in people's needs occur. Plans are in the main strengths based and focus on encouraging people to maintain existing skills and independence.

People are well cared for by friendly, kind, and knowledgeable staff, and have good relationships with them. Care workers were able to explain people's needs and preferences to us. Agency staff who support people one to one know the people they are supporting and provide appropriate care. Care records show people receive support in keeping with their personal plans. We observed people were well dressed and well kempt, and staff chatted continuously with people as they supported them. We saw people participating in activities with support from staff, who were attentive and encouraging. People were smiling and engaged during these interactions with staff and other residents. We saw the home makes use of dementia friendly tools and equipment, including fidget boards and animatronic pets, for those who enjoy using them.

Records show there are good medicines management processes and procedures in the home. We saw evidence of routine review by medical professionals to ensure current medical needs are being adequately met. The service provider has policies and procedures to manage risk of infection and promote hygiene practices in the home, which all staff follow. Records show domestic staff are in the home daily, and we found it to be clean and tidy throughout. We saw staff using Personal Protective Equipment (PPE) appropriately.

Environment

People can be assured the service provider has robust systems in place to identify and reduce risks to people's health and safety. The provider has a comprehensive set of policies and procedures in place to guide staff and ensures these are reviewed regularly and updated as required. Records show servicing and maintenance of equipment and facilities throughout the home, including testing and servicing of electrical equipment and fire alarm systems. There are appropriate individual and whole home risk assessments in place in relation to health and safety matters.

The service provider invests in the upkeep and maintenance of the home. The home is warm and secure, with modern and homely style of decoration. There are multiple communal areas for socialising and these contain ample comfortable seating for people to use. There are some quieter seating areas for those who want it. The dining areas include tables and chairs of various sizes to encourage people to dine together. We saw people using the ground floor dining area for Christmas themed arts and crafts activities. Some areas of the home are being redecorated to include decorative touches that provide interest and activities for people with dementia who walk with purpose. The grounds and outside seating areas are accessible to people via communal areas. The gardens would benefit from some updating and refurbishment but are well-tended and tidy. We saw some bilingual signage on display in the home to help direct people through the building.

People's individual rooms are furnished with what they need and are cleaned daily. We saw they are decorated in the same modern and homely style as the rest of the home, with people's personal items on display. Some rooms require redecoration; the manager and RI told us this work is planned.

Leadership and Management

People can be assured the service provider has good governance arrangements and oversight of the home and how it is run. The manager completes a robust set of routine audits to monitor how care is delivered across the home; the outcomes of these audits are reported to the RI at regular management meetings and action is taken in a timely way to resolve issues as they arise. The RI visits the service frequently to support the manager and maintains good records of how they are overseeing the management of the service. The RI completes a review of the quality of care delivery twice a year, incorporating feedback from people, relatives, and professionals to do this. The RI reports their conclusions to the service provider to ensure the developments and improvements required in the service are made. There is a comprehensive set of policies and procedures to guide staff in their work and maintain good quality care in the home. The manager and RI work well with regulators and commissioners; feedback from commissioners about the home is positive.

People can be certain the provider ensures good levels of skilled staffing throughout the home. This is supported by records we saw, including rotas. There are some agency staff used to support people one to one, but the manager books the same agency staff each time they are needed to ensure continuity of care for people. All new staff to the home are safely recruited and vetted thoroughly. They undergo a robust induction period that includes training and checking of their competencies. Training records show staff receive ongoing training in a variety of subjects relevant to the needs of people living in the home. The manager closely monitors training compliance, alongside staff registrations with regulatory and professional bodies and ongoing vetting checks. Staff told us they feel well supported by the manager and receive supervision regularly. They told us the manager is approachable and there is good communication amongst the team. They told us all staff work well together as a team and consider the agency staff as part of their team also. Staff told us they like working in the home. Staff we spoke to were longstanding members of the team, with multiple years of experience and knowledge of the home and people living there.

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