



Inspection Report on

Llys Gwenffrwd

**Llys Gwenffrwd Residential Home
Brynford Street
Holywell
CH8 7RA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh.

Date Inspection Completed

31/08/2023

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About Llys Gwenffrwd

Type of care provided.	Care Home Service Adults Without Nursing
Registered Provider	Flintshire County Council
Registered places	30
Language of the service	Both
Previous Care Inspectorate Wales inspection	13/01/2020
Does this service promote Welsh language and culture?	This 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 live in a service which is homely and welcoming. There are plenty of spaces to sit and relax. There is a calm, relaxed atmosphere, and people are supported by well-trained staff who know them well. People are encouraged to contribute their views to the running of the home, and their views are taken seriously. There is a range of activities on offer, and these are personalised to people's individual preferences. Care staff are supported by a management team which is approachable and responsive to their needs.

Well-being

People have control over day-to-day decisions. They can make choices about how and where they spend their time. During our visit we saw people chatting and socialising with each other. One person brought their own coffee to the lounge to make a hot drink. People told us they enjoyed the food and there is “*plenty of it*”. There are two choices on the menu daily and alternatives can be requested if people do not like the choices. People told us they are supported to do the things they want to. They have personalised activity plans and we saw photographs of people enjoying activities which matched their interests. There were photos of people gardening and picking their own produce. People can contribute their ideas and feedback to residents’ meetings, and we saw suggestion forms they had completed prior to the meetings. Any suggestions are considered by management; for example, we saw some new additions have been made to the dessert menu, and a curry night is being arranged, following a suggestion from people living in the home. Residents are encouraged to contribute to the home in other ways, such as a sunflower competition over the summer, and people choose a ‘poem of the month’ which is displayed within the home.

People are supported to make their own decisions. Care staff help solve any difficulties which may arise by identifying the outcomes people want to achieve. We saw examples of successful solutions being found, which had a positive impact on the individuals’ wellbeing. We also received positive feedback from the visiting professionals we spoke to. One professional visitor to the service told us staff are, “*focused on people’s wellbeing*” and they would be happy for their own relative to live there.

People can receive a service in Welsh if they wish. During our visit, we heard people communicating with staff in Welsh. All staff at the service are offered Welsh language training and some staff are fluent in Welsh. There are bilingual signs throughout the home.

People are protected from abuse and neglect. We saw staff are trained in safeguarding and staff told us they are confident to report to management if they have concerns for an individual’s wellbeing. We saw people can access an advocate if they require support to ensure their voice is heard.

Care and Support

Care staff ensure people living at Llys Gwenffrwd have thorough and detailed personal plans that are focused on their wishes, feelings, and beliefs. We saw personal plans are focused on outcomes for people and how these can be achieved. The plans consider any risks involved and how these can be managed to provide the support required. Staff review plans regularly and management then audit the plans to ensure they are up to date and relevant. The personal plans we saw gave us a real sense of the person. The service has achieved an award for their personal plans in terms of providing individualised support to people.

People are provided with a good quality of care and support that meets their individual needs. We observed positive interactions between staff and people throughout our visit. Care staff were kind and attentive to people, any needs were addressed in a timely and sensitive manner. People confirmed to us the care staff are supportive and attend promptly if they need any assistance.

People are supported to access the healthcare they need. On the day of our inspection, we saw several healthcare professionals visiting the service. We saw records of health appointments and referrals to health services made appropriately. Health professionals told us the staff communicate proactively with them. One health professional told us their advice is followed "*to the letter*".

Care staff follow safe hygiene practices. We saw the service was clean and tidy throughout. The kitchen was recently awarded a food hygiene rating of five, which is the highest rating possible. There are good stocks of personal protective equipment (PPE) in the home to help ensure good infection prevention and control.

The service has good systems in place to ensure people's medication is administered safely. We saw medication is stored securely and the record keeping systems are thorough. Care staff ensure the correct decision-making process is followed when people require covert medication. We saw thorough record keeping where covert medication is administered. When possible, people are offered the option to manage their own medication, and there are systems in place to support this, helping people to maintain a measure of independence where appropriate.

Environment

People live in a home which is homely and comfortable and has good facilities to meet their needs. We saw there are plenty of places to sit, and seating is arranged to encourage socialisation. The main lounge has facilities for people to make their own drinks if they choose. There are small lounges on the middle and upper floor, and a seating area with a coffee machine in the dining room. People can use these as a quiet space, or private meeting areas with their visitors if they wish. In the main lounge there is a pop-up shop where people can buy snacks and toiletries. This also serves as a bar for people to enjoy in the evenings, and for special occasions. One member of staff we spoke to describe the service as “*home from home*”.

People can easily access all parts of the home with the provision of grab rails, ramps, and lifts. There is a large conservatory that provides a space for activities, or for people to sit quietly with a view of the garden. The garden is welcoming and has garden furniture painted in bright and cheerful colours. There are plenty of places to sit outside, including areas providing shade on sunny days.

The rooms we saw were personalised and homely. One person described their room as “*beautiful*”. All bedrooms have a telephone point for a private landline to be connected and a TV as standard. The service has an area with four rooms for reablement or shorter stays. People staying in the reablement unit benefit from an accessible kitchen to prepare their own meals, promoting and supporting their independence.

There are good arrangements to identify any risks to health and safety. We saw current gas and electrical safety certificates and evidence of legionella checks. Remedial action is taken promptly where issues are identified. Management ensure staff are trained in fire safety procedures, and complete fire drills with care staff so they can be certain staff know how to respond in the event of a fire.

Leadership and Management

There are effective governance arrangements in place at the service. The Responsible Individual (RI) visits the service regularly and provides support to the home's management team. We saw the RI had been responsive in attending the home to support management when this was required. They have completed focused visits on particular themes to ensure that areas such as fire safety are explored in detail. The quality-of-care reports evidence the RI speaks to people and staff to obtain their views, inspects the premises and personal plans for people, as required by regulations. There are policies and procedures in place which are in line with guidance and legislation. Staff told us they know how to access these to support them in their role.

People are supported by a service that provides adequate numbers of staff. The management value their staff team and ensure they are well supported and qualified for their role. Medication competencies are thorough, ensuring staff are knowledgeable and employing safe practice when administering medication. The staff we spoke to told us they can request additional training for areas that interest them and have been encouraged to develop new skills. One member of staff told us how they had been supported by management to change their job role and were really enjoying their new position. All the staff we spoke to provided positive feedback about the management, saying they are approachable. Staff told us they work within a "*great team*." There are regular staff meetings at which staff can contribute their views, a suggestion box is provided so staff can contribute anonymously if they wish. Staff are clearly happy in their work which, in turn, benefits the people living in the home.

Effective oversight of the service ensures improvements and investments are made for the benefit of people living in the home. Overall, the service is well maintained. On the day of our inspection, we saw one room had a new carpet fitted and we were told the televisions in people's rooms are in the process of being upgraded to smart televisions. This investment ensures rooms are maintained to a good standard, and that people have a comfortable place to live that meets their needs.

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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