



Inspection Report on

Adlington House

**Adlington House
Abbey Road
Colwyn Bay
LL28 4PU**

Date Inspection Completed

19 July 2022

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About Adlington House

Type of care provided	Domiciliary Support Service
Registered Provider	Methodist Homes
Registered places	0
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection of the service since it was re-registered under the Registration and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

Adlington House domiciliary care is a unique service, providing responsive care and support as and when people need it. People living in their own homes can access any urgently required support by alerting the on-site agency via a phone call or by pressing the pendant. People are happy and reassured by this flexible approach. Care staff arrive on time to deliver planned care, and they respond to ad hoc requests promptly. Arrangements for planned care and support are drawn up and agreed by the manager and the person receiving the support. Personal plans are kept confidential; staff sign up to a confidentiality policy on recruitment and documentation is kept securely locked away. Care staff are trained to carry out their role. They feel well supported and enjoy what they do. People describe care staff as pleasant, prompt and always happy to help.

Well-being

People have choice and control regarding the care and support they receive at their home. They choose how much support they need and prefer and to what extent they want to be monitored and this is recorded. Care planning documents detail people's preferences and dislikes and are signed by them to confirm their full participation and agreement. People have different needs and routines, and the flexible approach of the service allows them to be responded to as individuals in the way they want.

People's physical, mental, and emotional well-being is looked after where they have requested the support. They are escorted to appointments and assisted with their medications by trained staff. Care and support needs may change quickly, and the service is able to respond promptly, always available even where no formal care package has yet been provided. All people can access support via a direct line from a phone in their apartment whenever they need it.

People are protected against poor practices, abuse and neglect as support staff are trained in the subject of safeguarding and there are policies in place to guide them. There is plenty of opportunity to raise issues with management if the staff are concerned.

People's social well-being is supported as the service aids people to attend activities in the apartment building and out in the community. The service provided includes activities, and a chaplain is employed to help people with their emotional and mental well-being. Adlington House domiciliary care service is an on-site agency and is unusual in its ability to provide flexible, prompt and responsive care.

Care and Support

People have the quality of care and support they need and prefer; their personal plans are completed with their full input and their choices in respect of all elements of their care is recorded. We saw people elect whether to use the call pendant and other safety devices on offer. All have access to a phone with a direct line to the domiciliary care service should they need assistance quickly. Personal plans are reviewed every three months at which stage preferences and wishes are sought again to ensure continued satisfaction. Needs are monitored closely in case they change in the care required. Care provision is responsive and as dynamic as it needs to be. We spoke with people receiving care; one said they feel secure and reassured; *'I can have care whenever I need it.'* Another said, *'If I press the pendant, they (staff) phone immediately to check what is wrong'*. Staff are described as prompt and responsive, friendly and chatty. People told us they know the staff well as there is continuity of care.

People are supported to access health and other services as they need it. There are risk assessments completed to help ensure care and support is provided in the best way. If requested, people are escorted to places in the local area such as to go shopping and to a restaurant; care is provided imaginatively and flexibly so people live their lives how they want knowing they are safe and secure. The agency also provides activities in the communal areas of the accommodation as part of the service. People are supported to attend GP appointments, pick up their prescriptions and take their medication if they need it. Medication administration records are kept evidencing this responsibility has been carried out correctly.

There are mechanisms in place to safeguard people who are vulnerable. Staff have received relevant training and are guided by policies for safe practice. People who require a shopping service receive copies of receipts which are also kept on file and the exchange of money is witnessed by a second staff. People's views are sought every three months when care is reviewed to check they are happy with the service and there are no concerns.

Environment

This theme was not considered in the inspection of the domiciliary care service. We viewed the office and saw records are kept securely as the door is always locked. Staff are trained on site in a communal area and there are quiet spaces to have one-to-one discussions about practice and have staff appraisals.

Leadership and Management

The provider has governance arrangements in place to help ensure the service is effective and the responsible individual has good oversight. The manager carries out audits of records and practices. The responsible individual maintains good oversight by visiting the service every three months and completing audits. The views of people using the service and of staff are sought to check ongoing satisfaction with the care provision and the management. A full assessment of the service was last completed in April 2021 and actions taken where potential for improvement was identified. This Quality-of-Care review should take place every six months. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The manager has a range of policies and procedures in place to help instruct staff and keep people using the service safe. There is a statement of purpose that outlines what people can expect of the service; everyone has a statement of terms and conditions and a detailed fee schedule. People have the information they need about the service.

Staff are employed only after checks are carried out to ensure they are fit for the role and training is provided to ensure they have the expertise they need to carry out their responsibilities safely. As part of the interview process, care worker applicants are introduced to people receiving services; those same people feedback their thoughts and views on the prospective staff they met. Records show one-to-one meetings happen with each staff every three months to check they are happy in their role and discuss any practice issues and the manager is similarly supported by the provider.

There are enough staff available to provide domiciliary care in the way it is requested, and this is flexible to ensure changing needs can be met responsively. Whether night care is needed or not, there is always a staff on duty in case of emergency. Regular meetings with people using the service ensures the number of staff available at any time reflects what is needed and preferred. Care staff are happy in their role and praise the service's approach to employees. One said the whole staff group is relaxed and happy in their work. There is no rush or pressure to have tasks completed within specific timescales. Staff can be flexible in accordance with people's preferences on the day. One staff said they felt absolutely supported by management. They said, *'I get the answers to my questions and there is an open relationship with management'*. The same person said they have been supported to further their qualifications and the training provided makes them feel competent to carry out their role. Staff enjoy good support from the company and there are services available to them for their well-being.

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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80	The provider completes an Quality assessment which they put forward as their Quality of Care review. The last one was completed in April 2021. A quality of care review must be completed every six month.	New
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