



## Inspection Report on

**Bod Hyfryd Care Home**

**Bod Hyfryd Care Home  
Northop Road  
Flint  
CH6 5LH**

## **Date Inspection Completed**

18 May 2022

**Welsh Government © Crown copyright 2022.**

*You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: [psi@nationalarchives.gsi.gov.uk](mailto:psi@nationalarchives.gsi.gov.uk) You must reproduce our material accurately and not use it in a misleading context.*

## About Bod Hyfryd Care Home

|  |   |
|--|---|
| Type of care provided                                      | Care Home Service<br>Adults With Nursing  |
| Registered Provider  | Lovett Care Limited   |
| Registered places  | 40  |
| Language of the service                                    | English   |
| Previous Care Inspectorate Wales inspection                | This is the first inspection of the service since it was registered under Registration and Inspection of Social Care Act (Wales)  |
| 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

People are happy living in the home. Their care needs are met and their preferences and wishes catered for. There are systems in place to check individual's views on all aspects of their life in the home. The provider proactively seeks ways to improve the service for the benefit of each person. Knowledgeable staff, policies and procedures, regular safety checks and audits, risk assessments and up to date personal plans all enhance the safety and well-being of people in the home. The manager is present most days and has a good overview of the home. The manager's office is situated near the entrance so that visitors and staff can find her easily. Many checks and reviews are conducted to make sure people living in the home are happy with all aspects of their care. Staff are well supported and enjoy working at the home. People praise them for their kindness and friendliness. They also praise the quality of food and menu options available to them.

People have choice about how they spend their day in the home. They choose when to get up and go to bed, where they want to spend their time, what, when and where they eat and whether they want to engage in activities. They are listened to and preferences accommodated where possible. The environment is bright, clean and spacious. The gardens are well kept and people are supported to go outside and sit on the patio in the sunshine. Redecoration of rooms is continual, and the ground floor is particularly pleasant being freshly decorated.

## Well-being

People have choice and control over their day to day life. They choose when they want to get up and go to bed; where they spend their day; what and where they eat and which activities they wish to engage in. People choose how they want to personalise their room and maintenance staff help them achieve this keeping the rooms freshly decorated, comfortable and safe. There are regular resident/relative meetings allowing people to express their views and share information, and the service is currently developing questionnaire surveys to further facilitate this. There is a 'resident of the day' arrangement when an identified member of staff meets with the resident to review care, preferences and wishes. Maintenance of the room is checked, ongoing menu preferences, satisfaction with laundry services, cleanliness of the room, and all aspects of care provision including activities. People have a regular opportunity to express their views and change their preferences.

People's physical, mental health and emotional well-being is monitored and health care sought when needed. People's personal plans are comprehensive and are reviewed monthly to keep them up to date. Care provision is closely monitored through a mobile digital device all care staff carry. We spoke with people receiving care who said '*staff pop in and out all the time and are nice*'. There are qualified nurses on site at all times; appointments are made with opticians and dentists and the GP visits the home regularly. Equipment such as adjustable beds and specialist mattresses keep people safe and comfortable and the spacious corridors allow for large wheelchairs.

Staff are trained in the subject of safeguarding and this, together with the services policies, protects people from abuse and neglect. The manager is present most days and leaves the office door open to encourage people who want to speak with her to enter. Staff told us they would feel very comfortable talking to the manager should there be any concerns. She is described as approachable and she listens. Meetings between staff and management provide an opportunity to discuss practice and ensure everyone receives important information at the same time.

The accommodation is warm, clean, bright and spacious. Communal areas on the ground floor provide space for quiet time or to engage with others residents or visitors. People can enjoy the secure garden where raised beds display flowers and patios provide seating areas. The home is equipped and suited to meet the needs of the people living there and people say they are happy.

## Care and Support

People are provided with the quality of care and support they need and prefer. We saw personal plans are up to date and comprehensive, covering all matters important to the individual. The service uses a digital personal care system, all staff recording any support provided on handheld devices as and when it takes place. This device provides staff with a quick overview of the person they are supporting, ensures an accurate record and facilitates prompt identification of any missed or late actions. We saw risk assessments and personal plans are reviewed monthly or more often if people's needs change. People praise the staff, the care and the food; we saw staff interact kindly with residents and swiftly pre-empt the need for support, plumping their pillows for additional comfort, cleaning their spectacles and enquiring about their wellbeing. People told us *'I ring the call bell and they're not long. They see me out of bed and get my breakfast'* and *'the food is good. You get three courses for dinner'*.

People have choice about most aspects of their day. There are regular residents/relatives meetings so people can learn of developments and have their say. A 'resident of the month' initiative involves all teams within the home visiting the resident to ascertain their views on all aspects of their life in the home. The cook, the laundry staff, the maintenance staff, the housekeeping staff, senior carer and the activities coordinator all check the person is satisfied with the service they offer and ascertain where preferences may have changed. Everyone has a role to play in checking the person is happy with all aspects of the service. People's liberty is restricted only if necessary to protect their wellbeing and keep them safe; such measures are taken following a specific assessment carried out by the local authority and with input from health professionals, people and their representatives.

People have access to health and other services with support from the home. Records evidence referrals are made to health care professionals such as dentist, optician, dieticians and GP's. One person told us they go to the local opticians and the GP visits the service regularly to see whoever requires medical or health advice. People have the equipment they need to promote their well-being.

The service promotes hygienic practices and manages risk of infection well. Visitors must have their temperature checked and sign in a visitor's log. Instructions to staff and visitors are visibly posted, staff wear face masks and hand sanitising liquids are situated around the home for everyone's use. Visiting is facilitated in a safe way.

## Environment

The service provider ensures people's care and support is provided in an environment with facilities and equipment to promote their personal outcomes. We saw aids such as hoists, wheelchairs and adjustable beds with specialist mattresses to help keep people comfortable and well. Bed rails offer protection against falls, bed trays help people to eat and drink in their room. People have televisions in their room and they bring their own personal belongings to make the room feel like home such as photographs and other items that are important to them. We saw rooms are nicely decorated and the communal spaces on the ground floor have recently been updated. The home is clean throughout. There is a well-kept garden including raised flower beds, a maintained lawn and patio areas; garden furniture allows people to sit out and enjoy the fresh air. We spoke with one person who told us they had eaten outside on a warm day as *'they (staff) bring it out for you'*. The building is secure as visitors are required to sign in and out and there are keypad door locks to prevent unauthorised access.

The service provider identifies and mitigates risks to health and safety. We saw all safety checks are routinely carried out and logged. Maintenance records show full range of checks for safety. There is a schedule of testing for weekly tests of fire alarms system and an annual test certificate. There are personal evacuation plans in place for every resident. We saw cleaning schedules in the kitchen and the home has been awarded an Environmental Health food hygiene award of 5 which is the best it can be. As some rooms are south facing and become hot in the summer, staff routinely check rooms and close curtains to ensure shade. As part of the 'resident of the day' initiative, the maintenance staff visit the person in their room to check the state of furniture, fixtures and fittings; checking for any new electrical appliances that may need testing; and putting up pictures. People told us they enjoy living in the home, they are comfortable and happy with their rooms.

## Leadership and Management

The service provider has good governance arrangements in place to support the smooth operation of the service and ensure quality care and support is provided. A comprehensive range of audits are carried out by staff with knowledge of the areas being audited, and this means the safety and effectiveness of the service is monitored. The responsible individual visits the service every three months and produces a report of their findings. The responsible individual also produces a quality of care review report which outlines the effectiveness of various systems and processes. They intend to use surveys to gain views of people using the service, their families and commissioners and conclusions drawn from these will feature in future quality of care reports.

People are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide the levels of care and support required. Records show annual appraisals capture staff's skills and aspirations. There are one to one meetings between management and staff and these, alongside the daily presence of management, helps allow staff to raise any concerns and share information quickly. Staff are given training in a range of relevant topics to develop knowledge towards safe, effective practice. Staff rotas and our observations on the day of our visit evidence sufficient numbers of staff are employed to meet the needs of people in the home. Staff interact with residents in a calm relaxed manner, support is unrushed and patient. Staff told us it does get busy in the morning but staff move around between floors to help each other. They said *'it's a nice home. Staff pull together'*. Two care staff came to work at the service from an agency and enjoyed it so much they became employed staff. We saw safe recruitment processes are in place; staff are properly vetted for suitability.

The frequent and comprehensive audits help the responsible individual to identify any areas requiring further investment and we saw the home has benefited from redecoration, ongoing improvements of the grounds and new furniture where required. The management also invests in its staff, providing awards to employee of the month and bonuses for long service. Staff told us they enjoy working for the service and feel supported and valued.

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



**Date Published** 28/06/2022