Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Edgeworth

Colwyn Bay

Date Inspection Completed

11/11/2024

About Edgeworth

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Coed Du Hall Ltd
Registered places	2
Language of the service	English
Previous Care Inspectorate Wales inspection	5 December 2022
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 happy living at Edgeworth and say they like the care staff supporting them. Edgeworth is a well-maintained property with bedrooms decorated to people's own taste. People are supported by skilled and competent staff who know them very well. We saw care staff provide positive reassurance and interaction on a regular basis. People are supported to make choices about their daily lives where possible. Personal plans are person-centred, detailed, reflect people's needs and reviewed and changed accordingly. Staff support people to do the activities they enjoy and go to the places they want to go safely.

Staff feel well supported by Management and say they are provided with training to meet people's needs. There are good governance arrangements in place and the Responsible Individual (RI) visits the home regularly to oversee management of the home and gather the opinions of people and relatives to help to improve and develop the service.

Well-being

The service tries to ensure people have control over their day to day lives as much as possible. Where there are deprivations of liberty happening, the service ensures the conditions are documented in personal plans, and where deprivation of liberty safeguards require renewing, the service ensure renewals are requested and regularly chased with the local authority. Personal plans and other supplementary documents are written together with the person and cater for people's preferences. People say they like living at the home. People and their relatives are involved with the improvement and development of the service and people can choose what activities they do with good staffing levels in place to allow flexibility and travel to places further afield. Rooms are personalised and clean and tidy. Care records give care staff the clear and detailed instruction required to support people, with reviews of personal plans carried out monthly. Staff know residents extremely well and people have good relationships with the care staff supporting them. Although the people living at the service do not speak Welsh, the service provider would ensure Welsh speaking staff worked at the service if it was required in the future.

People are protected from abuse and neglect as much as possible with care staff receiving training in safeguarding and policies and procedures in place and followed. The service learns from any incidents that take place by making changes to personal plans and changing staffing levels accordingly. People are supported to maintain and improve their health and wellbeing through access to specialist care and advice when they need it. Referrals are made in a timely manner to specialist services, ensuring people receive the right care and support, as early as possible. Care staff and the manager are proactive and work collaboratively with support agencies.

The lay out of the home supports people to achieve a good standard of well-being and people are encouraged to be independent where it is safe and possible to do so. Strategies for reducing the risk to people while they are inside and outside of the home are proportionate and comprehensive. The manager has identified potential hazards and has taken steps to minimise risks to people.

Care and Support

People can feel confident the service provider has an accurate and up to date plan for how their care and support needs should be met. Comprehensive pre-assessments take place before people move to the service telling staff about people's history. People are encouraged to co-produce their personal plans, but if they choose not to be involved in the writing of them, their choice is respected. Personal plans are personalised, up to date, accurate and regularly reviewed. They are detailed and tell staff about people's likes, dislikes and preferences. Documentation of outcomes would benefit by being more person-centred, the service is aware of this and have plans in place for management and staff to complete outcomes training.

Highly robust risk assessments are in place and regularly reviewed. People receive care in line with their personal plans and risk assessments and care staff are kept informed of important updates using thorough handovers between shifts. Care is provided in a supportive and skilled way by staff. Relationships between people and care staff are positive. People have access to specialist advice and support from health and social care professionals in a timely way. Changes in mental and physical health are escalated to the appropriate professionals as staff know people well enough to identify subtle changes in their presentation. Care plans and risk assessments are updated to reflect professional advice and care staff access appropriate and specialist training. Care staff feel that they can approach the manager if they have any concerns or if support levels need to change.

Medication storage and administration practices in the service are good and keep people safe. Care staff administering medication are trained and their competency to do so is regularly assessed. Regular medication audits are carried out by management.

Environment

People live in an environment suitable to their needs. The service provider invests in the decoration and maintenance of the home to ensure it meets people's needs. Décor in the home is bright and airy and the communal lounge and kitchen are well-maintained and clean and tidy. People can socialise in the communal spaces available or have privacy in their own rooms if they wish. People's rooms are clean, tidy and personalised to their own taste with their belongings. People say they like their rooms. People access the main home through a securely locked door and visitors are required to sign in on arrival and provide identification. The service provider has infection prevention and control policies in place, with good measures in place to keep people safe.

People can be confident the service provider identifies and mitigates risks to health and safety; with regular health and safety audits completed and actions dealt with swiftly when identified. This is monitored by management and the RI. The home has the highest food rating attainable. Routine health and safety checks for fire safety, water safety and equipment are completed and records show the required maintenance, safety and servicing checks for the gas and electrical systems are up to date.

Leadership and Management

People can feel confident the service provider has systems for governance and oversight of the service in place. The RI visits the service regularly to inspect the property, check records and gather the views of people and staff. Comprehensive reports relating to visits show in depth analysis of all aspects of the day to day running of the service, such as personal plans and medication administration, they provide meaningful oversight and drive development and improvement of the service. The RI monitors the outcomes of actions identified during previous visits and ensures they are completed. Clinical governance meetings are held which ensures learning within the service is shared with managers of other services owned by the service provider. Regular management audits are completed and actions completed in response to issues found. A quality of care report is completed every six months, information gathered is analysed and areas for development of the service are identified. The provider has submitted an annual return as required by Regulation.

People can be satisfied they will be supported by a service which provides appropriate numbers of staff who are suitably fit. Care staff have the knowledge, competency, skills and qualifications to provide the levels of care and support required to enable people to achieve their personal outcomes. The manager has suitable numbers of staff are on each shift to support people's needs and ensure they can do what they want when they want. New staff undergo thorough vetting checks prior to starting work in the service. Staff receive an induction specific to their role and management ensure staff receive the support they need through annual appraisals and one to one supervision meetings. Care staff state they feel well supported by the manager and have access to the training they need to meet people's needs, telling us *"I love coming to work every day, I am really happy here"* and *"management are so approachable, they operate an open-door policy".* Training is provided to staff through a combination of face to face and online training. Training records are reviewed and updated to make sure they accurately reflect training compliance. A training needs analysis is completed at each service to ensure staff have the training and qualifications required to meet the specific needs of the people living at the service. Care staff have either registered with Social Care Wales, the workforce regulator, or are in the process of doing so.

People can be confident the service provider has an oversight of financial arrangements and investment in the service so it is financially sustainable, supports people to be safe and achieve their personal outcomes.

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	

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Date Published 03/12/2024