



Clement House



5 Clement Avenue, Llandudno, LL30 2ED



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www.potens-uk.com

Date(s) of inspection visit(s): 15/07/2025

Service Information:

Operated by:	Potensial Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability, Provision for mental health
Registered places:	8
Main language(s):	English
Promotion of Welsh language and culture:	The service provider makes an effort to promote the use of the Welsh language and culture, or is working towards a bilingual service.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

Clement House is located in the centre of Llandudno, very close to local amenities and shops, and local beaches.

People achieve good outcomes because they are supported to do things they enjoy and, where they can, they are supported to make choices about their lives.

People achieve positive outcomes because support is provided in line with their personalised care plans, and the provider ensures daily care, activities and routines meet people's individual needs and preferences.

People achieve good outcomes because the home is a clean, well maintained, calm and relaxed environment, that provides the accommodation people need.

Leadership and management in the home supports people to achieve good outcomes because the provider has good oversight and governance systems in place to identify and implement improvements and develop the service people receive in line with their needs and preferences.

Findings:



Well-being

Good

People achieve good outcomes because, where they can, they are supported to make decisions about their lives and how to spend their day. We saw people moving about the home throughout our visit and spending time socialising with other residents or relaxing in their rooms. People's rooms are personalised with pictures, posters and objects of importance to them, and the manager encourages them to make decisions about how the home is decorated and furnished where possible. People are supported by the provider to access independent advocacy support where required.

People have good well-being outcomes because they are supported to do things they enjoy. Records show some of the younger residents attend a local college during term time, and activity planners are in place for each person as well as a weekly timetable of house activities for people to share together if they wish. The individualised activity planners include staff supporting them to maintain daily living skills such as cooking a meal or tidying their own rooms, as well as leisure activities such as swimming, going to the beach or watching their favourite movie. During our inspection people were supported to make fresh homemade pizza for lunch, and to go out to a local café for lunch. Some people chose to go to a local shop to buy art supplies to use in the afternoon, and we saw them working together in the dining room using animal mask kits they had chosen for themselves. Artwork previously created is displayed in the home, celebrating people's achievements and creativity. The activity timetable reflects a supportive community ethos, emphasising shared experiences within both home and community settings.

Care staff support people in a calm, kind, positive and respectful manner, helping to create a relaxed, friendly and warm atmosphere in the home. We saw staff interactions with people were consistently appropriate, engaged, and positive, demonstrating effective body language and employing distraction techniques when necessary to support people effectively. The provider works closely with their in-house Positive Behaviour Support (PBS) specialist team to develop individualised strategies for people and ensure staff understand how to promote positive behaviours and foster a supportive environment for people. This has resulted in good outcomes for people, including a reduction in challenging behaviours and mood dysregulation.

People maintain good connections with people outside the home by attending regular social and activity clubs, participating in group outings, and having visits from family or friends. The provider ensures people's communication needs are supported as far as possible. Staff have been assigned as Welsh language champions, and support Welsh speaking people to get involved in creating

bilingual signage. The provider has created tailored pictorial tools to aid those with limited verbal communication.



Care & Support

Good

Records indicate people receive support in accordance with their care plans. Positive outcomes for people were seen during the inspection visit. There was a calm and relaxed atmosphere during our inspection, where people and care staff were engaged in activities, daily routines, and scheduled outings tailored to individual plans.

Care plans are detailed and personalised, comprehensively addressing each person's specific needs. Pen-pictures provide valuable background context for certain behaviours and support requirements. Collaboration with the provider's in-house PBS teams has been effective for specific individuals, with no dysregulation incidents reported in the month prior to inspection. The Responsible Individual (RI) is working to ensure all staff members engage fully in the PBS planning process and understand the positive impact it can have for individual residents.

While daily care records are good, occasional gaps exist, such as days with only one recorded interaction rather than the expected two or three. Consistency in record-keeping has been previously identified by the RI and management team through their quality of care review processes, and it is being addressed through team meetings, staff supervision, and relevant training where required.

Medication procedures are followed in the main. Medication is rigorously audited by management, with any errors centrally logged, reported, and addressed through staff meetings, supervision, and competency reviews, to support staff to enhance their practice.

Records show safeguarding training for care staff has improved since the start of the year, with safeguarding on the agenda for regular team meetings. Incident reports are thorough and detailed, with recommended actions following safeguarding issues identified, self-referred to the local authority by the provider, and were noted as implemented during the inspection. Investigations by the RI and the provider's senior management result in appropriate actions such as increased supervision for staff, revised risk assessments and care plans, and professional referrals and involvement. Staff are aware of their safeguarding responsibilities.



Environment

Good

People achieve positive outcomes thanks to a homely and well-maintained environment tailored to their needs. Each individual has a personalised room, complete with any necessary equipment, offering privacy, and a space to relax. Communal areas include a spacious lounge, a separate dining room with a family-style dining table, and an accessible kitchen, all of which we saw being used by people with support from care staff during our visit. Social activities, such as movie nights and craft projects, are held regularly in the main lounge, and we saw people watching TV together at the end of our visit. We also saw people creating craft and artwork together with staff support in the dining room after lunch. Residents' artwork and photos decorate the communal spaces, creating a sense of belonging.

The provider is committed to ongoing improvements in the home, including redecorating communal areas and refurbishing the kitchen to enhance both decoration and functionality. Recent upgrades to the lounge—new flooring, furniture, and improved views of the front garden—have made the space more inviting. Residents enjoy eating breakfast in the new dining area in the lounge bay window.

Health and safety are well maintained and consistently monitored by the provider. Regular health and safety audits, risk assessments, and equipment checks are documented and remotely monitored through a centralised electronic system. This allows the RI and management team to promptly address issues as they arise. Personal Emergency Evacuation Plans (PEEPs) are well detailed and updated as people's needs change.

Technology is used to support people's independence and enjoyment of the home and their time. Many have TVs and personal media players in their rooms, while a first-floor lounge features a large digital screen and games console. The service has implemented software to create bespoke communication boards and visual activity planners, which help people make informed choices and communicate effectively in a way that meets their communication needs.

Efforts are being made to improve accessibility and inclusivity, with bilingual and pictorial signage being created in collaboration with Welsh-speaking residents in the home. This ensures vital information is accessible and communication needs are met for all living in the home.



Leadership & Management

Good

The provider ensures there are appropriate quality assurance and governance systems in place to support oversight and improvements in the service. There have been multiple changes in staff since the start of the year, but the RI visits the service regularly to speak to people and staff, and to review documentation in the service. Reports of their visits and their quality of care review reports to the provider demonstrate good analysis of events, care and support, and audit outcomes. They also demonstrate the RI listens, action plans, and makes improvements in response to their findings and feedback from professionals and people. Records show regular management meetings take place between senior staff and the RI, and staff meetings keep care staff informed of developments and support them in their care roles.

The provider is actively recruiting to vacancies in the service, including the post of registered manager which has been vacant for several weeks. The interim management arrangements have been effective at driving recent improvements in staff supervision and training in the home. New staff receive a 12-week induction following thorough vetting checks and recruitment processes to ensure they are suitable for their role. Staff registration with Social Care Wales, and Disclosure Barring Service checks are monitored and routinely updated by the provider to keep people safe. The provider also ensures consistency and continuity of care by block booking any agency staff used to fill gaps in the rota.

The provider has taken effective steps to address gaps in staff training and skills previously identified by external professional audits and monitoring of the quality of care. They have a system of incentives and measures in place to support staff to complete all the training required for them to competently and safely support people's needs in the home. The RI told us they are delivering a bespoke in-person training session to staff around closed cultures and have already issued a workbook for them to complete in preparation for the session. Records show staff meetings include a wellbeing agenda item to ensure staff have support with this. Staff told us they feel well supported by management and interim management in the home, and that senior staff are approachable and listen to them.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

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