



Inspection Report on

20 Francis Avenue

Colwyn Bay

Date Inspection Completed

21/03/2024

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About 20 Francis Avenue

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Coed Du Hall Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	2 November 2021
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 at Francis Avenue because they feel they are respected and are optimistic they will reach their outcomes of independence. The ethos of the home is to prepare people for independent living as far as possible and the support provided is effective. People live their life as they wish under risk management strategies that respect choices but keep them and others safe. They enjoy friendships and relationships and accessing activities they enjoy. Care staff enjoy their work and have good relationships with people living here; they respect their choices and do what they can to accommodate them.

The home meets the needs of people who live here, with spacious, bright and well-maintained rooms, and facilities that enable them to do their own cleaning, cooking and laundry albeit with support if necessary. The provider is keen to provide the best service and is always looking at ways to enhance the home with quality fixtures and fittings. The manager and RI take pride in the service; they respect and value the staff and provide the training needed to enhance expertise and confidence. They know what is working well in the service and are keen to identify where improvements might be made.

Well-being

People have control over day-to-day life. They can feel confident their views are important, and they are listened to. Provider assessments hold comprehensive information sought from people planning to come to live in the home, and others involved with their care. Their interests, needs, strengths and preferences are captured in this document to inform the plan of care and their choices are respected. People prepare their own meals, sometimes with support, from ingredients they have chosen. They keep their rooms according to their own preferences, including domestic tasks, decoration, and furnishings. Their rights are respected and protected such as ensuring they access benefits that are entitled to, travel cards and registering to vote. People can use the Welsh language if they wish as staff are Welsh speaking. Documents can be provided in Welsh and signage around the home is bilingual.

People are happy and healthy and do things to keep them healthy and active. The service is proactive in seeking ways to promote people's mental health and physical well-being. They keep fit through exercise and have access to a variety of health expertise at the service. Regular reviews of the care plans help ensure people are getting the care they need in the way they need it; care plans change as quickly as necessary to ensure the correct support to help people reach their goals. People told us they are happy living in the home; they live their life how they want to.

People are protected from abuse and neglect because training in safeguarding is mandatory for all staff. We saw evidence that proper processes are followed, and staff confirm their knowledge of the procedures to follow should they be concerned. There are frequent opportunities for one-to-one meetings with staff and residents so people can express their views at any time and surveys are distributed to people using the service so they can have their say about care they receive.

People achieve a sense of belonging because they enjoy relationships with friends, inside and outside the home, and maintain regular contact with relatives. They meet with others when they go to college, attend local leisure facilities; they visit family and friends and plan for their own futures in the community. Everyone plans to live independently with some wanting to move closer to family or partners, and the service aims to provide all the support necessary to achieve this. It helps people adapt and manage challenges so they might become independent and confident and enjoy relationships with people important to them.

Care and Support

The service provider considers a wide range of views and information before deciding whether the service meet the person's needs. They complete an assessment of what the person wants and needs, gathering comprehensive information from the person and everyone involved in their care and support, and reviewing documentation and health information. They then consider whether the services resources and expertise are sufficient to help people meet their desired outcomes. A transition plan includes the person having a trial visit when compatibility can be assessed, and the person can decide whether the place is right for them.

There is an accurate and up-to-date care plan for everyone who lives in the home. It documents each person's needs, their wishes, their preferences, and interests, and is reviewed at least every three months to be sure of continued progress. Key workers and management meet monthly to discuss each person's progress and decide whether the care plan is still effective.

People are provided with the quality of care and support they need because the service is designed in full consultation with the people it serves. People's views are continuously sought and listened to. One person told us they are very happy here. They live how they want to, and staff are respectful towards them. They feel they have progressed and are now better able to manage challenges. We saw examples of outcomes achieved. One person has been able to move out of the home having gained the independence skills to support themselves. The service was able to help this person transition to independent living, helping them set up their budgets and other practical matters. Staff visited them in their new home, and maintained contact so the person knew they had support should they need it. This person is now doing well on their own.

People are supported to access healthcare and other services that maintain their health and well-being. We saw people are supported to take responsibility for their health, to make appointments for themselves and attend these. Health and wellbeing is a key focus of the support provided. Coed Du Hall Ltd has its own health resources such as in house psychiatry, occupational therapy, psychologists, and nurses. Staff are trained to know about individual health needs and are vigilant of potential risks or challenges. There are safe systems in the home for medicines management. Training is mandatory; compliance with policies and procedures is routinely checked and medication processes are audited every month.

Environment

The service provider ensures individuals' current support is provided in an environment with facilities and equipment that promotes the achievement of their personal outcomes. Each person has a spacious, bright bedroom which they have personalised with pictures and other things that matter to them and reflect their interests. There is plenty of storage in the bedrooms and each has ensuite facilities. People have their computers and handheld devices and other things they enjoy in their spare time. There is a games room where people can also store their bikes. Facilities include a laundry which people are encouraged to use independently, house cleaning equipment and a well-equipped kitchen so people can make their own meals. The gardens are well maintained and provide seating for those wishing to be outside. More work is planned to enhance the home and gardens further, such as a calming Japanese themed garden. People told us they love living here. The home is close to a town with cafes, leisure facilities and a college and people in the home take public transport and use these.

The provider keeps the home safe and well maintained. Records evidence regular checks of the electrical installation, fire safety, water hygiene, and gas safety inspection. The service recently gained a level 5 from The Food Standards Agency which is the best it can be. The building is maintained as and when repairs are needed, and the provider is keen to continually improve the place with quality fixtures and fittings. A defibrillator machine is fitted in the entrance hall. The service uses an independent health and safety auditor to ensure optimum safety and compliance with regulations.

Leadership and Management

The governance arrangements in place ensure the service runs smoothly and provides quality care and support to help people achieve their outcomes. The RI (responsible individual for the service) visits the home at least every three months and conducts checks of various procedures and records in the home. They check people are satisfied with the service and are reaching their outcomes. The service aims to ensure people become more independent and this is embedded in the culture of the care. Staff know people are being prepared for independent living and encourage them to do as much as possible for themselves. The RI speaks with people to make sure this is the case.

The provider has effective oversight of the service; they utilise online compliance systems that check procedures are being carried out properly, and an independent agency ensures compliance with health and safety and employment law. Surveys are distributed to gain the views of people and their relatives, professionals and staff and monthly meetings with staff ensure feedback can be sought and views exchanged. Staff and people using the service told us they feel very comfortable speaking with the manager at any time on any matter.

People are supported by staff who are well trained and experienced in the needs of the people they support. We saw a training matrix with a wide range of relevant training, most of which is mandatory for all staff to undertake. The service has an inhouse trainer, so staff receive a quick response to their requests for specific training, and more opportunity for face to face learning. Records show the recruitment process is rigorous, with a range of checks carried out to ensure people are suitable for the post. This is followed by an induction and probation period so potential staff can be sure they are happy with the role and people supported can share their views as to compatibility. Staff told us they're happy working for the service and that management are flexible and respectful of their personal situations. Rotas are designed to ensure a good work life balance which means staff are refreshed when they come to work and continue to enjoy what they do. Staff feel valued and enthusiastic; they see the difference they make because the manager gives them feedback during one-to-one meetings. Staff told us '*(the manager) praises us for what we do well and sets us right if not. We get helpful advice when we need it*' and '*they listen to me they respect me and my knowledge, if I have concern or idea they listen*'.

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

N/A	No non-compliance of this type was identified at this inspection	N/A
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Date Published 20/05/2024