



## Inspection Report on

**Chaseley House Residential home**

**Chaseley House  
26 Whitehall Road Rhos On Sea  
Colwyn Bay  
LL28 4HW**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

19/11/2024

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## About Chaseley House Residential home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Tender Loving Care Limited
Registered places	15
Language of the service	Both
Previous Care Inspectorate Wales inspection	17 February 2023
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 very happy with the support they receive at Chaseley House. People are supported by compassionate and responsive staff who know them well. People make choices about their daily lives. Personal plans are person-centred, reflect people's needs, reviewed and updated accordingly. Activities facilitated by staff are on offer throughout the week.

Staff feel very well supported by management and are provided with training to meet people's needs. There are good governance arrangements in place. The Responsible Individual (RI) visits the home regularly to oversee management of the home and gathers the opinions of people and relatives to help to improve and develop the service. The environment is homely and well maintained.

## Well-being

People have control over their day to day lives and contribute to decisions that affect their life. Personal plans cater for people's preferences. People told us they like living at the home, "*I wouldn't want to be anywhere else.*" People are involved with the improvement and development of the service through regular resident meetings, where suggestions from people are considered and actioned where possible. People have choices around food and activities on offer and care staff listen to people's wishes. Staff ensure call bells are in reach and answered in a timely way. Rooms are well maintained, personalised, clean, tidy and homely. Care records give care staff the instruction required to support people accurately and reviews are carried out in line with regulations. Staff know residents very well and support them to move around safely. People have visitors coming to the home regularly and have good relationships with other people they live with and care staff.

There is a timetable of activities on offer at the service, with a noticeboard on display telling people what activities are happening and when. On the day of inspection, a quiz took place. People enjoy the activities on offer and can choose whether they participate. People can practice their faith if they wish, the service arranges for religious representative to come to the home as and when needed. The service is working towards the Welsh language 'Active Offer', there are Welsh speaking residents and staff in the home, staff are supported and encouraged to attend Welsh courses.

People are protected from abuse and neglect through care staff receiving training in safeguarding and policies and procedures being in place and followed. 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. The service work collaboratively with support agencies.

The lay out of the home supports people to achieve a good standard of well-being. People are encouraged to be independent wherever possible. Strategies for reducing the risk to people while they move around the home are sufficient and the manager and environmental lead have identified potential hazards and 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. People have choice over everyday decisions such as their meals, where they spend their time, clothes they wear and times they wake up and go to bed. Personal plans are personalised, up to date, accurate and regularly reviewed. They detail people's likes, dislikes, preferences and tell staff what people prefer to do for themselves. Robust risk assessments are in place and regularly reviewed. Pre-assessments take place before people move to the service, the manager and deputy manager carefully consider whether people will be well suited to people already living in the service. People receive care in line with their personal plans and risk assessments and care staff are kept informed of important updates using handovers. People told us, *"Staff always have a smile on their face, they know me, and I know them, we get on very well."* Care is provided in a warm-hearted way, by skilled and supportive care staff. Relationships between care staff and people are positive. Care staff told us, *"If I need to spend a long time with a resident, I can. People get what they need when they need it, we can give them the time they need."* Food is well-presented and appetising; people's dietary choices and specialist dietary requirements are well known by staff. People choose whether to eat in their rooms or in communal areas of the service. Staff complete manual handling in accordance with manual handling recommendations.

People have access to specialist advice and support from health and social care professionals. The service escalates health issues in a timely way to relevant professionals. Care plans and risk assessments are updated to reflect professional advice and care staff access appropriate and specialist training to meet specific support needs. The service has two members of staff who are dental champions, and the community dental team visit the service every three months.

Trained care staff administer medication and their competency to do so is regularly assessed. Medication audits are carried out by a medication lead and issues are identified and escalated for the manager to deal with. We discussed the need for medication audits to be more straightforward and for management to complete their own audits to ensure good oversight of medication practices. The manager has assured us this will be actioned. Storage of medication has improved since the last inspection with a designated room being used for medication storage.

## 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. All rooms now have ensuite bathrooms. Décor in the home is homely and bright, people like their rooms. Bedrooms and communal areas are well maintained. There are two communal lounges for people to use, people can socialise in them if they wish or have privacy in their own rooms. People's rooms are clean, tidy and personalised to their own taste with belongings. The gardens and external areas are well maintained, and people are encouraged to use the gardens in warmer months. People access the main home through a securely locked door and visitors are required to sign in and provide identification on arrival.

Cleaning staff were working around the building throughout our visit and all areas were clean and tidy. There are infection prevention and control policies 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 with actions dealt with swiftly by maintenance staff. This is also 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 and gathers the view of people and staff. We have discussed the need for the RI to evidence what records they have reviewed as part of their RI visit and any actions identified. There are regular management audits undertaken with action plans in place to address areas requiring attention. A quality of care review is completed every six months, these identify areas of improvement for the service and actions that will be taken in response, they also summarise the quality of care provided. Regular meetings are held for residents to feedback to managers and the RI gathers feedback directly from people using the service. People told us they can speak to the manager about changes to their care or any issues they have, and action is taken.

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 on duty for each shift to support people's needs. New staff undergo thorough vetting checks prior to starting work in the service and staff receive an induction specific to their role. Management ensure staff receive the support that they need through annual appraisals and one to one supervision meetings.

Care staff feel well supported by the manager, telling us *"They are quite happy for you to raise issues. If there is a concern, they will bend over backwards to solve the problem."* Care staff have the training required to meet people's needs, this is provided to staff through a combination of online and face to face courses. Training records are reviewed and updated to make sure they accurately reflect training compliance. Care staff told us, *"I feel valued because they know my strengths and support me to use them and develop in my role."* 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
<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.

### 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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