



Inspection Report on

Canterbury House

**Canterbury House
77 Dyserth Road
Rhyl
LL18 4DT**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

01/06/2023

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About Canterbury House

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Akari Care Cymru Limited
Registered places	51
Language of the service	Both
Previous Care Inspectorate Wales inspection	27 September 2022
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People's care and support needs are met by staff who treat people in a respectful and dignified way. Staff are familiar with people's individual preferences and assist people in the person's preferred way. Care is provided when it is required, because staffing levels reflect the number and the needs of the people who use the service. Families are involved in decisions regarding their relatives care and their views are included within reviews of the quality of the service provided. Care workers receive appropriate training and support to enable them to do their work well. The environment is clean, well maintained, and secure. People can make their room feel like their own home, so they are as comfortable as possible in their own surroundings. There are arrangements, policies, and procedures in place to protect people's safety. Improvements are required to ensure all staff always follow these, so people are always fully protected from risks within the environment.

Well-being

People are supported to have control over their lives. This is because people, and their families, are involved in creating personal plan documents which records how care and support are to be provided. This means people's voices are heard. Care workers treat people with dignity and respect, which promotes people's sense of value. Families are involved in decisions regarding the care of their relative and their views are listened to. Families are also kept informed of any changes to the needs of their relatives. This means families continue to feel included in the lives of their relatives. Written information is available to inform people, and their families, of the service they can expect to receive and how the service is run. This assists people to make an informed decision about whether the home is the right place for them. The responsible individual monitors the quality of the service and involves people and their families in this process.

People's physical and mental health is protected. This is because care and support are provided by trained staff, who understand people's health conditions, and know how to meet people's care needs. Staff record the care and support provided, and this is monitored by senior staff to ensure people are receiving the right care. Families praise the care provided by the staff and the support offered to them as relatives. Arrangements are made for people to see specialist medical professionals, when this is needed, and staff follow the guidance provided.

Care and support are provided within a suitable environment. The premises is clean and spacious, with a choice of communal rooms for people to spend time with others, if they wish to do so. Policies and procedures are in place to promote health and safety within the premises. However, people's safety is placed at risk when staff do not always follow the guidance in place. The provider is aware this is an area of the service which requires improvement and is taking steps to address the matter.

Care and Support

People and their family are involved in creating personal plans. These records people's care and support needs and how they are to be met. We saw people's care and support needs are recorded within their personal plan, and this document is updated with new information when changes occur. People's individual preferences regarding how they wish to be supported, as well as the outcomes important to them, are also recorded. This assists staff to provide a continuity in the care delivered and enables people to feel they are recognised as a unique person. Relatives told us staff knew their family member's needs well and this provided them with comfort and peace of mind.

Risk assessments are in place to manage known identified risks to people's health and safety. These documents provide information for how staff should reduce and monitor the risks and protect people's health and independence. The support people receive is recorded by staff using an electronic system, at the actual time the care is provided. This helps with accurate recordings and also means senior staff can easily check the care required has been provided.

Relatives we spoke with shared positive feedback regarding the care and support provided. Comments included (staff are) "*patient*", "*caring*", "*brilliant*", "*approachable*", "*intuitive*", "*calm*", "*amazing*". Relatives also told us they felt welcomed when they visited, are listened to and felt the staff understood how difficult it is for family when their loved ones initially move into a care home.

People are supported to access community health services when required. Records show referrals are made to appropriate specialist health professionals when there is need for further advice and guidance. This means people are supported to maintain their ongoing health needs and to stay as well as possible.

Environment

Care and support are provided in a clean and homely environment. People's own rooms are personalised with their own belongings such as framed family photos, soft furnishings and decorative ornaments. Seating areas are provided along longer corridors so people can take a rest if they need to whilst walking around the home. This enables people to continue to have the benefits of walking for as long as they safely can. The provision of communal lounges and dining rooms mean people can choose to spend time in the company of other residents should they want to.

The provider ensures routine health and safety checks are completed within the premises, which means it is a safe environment for people to live in. We could not enter the building without staff checking our identification first and permitting us to enter. The doors to the outside are secure, which protects people living with dementia from leaving the building without staff support. We found the correct procedures are in place to inform staff how they should respond to health and safety risks identified within the environment. However, we saw staff do not always follow the correct procedures and this is placing people at risk of harm. This was discussed with the responsible individual and the manager who were already aware of this issue and were taking steps to address this. While no immediate action is required this is an area for improvement and we expect the provider to take action.

Leadership and Management

People and their relatives can access written information regarding the service provided. There is a statement of purpose document available, which clearly sets out how the service will be delivered and the arrangements in place to support its delivery.

The staffing provided meets the needs of the people who live at the service. Staff rotas show nurses and care workers are deployed in sufficient numbers to ensure people receive their care and support when they need it. During our visit we saw care workers respond to people's needs in a timely manner. Relatives told us there are always staff available when their family member needs assistance. There is a clinical lead nurse in place to provide guidance to the staff, when required, as well as providing oversight of the enhanced level of care some people require. An activities co-ordinator, kitchen, housekeeping and laundry staff are also employed, this means care workers can focus their attention entirely upon delivering care and spending time with people.

Staff working at the service receive relevant training to be confident in their roles and enable them to make a positive contribution to the well-being of people who use the service. Training records show staff are provided with mandatory training, such as first aid, moving and handling and fire safety. Training in specific health conditions such as dementia, autism and diabetes is also provided which assists staff to better understand the needs of the people who they are supporting.

There are systems in place by the provider to continuously monitor the quality of the service provided. Reports are available which show the RI visits the service at least every three months to speak with staff, residents and their relatives and gather feedback about the service. The RI also reviews care documentation and inspects the premises as part of their visit. A quality-of-care review is completed every six months, which involves collating feedback from people and their relatives, staff and other professionals in contact with the service. A report is available to evidence the findings of the review, and this includes how improvements will be made at the service.

There are arrangements in place for the management and leadership at the service. Relatives of people living at the service told us they had good relationship with the management team. People described the management as "*approachable*", "*very open*" and provide good communication. Relatives also shared how management staff had supported their family member to settle at the service when they first moved in. Staff confirmed they felt supported by the senior and management staff at the service.

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
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57	Not all staff have followed the fire safety procedures in place when required. Ensure all staff are familiar with the actions they should take in the event of a fire.	New
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