



Inspection Report on

Plasgwyn Nursing Home

**PLASGWYN NURSING HOME
PENTREFELIN
CRICCIETH
LL52 0PT**

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Description of the service

Plasgwyn is situated in a small village which is close to Criccieth and the sea-side. The home is owned by Cariad Care Homes Ltd; the provider is also the responsible individual. The manager for the home is registered with Social Care Wales (SCW) and is responsible for the day to day running of the home. The home is registered with Care Inspectorate Wales (CIW) to accommodate up to 38 people aged 40 years of age or over and providing them with personal and/or nursing care. The home was full on the day of inspection.

Summary of our findings

1. Overall assessment

Plasgwyn provides a homely, caring environment for the people living there. The home is well maintained, clean and has bright, modern décor. Providers are committed to continually improving the service and has received good feed-back from consultation with people using, and connected with the service. The home is part of the local community and culture and provides an active offer of the Welsh language. The home has been successfully registered under The Regulation and Inspection of Social Care Act (Wales) 2016 (RISCA).

2. Improvements

The provider is looking to future proof the service as far as possible and is continually looking at recruitment, training, induction and support of staff. Staff induction has been performed according to SCW frameworks and new staff induction books have been marked by an external examiner to ensure a neutral and balanced view-point. New rounding chart records have been introduced, staff record date, time, and type of care given as well as health monitoring such as amount of fluids/diet taken by a person daily and any actions taken.

3. Requirements and recommendations

The service is compliant to legislation. Section five of this report sets out our recommendations for improving the service. These include:

- A suggested feed-back section in consultation reports.
- Risk assessment of rubber glove storage.

1. Well-being

Summary

People are treated with warmth and respect, their cultural and first language choices acknowledged. People are encouraged to be as active as they are able to be. People can be assured of having sufficient nutrition and hydration. The service is compliant to the regulations regarding well-being.

Our findings

People are treated with dignity and respect. We heard staff speaking with people in a warm, friendly manner and given choices of where to sit and what they wanted to do with their day. Staff were able to converse with people in Welsh as appropriate. People's language choices were also documented in their personal care plans. A person's relative told us in Welsh that communication from the home was good, especially when their relative was unwell, they told us; "*Da iawn yma. Wedi settlo yn dda. Mae nhw'n dda iawn am adael I ni wybod os di hi ddim yn dda.*" People can be confident of having personal choices.

People are able to be as active as they choose to be. We saw a planned calendar of activities, a board in reception advertised events for the week. A soap making demonstration was in progress the day of our inspection, people said they enjoyed it and were able to purchase soaps if they wished. The responsible individual (RI), told us of a new mini-bus bought for the home. Families were able to borrow the wheel-chair friendly bus to take their loved ones out for the day and simply replace the fuel used on their return. An activities co-ordinator worked in the home three days a week, the manager told us of another activities person recruited to cover the following three days providing extra cover for activities provision for people in the week. People are encouraged to have interests in the home.

People have sufficient nutrition and hydration to maintain their health. We saw a four week rolling menu in progress, people could have a choice of breakfasts, full meal and dessert at lunch, afternoon tea, supper, and evening snack and could access a snack at night if required. We saw from people's personal plans that people's weight was monitored monthly, referrals were made to a dietician in a timely way if required. Special diets were catered for and detailed in people's personal plans. Care given rounding sheets were seen to be completed on a daily basis, monitoring people's intake of diet and fluids, actions taken were detailed where deficits were found. People told us the standard of food was very good. A person's relative told us the food was excellent, "*Mae'r bwyd yn ardderchog.*" We saw from the RI's six monthly consultation with people using the service that a 100% satisfaction rate had been recorded for the food. People are happy with the quality of food offered.

2. Care and Support

Summary

People have appropriate care in a timely manner. People are central to their personal plan of care. People's liberty is protected in the home. The service is compliant to the regulations concerning care and development.

Our findings

People are cared for appropriately. People's personal care records showed people's needs were regularly assessed using nationally recognised tools for such issues as nutrition, moving and handling and the risk of falls. Common risk factors commonly associated with care such as pressure sores were assessed and reviewed on a monthly basis. We saw appropriate, timely referrals to specialist health care professionals if extra advice was required for people, for example, with diet or moving and handling needs. Advice from specialists was carefully documented and incorporated in people's care plans. We saw a person with a sore on their foot had been assessed by a tissue viability specialist, clear instruction of how to dress the sore was contained in the person's care plan and progress monitored in a dressings file. We saw positive comments had been received regarding care in the six monthly consultation survey. Families and people living in the home responded positively, an example being a family thanking the home for their loved one's time in the home and care given, "*Rydym fel teulu yn ddiolchgar am y gofal a dderbynwyd yn ystod yr amser ym Mhlasgwyn*". People's health is monitored in the home and the service is proactive regarding their needs.

Care is planned according to people's needs. We saw that personal plans held information regarding people's likes, dislikes and history. Care plans named the person concerned, their care issues, and gave clear instruction to staff regarding what was to be done. People's wishes regarding language choice and end of life care were recorded in their care files. People told us their needs were identified and cared for, a person living in the home told us; "*Staff are kind here, we are well looked after.*" People are central to their plan of care.

People's liberty is protected. We heard staff offering people choices of what to do with their day. People told us they had choices and could get up and go to bed when they liked. We saw that where people lacked capacity to leave the home unassisted, a timely referral was made to the Deprivation of Liberty assessors (DoLS). Re-referrals were also made appropriately to ensure the person's liberty was constantly under review. People without a nominated family member or attorney to advocate for them were able to access Independent Mental Capacity Act (IMCA) advocates via social services. People's rights are respected by the service.

3. Environment

Summary

People live in a homely environment which is appropriate to their needs. The provider is mindful of safety issues and security. The service is compliant to regulations regarding the environment.

Our findings

The home is welcoming and well maintained. The home was clean and tidy with modern, fresh décor. Outside spaces were available for people to sit out in good weather, a ramp to the garden was seen for people with mobility problems. People could personalise their rooms with their own possessions. People told us they liked their rooms and were, *“nice and warm.”* The RI told us of a rolling programme of re-decoration for the home and discussions were underway for new wet-rooms as many people favoured showers over baths. The kitchen had a hygiene rating of 5 from the environmental health agency, this is the highest score possible. People live in an environment which is appropriate to their needs.

The service is mindful of people's safety. Visitors were asked to sign in and out of the home for security and emergency evacuation reasons. We were asked for our identification before entering the home. People had Personal Emergency Evacuation Plans (PEEP) detailing their mobility needs in the event of an emergency evacuation. Fire alarms and safety checks were performed weekly. Equipment used for people's care, such as hoists, were regularly serviced to ensure their safe use. People and staff's personal information was kept in a secure manner in locked cupboards and offices. We recommended the storage of gloves be risk assessed, we saw they were kept at accessible height, in the open, in corridors and rooms. This could pose a choking risk for a person lacking capacity who may try and ingest them. Providers are committed to continually mitigating risks where able to ensure the safe care of people.

4. Leadership and Management

Summary

People benefit from being cared for by staff who are well trained and supported. Employment practices are robust. Providers are committed to improvement through continual measurement of the quality of care provided. The service is compliant to the regulations as regards leadership and management.

Our findings

Staff are sufficiently supported and trained. The training records demonstrated a robust rolling programme of mandatory and special interest training. Staff told us they were given plenty of training for their role and were supported in gaining higher qualifications. Staff supervision records were up to date. Nurses supervised nurses as per their governing body's requirements. Staff told us that team working and communication with management was good in the home. People benefit from being cared for by staff who have up to date knowledge and support in their role.

Recruitment practices are robust. We saw staff files were organised and contained required checks to ensure staff were suitable to work with vulnerable adults. The service ensured a good induction period for new staff to ensure their familiarity with people and health and safety issues. An external examiner had been used to mark induction workbooks (SCW framework of induction), to ensure fairness and balance. The home is able to recruit a large proportion of local workers who are bilingual. People can be confident of good staff recruitment practices.

The service is tested to ensure quality of care. The RI had performed a six monthly consultation survey as per the RISCA regulations and visits the service on a daily basis. They are aware that an annual return report will also be required. We recommended they add a comment area in the survey results report to demonstrate any actions taken in response to people using or connected to the service's comments. There were several audits conducted to ensure the quality of care such as care plan reviews, administration of medicines, infection control, the results of which were fed back to staff in meetings to recommend any required improvements and congratulate them on areas of good practice. People can be assured of a service which is continually improving and ensuring good standards.

5. Improvements required and recommended following this inspection

5.1 Areas of noncompliance from previous inspections

None.

5.2 Recommendations for improvement

We recommend the following to encourage good outcomes for people:

- We recommend a feed-back section in the consultation reports concerning service user views (conducted six monthly as per regulations). This would demonstrate the service's commitment to listening to people's views and what solutions have been instigated (if appropriate).
- We need to be satisfied that rubber gloves are kept safely and recommend a risk assessment be completed.

6. How we undertook this inspection

This was a full, unannounced, post-RISCA registration visit conducted according to our schedule. We visited the service on 18 February 2019.

The following methods were used:

- We spoke with the responsible individual, manager, nurse, two care workers, relative and two people living in the home.
- We used the Short Observational Framework for Inspection (SOFI 2). The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.
- We toured the home and facilities including a random selection of people's rooms.
- We looked at a wide range of records as kept by the registered service and concentrated on; four people's care files, four staff files, staff rotas, training and supervision records, responsible individual reports, audits, activities, menus, rounding charts, fire checks and statement of purpose.

Further information about what we do can be found on our website:

www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	Cariad Care Homes Ltd
Manager	
Registered maximum number of places	38
Date of previous Care Inspectorate Wales inspection	14 June 2018.
Dates of this Inspection visit(s)	18 February 2019.
Operating Language of the service	Both
Does this service provide the Welsh Language active offer?	This is a service that provides an active offer of the Welsh language. It provides a service that anticipates, identifies, and meets the Welsh language and cultural needs of people who use, or may use, the service.
Additional Information:	