

Inspection Report on

Quality Care (Wales) Limited

QUALITY CARE (WALES) LTD GLAN RHOS LLANFAIRPWLLGWYNGYLL LL61 6TZ

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

22/10/2019



Description of the service

Glan Rhos is a nursing home, which is located in a rural location close to Brynsiencyn village on the Isle of Anglesey. The service provides care and support for up to 52 people, 41 of whom may receive nursing care. At the time we inspected 50 people were living at the service.

The service is owned by Quality Care (Wales) Limited. Helen Ombler is the responsible individual overseeing the service. The manager is registered with Social Care Wales.

Summary of our findings

1. Overall assessment

People receive a good standard of care and support and are happy living at the service. There are plenty of opportunities for people to engage in different activities as a group as well as being offered one to one time. Staff work well as a team and feel supported and valued in their roles. Staff offer continuity of care, support and build positive relationships with people and their families.

2. Improvements

Since the last inspection people and relatives are contributing to personal plans which is documented and is an ongoing process.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. These include the following:

- Evidencing monthly reviews of personal plans and signatures and dates on assessments.
- Information about respite care provided to be included in the Statement of Purpose.
- A separate policy in place for the admission and commencement of service.
- Storage of equipment.

1. Well-being

Our findings

People have control over their day-to-day lives. The matron informed us that apart from themselves, all staff spoke Welsh and most of the people living in the home were Welsh speaking. People told us they felt listened to and action was taken to address any issues they had. A person and their relative spoke about arrangements being made for them to move back into their own home. A member of staff said they had been helping this person with exercises to increase their range of movement and they had "fantastic perseverance". One person had an iPad so they could stay in contact with their family member who lived abroad and staff ensured this was kept fully charged and ready to use. Read and sign sheets were being used to evidence people and relatives involvement in their personal plans. People speak for themselves, their individual circumstances are considered and they are able to contribute to decisions affecting their lives.

People are supported with their social wellbeing. The matron told us an activities coordinator was employed full time. We saw seven people, two relatives and staff in one of the lounges playing a game of bingo which was being called bilingually. There was lots of laughter, joking, chatting and prizes being won. Following this the activities coordinator was sat with a person making Halloween creatures which were to be given as presents to the local nursey children who visited once a month. We saw photos of people and the children interacting and playing games together and individuals talked about this. A fun day had been held on the 28 September 2019 with over 200 people attending. There was a notice on the wall advertising a 30th anniversary of the service tea party on the 1 November 2019. We saw a collection of photographs showing people participating in various activities including art and gardening. The activities coordinator also visited people who preferred to stay in their rooms and had helped them plant bulbs and watering these which provided opportunities to engage and have conversations with them. One person told us Glan Rhos was a "happy place, staff happy, good atmosphere". People are active and do things that matter to them.

People live in accommodation, which is suitable. People were sat in both communal lounges and were able to spend time socialising with others as well as having access to quieter areas if they wanted to. Bedrooms we saw had been personalised, reflected peoples own tastes and preferences and made them homely. People live in a home which best supports them to achieve their well-being.

2. Care and Development

Our findings

People's care and support needs are assessed to ensure their individual needs can be appropriately met. The matron explained the process they followed to ensure relevant information was gathered prior to admission. We saw pre assessments completed by the matron, or a clinical lead nurse, which recorded medical conditions, medications and any other relevant assessments in place. The Statement of Purpose, service user guide and contract included some information about assessments and admission into the home. There was not a separate, specific admissions and commencement of service policy and procedure in place, which needs to be addressed. We spoke about respite care with the matron and we were told that arrangements for this were different, information was not always easy to obtain from others and communication could be improved prior to people's stay at the home. The service considers a wide range of views and information to confirm it is able to meet each individuals needs and supports them to achieve their own personal outcomes, however improvements with obtaining information prior to people coming in for respite care is needed.

People are supported by staff who understand them and are able to meet their needs. We looked at personal plans which recorded information including language preferences, any problems with communication, what people liked to be called and how to meet their care and support needs. Staff told us people had a good quality of life, were well cared for and they communicated with individuals and their relatives to get to know them better. One staff commented about the people living at the service as "they are my family". Staff we spoke with were consistent in their responses as to how care and support was offered to people. The activities coordinator told us they had met with people and completed "getting to know you" forms so that activities could be tailored to suit their personal interests, skills and abilities. People's individual needs and preferences are understood.

People receive the right care at the right time to stay healthy and well. The matron told us the doctor visited the home weekly and they could ring them if any issues arose in-between visits. Records were kept of contact with other professionals, visits carried out, advice given, communication with relatives and personal plans informed staff when to liaise with professionals. Team leaders provided feedback to the nurses twice a day informing them of any problems or concerns. A team leader spoke about how well this worked and was enthusiastic about carrying out their role and responsibilities. There were systems in place to monitor information regarding infection control, wound management and falls, resulting in action plans to further improve the service people receive. Needs assessments had been carried however these were not always signed and dated by the person completing them. Dates to evidence monthly reviews on personal plans and other assessments also needed to be consistently recorded. This was discussed with the matron and manager who would address this with staff. People access healthcare and other services.

3. Environment

Our findings

People live in a home, which is personalised and homely. We saw that people's rooms had been personalised with photos and their own belongings. One of the smaller lounges had a kitchen area in it so that families could come in and spend time together there if they wanted to. People were able to eat their meals on tray tables in the main lounge which they preferred to do rather than eating in the dining room. We were told that changes were being considered to making the dining room a more inviting place for people to want to use. People live in an environment, which promotes independence and helps them achieve their outcomes.

People live in a home, which is safe and well maintained. We saw Personal Emergency Evacuation Plans (PEEP's) had been completed and reviewed in their files. We looked at fire information. The last fire drill had been carried out on the 28 August 2019 and we saw that checks had been carried out on portable fire fighting equipment, fire alarm and detection systems, emergency lighting tests and fire doors. The maintenance book recorded any issues and the actions taken to address them. The matron told us that rooms were being updated and new floors and furniture were being purchased. We found equipment was being stored in communal bathrooms and this was discussed with the matron and manager. They told us this had already been identified as an area which required improvement and arrangements had been made to remove equipment. We also noticed that some items were being stored in ensuites which should be addressed to ensure people's privacy and dignity. People benefit for a service where risks to health and safety are identified and action is taken to reduce this.

4. Leadership and Management

Our findings

The service provider ensures the Statement of Purpose accurately describes the service people receive. The Statement of Purpose was detailed and described the service which we found was being provided to people as we evidenced this through discussions, observations and documentation seen during our visit. We found that more information about people staying at the service for respite care was needed and we discussed this with the manager to ensure people knew and understood what to expect from the service. People are supported in line with the Statement of Purpose, however more information about respite should be included.

People are protected by recruitment checks. We looked at staff files which evidenced recruitment checks were being carried out including Disclosure and Barring Service (DBS) checks and PIN checks for qualified staff. We noticed that one staff member had submitted a Curriculum Vitae (CV) instead of completing their employment history on the application form. We discussed this with the manager who told us that they request all new staff to complete application forms which also requests reasons for leaving employment. References for one person were not seen to be held on their file and we were assured this would be checked on and obtained. People receive support from staff who are suitably fit to provide care and support for them, however all information should be held on their file.

People cared for by staff who are supported and developed in their roles. Staff felt supported and told us "staff work well together", "I love it here" and "everyone gets complimented, thank yous and gratitude" and "I absolutely love my job". Minutes of team meetings, supervision records and discussions with staff confirmed they were supported to carry out their roles and responsibilities effectively. A team leader commented team meetings were "useful, any problems get solved" and it was a "good idea for everyone to get together as well". Staff we spoke with felt able to raise any concerns or issues with the manager and responsible individual and they would be listened to and action taken. A training calendar showed what training staff had completed or were due to attend. Staff spoke about the level 2 or 3 qualifications they had achieved or were in the process of completing. A member of care staff told us there was always training going on they had been on a manual handling course twice and three different dementia courses. Courses attended by nurses had included training on dialysis, continence, bowel, nutrition and palliative care. People can achieve their individual personal outcomes because staff are well supported and trained in their roles.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None

5.2 Recommendations for improvement

The following are recommended areas of improvement to promote positive outcomes for people:

- The service should ensure that monthly reviews of personal plans and assessment are recorded and signatures and dates on assessments.
- The service should review the Statement of Purpose to include information for people staying at the service for respite care.
- The service should ensure that communal bathrooms are accessible and suitable arrangements made to store equipment and other items.
- The service must have a separate policy in place for the admission and commencement of service.

6. How we undertook this inspection

A full inspection was undertaken as part of our inspection programme. We made an unannounced visit to the service on 22 October 2019 between 10:30 am. to 17:10 pm.

The following methods were used:

- We spoke with five people living at the service and five relatives.
- We held discussions with two care staff, a team leader, a nurse, the matron and the manager.
- We looked at a wide range of records. We focused on three personal plans and associated documentation, three staff files and training information, team meeting minutes, activities programme, admissions policy and fire and maintenance records.
- We examined the Statement of Purpose (SoP) and compared it with the service we inspected. This sets out the vision for the service and demonstrates how, particularly through the levels and training of staff, etc., the service will promote the best possible outcomes for the people they care for.

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 |
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| Service Provider | Quality Care (Wales) Limited |
| Manager | The manager is registered with Social Care Wales |
| Registered maximum number of places | 52 |
| Date of previous Care Inspectorate Wales inspection | 27 November 2018 |
| Dates of this Inspection visit(s) | 22 October 2019 |
| Operating Language of the service | Both |
| Does this service provide the Welsh Language active offer? | The service provides an active offer of Welsh |
| | meaning that people can converse, and live their |
| | lives through the medium of Welsh without |
| | having to ask. |
| Additional Information: | |
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