



Inspection Report on

Plas Eleri Care Home

**Rhyl Road
Denbigh
LL16 5SU**

Date Inspection Completed

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About Plas Eleri Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Atlantis Medicare Plas Eleri Ltd
Registered places	34
Language of the service	English
Previous Care Inspectorate Wales inspection	07 August 2019
Does this service provide the Welsh Language active offer?	No

Summary

People are happy, receive good support and have positive relationships with staff. Staff are kind in their approach to care and support. Staff feel supported by management, but records indicate staff supervision is not meaningful and this requires development to promote best care practices and to ensure staff know their role and responsibilities. Investment to develop staff is required to ensure staff have the necessary skills and knowledge to meet the needs of the people in their care; the manager is addressing this.

Systems are in place to assess risk and keep people safe. The responsible individual (RI) oversees the service to ensure it is managed well, but communication between the registered provider and the RI requires improvement so people are confident the service is managed with due care, competence and skill.

Well-being

People have control over their daily life. People's preferences and personal history is part of the care planning process so staff gain an appreciation of what is important to the person to meet their individual needs. People told us they are happy and can do what they enjoy. Systems are in place to ensure people's rights are upheld. People have access to advocacy services and a multi-disciplinary team approach ensures decision-making is in people's best interests. Staff are receiving training to ensure they are up-to-date. As part of quality assurance measures views are sought so people and their representatives help to shape the service.

People's mental health and emotional well-being needs are met. People receive support to keep in touch with their family and to help them positively occupy their time. Referrals to appropriate healthcare professionals ensure review of people's needs so they receive the care and support they need. Staff whose first language is Welsh are employed and other staff use simple Welsh phrases to meet people's language needs where possible.

People are protected from abuse and neglect. Some staff are trained in safeguarding and so can recognise abuse should it occur and report accordingly. Policies are in place to help staff report safeguarding concerns. Deprivation of Liberty Safeguard (DoLS) applications ensure people's rights are upheld and decisions are made about their care and support in their best interests. The home is secure and a system is in place to help keep people safe.

People live in a service, which meets their needs, but people living with dementia are disadvantaged through lack of innovative design to create a dementia care friendly environment, which promotes interest, independence and well-being.

Care and Support

The extent to which people receive the care and support they need, which considers their wishes, aspirations, management of risk and specialist needs. People's care plan record shows people's preferences so staff know what matters most to an individual. Care plans show people's needs, but systems to assist staff in providing appropriate care require development, the majority of information is up-to-date so people's needs are known. Risk assessments are undertaken and records to monitor care to identify progress and / or deterioration are completed. For example, a record shows regular review of a person's skin care needs and improvement. Staff apply skin care treatments, but records show a professional does not always prescribe the treatments to ensure they are suitable to meet individual needs.

Individuals have access to healthcare and other services to maintain their health and well-being. Staff make referrals to seek advice to meet people's changing needs. We saw email correspondence and referral forms, which show people have access to ophthalmology, dieticians and podiatry. Records show professionals review people's needs. Feedback from professionals is positive about people's care and support, some feel record-keeping could be improved to ensure any change in need is managed in a timely way. The manager discusses record-keeping with staff to improve this area, which records support. A member of staff engages people in activities creating fun and interest. People told us they have access to professionals, medication when they need it and staff support them to keep in touch with their family. People said they are "*Happy and staff are kind*".

There are mechanisms in place to safeguard people. Essential information for staff who do not usually work in the home is available, so they know how to meet individual needs. Records show information about people is shared with staff at the beginning of a shift so staff are up-to-date with people's needs, which we also saw. Policies and procedures are in place, so staff know how to safeguard people. Deprivation of Liberty Safeguard applications help to uphold people's rights and formulate part of their care plan. For one person, records show a pharmacist and an advocate are involved to ensure decisions made are in the person's best interests.

Extent of sufficient supplies for people's care and support needs. There is sufficient stocks of personal protection equipment. The manager confirms there are sufficient stocks, supplies and food. Staff offer snacks and drinks on a regular basis.

Environment

The extent to which facilities and equipment promote positive outcomes for people. Bilingual signage highlights areas of the home to help people find their way around, to promote their independence. The home is clean and warm and new bed linen improves people's comfort. There is a maintenance record, which shows improvements and a person is responsible for maintaining the home. A record shows works planned to create a new compound area to store waste. Internal questionnaire responses are positive about facilities rating them as 'Good'; a couple of responses indicate lounge areas need upgrading. More innovative design is required to create a dementia care friendly environment to promote positive outcomes for people. People told us they are happy living here and one person said, "*It is a smashing home*".

Risks to health and safety are identified. Equipment and utility safety checks such as hoisting equipment, the passenger lift, water and gas safety checks are undertaken and are in date. Fire drill and alarm records are up-to-date. Information relating to the Control of Substances Hazardous to Health Regulations (COSHH) is available for staffs use to help minimise risks. People have an individual personal emergency evacuation plan, which provides key information in the event of an emergency to assist staff and emergency services in evacuating people safely. Some staff have completed first aid, Health and Safety, COSHH and manual handling training so have knowledge and skills to help keep people safe. Security measures are in place to prevent unauthorised access into the home; visitors to the home sign a book as part of good fire safety practices.

Leadership and Management

The extent to which governance arrangements are in place to support the running of the home to provide quality care and support for individuals to achieve their personal outcomes. The RI visits the home weekly, which the manager confirms and they produce a report to reflect their satisfactory regarding the management of the home. A report shows staffing matters, training, maintenance, improvements and feedback from relatives' is sought to help shape the service. The manager is currently reviewing peoples' feedback to understand what the service does well and where improvements are required. Feedback about care and support, staff, facilities, services and management is very positive.

The extent to which the service provided is in accordance with the Statement of Purpose (SoP). A SoP is available, which tells people about the care and services they can expect to receive, this needs review so people have up-to-date information to help their decision-making. For example, the SoP stipulates '*All staff as standard have specialist dementia training*', but the training record shows very few staff have completed this and information is out-of-date as it refers to old organisational names.

The extent to which staff are suitably trained and supported. Staff complete training, which staff confirm, but the record shows training is not up-to-date. To address this the manager has delegated this responsibility to a member of staff who is qualified to deliver training to ensure staff become up-to-date. Staff receive supervision, but supervisions are not meaningful, which the manager confirms. Staff feel supported by management and their colleagues. The RI and manager told us night-time visits to supervise staff practice are undertaken, but there are no records to support this.

The extent to which the service provided has oversight of financial arrangements and investment in the service so that it is financially sustainable. CIW have completed regular monitoring calls with the manager and the RI who confirm they have sufficient stocks, supplies, PPE and staff to effectively meet people's needs. Financial records are available, but we are waiting for more up-to-date accounts to review these. The RI has oversight of the daily running costs of the home, but has no insight into the overall financial running of the service, which is an expectation. Ineffective communication between the RI and the registered provider prevents the RI from effectively fulfilling their role and responsibilities; this requires improvement so people are confident the service is managed well.

Areas for improvement and action at the previous inspection

None		
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Areas where immediate action is required

None	
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Areas where improvement is required

None	
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