



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru  
Care and Social Services Inspectorate Wales

# Inspection Report on

**Trosnant**

**Park Road  
Ruthin  
LL15 1NB**

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## **Description of the service**

Trosnant Care Home is within walking distance of Ruthin town centre. The home can provide care for a maximum of 12 people aged 65 years and over. The registered provider and registered manager is Anna Jones (registered person).

## **Summary of our findings**

### **1. Overall assessment**

People are supported to receive individualised support in a clean and comfortable environment. All staff work well as a team to enhance the lives of the people living in the home.

### **2. Improvements**

The following improvements have been made since the last inspection:

- Disclosure and barring checks (DBS) have been completed for all staff.
- The statement of purpose and service user's guide have been updated to reflect accurate information.

### **3. Requirements and recommendations**

Section five of this report sets out our recommendations to improve the service. These include care planning and record keeping.

# 1. Well-being

## Summary

People receive a service to meet their own individual needs and preferences. They have support to ensure they can take positive risks in a safe way, helping them to keep their own level of independence. Interaction between people and staff and amongst people living in the home is warm and affectionate. People receive care through their chosen language as the majority of staff are Welsh speaking.

## Our findings

People have support with leisure and recreational activities and to maintain contact with family, friends and the local community. A family member told us the activities offered were very good '*Activities provided to stimulate and entertain residents in line with their needs*'. Care plans and risk assessments carefully recognised how individual needs could be met safely. One person's care plan showed they were supported to access the community independently and safely. Staff had supported them to use a mobility scooter by helping them to get the right insurance and ensuring they could use it safely by going around the local area with them. They showed them where the dropped curbs and safe places to cross the roads were. Staff told us how they supported people to maintain relationships with friends, family and the local community. Each person's needs were met in a different way. For example, ensuring that people who went out independently had a mobile phone to maintain contact so they could ask for and receive help if they needed it. We saw one person receiving a call on their mobile phone from a family member and staff helping them to answer it. During our visit, we saw one person was supported on a one to one basis to visit the shops. The management reviewed a range of risks each month for each person and changes were made where needed; this meant that care plans were person centred and supported people to maximise their independence. People receive support to help them reach their potential, keep their independence and, where appropriate, to take positive risks.

People who live in Trosnant have a sense of belonging through positive relationships with staff. We saw staff members treated people kindly, with dignity and respect. We saw staff members and people living in the home interacting in a warm and familiar manner. People we talked with spoke fondly of all staff and told us that; "*nothing is too much trouble.*" A relative told us how they were made to feel welcome and they felt that the home; "*is like one big family*". A visiting health care professional said in a completed questionnaire '*Staff are very helpful and welcoming, amazing relationships with residents*'. Staff told us visitors were welcomed and that they were made to feel at home and could receive hospitality either in the communal areas or in private if they wished. We saw family members visiting and they interacted with all the people living in the home, which helped to maintain a family atmosphere. We also saw another person used the dining room for a visit from a friend for more privacy. One person's care plan showed us how they were kept safe when they did not want certain people visiting and this was managed in a positive way. People feel they belong and have safe, positive relationships.

People living in the home are able to receive support in their preferred language. We saw assessments that recorded which language people were more comfortable receiving their support in, Welsh or English. We heard people speak to staff and one another in both Welsh and English in a natural manner. Many people who lived in the home and care staff

were bilingual. Some people had told us in their questionnaires that there was not always enough Welsh language television being shown. The manager told us that people living in the home had choice about what they watched on television and when, and we observed this to be the case. The manager also told us that people had the option of watching their own television in their rooms if they preferred to watch another channel. We saw televisions in each bedroom and we heard staff asking people about their television preferences in the lounge. People can be confident that they are able to receive a service in Welsh.

## 2. Care and Support

### Summary

People in Trosnant receive individualised support, in the way they want it. They are supported to maintain their health and well-being.

### Our findings

People are as safe and well as they can be because they receive proactive, preventative support. We were told that before moving into the home, people's needs were assessed to ensure the staff team could meet their needs and they would be compatible with others already accommodated. Individual care plans were developed, and we saw they were personalised. However we noted these could be improved slightly, to contain more detail on how people should be supported with specific health needs such as asthma or mental health conditions. We saw some people had signed their care plan to show they agreed to it, but this was not always the case. We reminded the registered person this was a good way of demonstrating people were involved in saying how they wanted their care provided. People's care records indicated that they were regularly seen by a range of professionals, for example district nurses, doctors, community psychiatric nurses and a chiropodist. We saw that if a person's health had deteriorated the service had been quick to call in relevant professionals to address the health issues. A family member said the home were very good at arranging for people to be seen by health care professionals, one said *'staff know the nurses and mum's needs to help healing and comfort'*. A health professional was positive about the care provided for people in a completed questionnaire. They said communication between them and the home was very good and the service followed their instructions well. Records evidenced that key health areas were monitored daily, for example ensuring people took care of their oral hygiene, and checking for pressure areas. A family member said what they liked best about the home was *'The exceptional care which is provided by staff, which includes all aspects of mum's care to ensure her well being. I really can't fault this.'* People receive the right care, at the right time, in the way they want it.

People have regular reviews, so care plans are up to date. People's care plans were reviewed monthly. The reviews made it clear what had changed which would help staff to be up to date with understanding people's needs. Care files also contained relevant risk assessments, including falls assessments. We saw they were updated to reflect falls that had occurred, to help reduce the risk of the same thing happening again. We observed interactions which demonstrated care staff knew people well and how to support them. One person who lived in Trosnant said in the questionnaire *'Quality of care is excellent. The staff are friendly and caring and can't do enough for me. Atmosphere is homely and the food is excellent. If I need anything I just have to ask.'* People's individual needs and preferences are understood and anticipated by the service.

### 3. Environment

#### Summary

People are supported in a safe clean, comfortable and homely environment.

#### Our findings

People live in safe, clean and comfortable accommodation. We saw that the physical environment was maintained to a good standard and was fresh and clean. Completed questionnaires commented on the environment being '*homely*'. One person said what they liked best about the home was '*always a welcome, warm and clean...*' Everywhere we viewed was warm, clean, tidy, and comfortably furnished. People had personalised their rooms to varying degrees with their own pictures, ornaments and furniture if wished. Some people had chosen to bring in their own bed linen, which provided a sense of familiarity and individuality. We saw that people were comfortable and relaxed with their own things around them, including having some items in the communal areas if they chose. We recommended free standing wardrobes be fixed to the wall to remove the risk of them being pulled over.

People had opportunities to meet communally. There was a lounge that had a range of seating and a large television for people's use. The dining room was laid out so people could enjoy a homely atmosphere, with most people sitting around a large table, which encouraged discussion. People could use the dining room when not in use for meal times to meet with visitors in a quieter, private space, however apart from this space, if people wanted a private place to meet visitors they had to use their bedrooms.

People had access to safe, outside spaces. There was a large and well maintained paved garden area people could access and sit out in if they chose. There were pots and space for growing things, for example we were told one person who lived in the home grew beetroot this year, and the service planned to make a bigger area for use in 2018.

People feel safe in Trostnant. The main door is kept locked, and we had to ring the bell to gain entry from a staff member. We were asked for proof of identity and asked to sign in and out of the visitor's book. People who lived in the home were free to come and go as they pleased, encouraging people's independence.

People live in accommodation which meets their needs and helps them to achieve a sense of well being.

## 4. Leadership and Management

### Summary

People understand the service offered and are involved in assessing the quality of care provided. People are supported by care staff who are well trained and well lead.

### Our findings

People are clear about what the service provides. The statement of purpose had been reviewed in March 2017. It was comprehensive, and we saw the aims and objectives were actively implemented. Some people told us they thought the home's information pack was good, and another person told us the information was *'supplemented by additional verbal information given by the owner. All questions were answered.'* We advised it should include information on the service's position on the active offer of Welsh and the registered person told us they would revise the document.

Care staff are valued and well supported to carry out their role. We saw there was a stable staff group, some of whom had been working in Trostnant for over ten years, which helped to provide consistent and continuous care and fostered confidence for people. A visiting professional told us in a questionnaire what they thought particularly good about the care home was *'regular team of caring staff who know their residents well'*. We saw that a recently recruited staff member had a satisfactory DBS check completed, but only one reference had been received; we reminded the registered person that two are required. All care staff had a nationally recognised qualification in care and received regular, on going training. We saw care staff had received refresher training in manual handling, medication administration and first aid, for example. Staff told us they felt well supported by the registered person, and that everyone worked well as a team; we observed this to be the case. We saw evidence staff had supervision on a frequent basis, as well as being able to approach the registered person informally as they were usually present in the home or available on call. All staff employed at the home work well as a team with shared values of enhancing the lives of people living there.

The service has a quality of care review process that takes into account the views of people and their families. We saw a quality assurance assessment review dated 2016, based on an assessment which took place in November 2016. This evidenced people who lived in the home, their families and professionals were consulted and showed people thought their care and support was either good or excellent. We advised the review should identify actions planned or required to further improve the service. The registered person had a regular presence within the home, and we saw they had good communication with people who lived in the home, family visitors and care staff. One family member told us in a questionnaire that they had not had cause to use the home's complaints procedure and *'if I were to have any complaint's I feel I could freely speak to the staff'*. We were told there had been no complaints since the previous inspection. People receive a good quality service which is committed to quality assurance.

## 5. Improvements required and recommended following this inspection

### 5.1 Areas of non compliance from previous inspections

The registered person must ensure that recruitment practices are robust to make sure staff are suitable.	19 (1) (a) (c) 2 (d) (i) Schedule (3) (4) (6)	This had been addressed satisfactorily by 30 March 2017.
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### 5.2 Areas of non compliance identified at this inspection

No areas of non compliance were identified at this inspection.

### 5.3 Recommendations for improvement

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

- Ensure people have an opportunity to sign and agree their care plan.
- Record details of how people are to be supported with specific health care needs.
- Ensure sufficient references are obtained for new employees.
- Free standing wardrobes should be fixed to the wall to prevent them from being pulled over on to people.

## **6. How we undertook this inspection**

We, Care and Social Services Inspectorate Wales (CSSIW), carried out a scheduled, unannounced, full inspection on 20 November 2017 between 9:40 and 15:45. We considered all four themes, wellbeing of people using the service, care and support, leadership and management and quality of the environment.

Information for this report was gathered from the following sources:

- Discussions with three people using the service, two visiting relatives, two members of staff, and the registered person.
- Completed questionnaires received from four people receiving a service, four relatives, two staff members and three visiting professionals.
- A sample of records in relation to people using the service, staff and the operation of the home.
- The Statement of Purpose
- Observations of the building and interactions between people and staff.

On the day of our visit there were 11 people living in the home.

Further information about what we do can be found on our website [www.cssiw.org.uk](http://www.cssiw.org.uk)





## About the service

<b>Type of care provided</b>	<b>Adult Care Home - Older</b>
<b>Registered Person(s)</b>	<b>Anna Jones</b>
<b>Registered Manager(s)</b>	<b>Anna Jones</b>
<b>Registered maximum number of places</b>	<b>12</b>
<b>Date of previous CSSIW inspection</b>	<b>14 February 2017</b>
<b>Dates of this Inspection visit(s)</b>	<b>20 November 2017</b>
<b>Operating Language of the service</b>	<b>English</b>
<b>Does this service provide the Welsh Language active offer?</b>	<b>Yes</b>
<b>Additional Information:</b>	

No noncompliance records found in Open status.