

Inspection Report on

Plasgwyn Nursing Home

Plasgwyn Nursing Home Pentrefelin Criccieth LL52 0PT

Date Inspection Completed

22/11/2022



About Plasgwyn Nursing Home

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Cariad Care Homes Ltd
Registered places	38
Language of the service	Both
Previous Care Inspectorate Wales inspection	[Manual Insert] 18 February 2019
III3peolioii	10 1 Gbruary 2019
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

Plasgwyn care home has a full, regular staff team who know the people living there well and can meet their needs. People spoken with are very happy in the home and feel they are treated well.

The home is well maintained, and regularly redecorated. There are plans to restructure and redecorate the lounge area, people are involved in choosing the new décor. The car park has been resurfaced and parking areas are available for visitors and staff.

Staff members spoken with say they feel well supported in their work and that managers are approachable. Staff had fed back to the provider that they required a better area for their breaks, their comments were listened to, and a new staff room is now being constructed.

The provider/ responsible individual (RI) visits the home on most days and has oversight of the service provided for people. The RI monitors the quality of care provided and produces a report of the findings with associated actions and outcomes.

Well-being

The people living in the home are happy with the care they receive. One person told us, in Welsh, it is nice in the home, no one complains, we are warm and comfortable, and the food is good, "Neis iawn yma, cynas a cyffyrddus, neb yn cwyno. Bwyd da iawn yma." Another person said it was very good in the home, people are in good shape and staff are kind to them, "Da iawn yma, pawb mewn cyflwr da. Staff yn dda iawn hefo ni." We observed that staff know people well, speak to them kindly, and can anticipate their needs.

People have choices on how to spend their day. People can choose when to get up and go to bed and what activities they would like to engage in. People's personal plans are centred around their individual needs and reflect their likes and dislikes. People's first language and cultural choices are documented in their personal plans and care is given accordingly. The provider has purchased vehicles with disabled access and people are able to go on days out to local places of interest which they enjoy.

People can personalise their rooms with personal effects to help them feel at home. People can influence their environment and can vote on any changes made to the décor. There are communal areas for people to sit and be sociable, and quieter areas if they need peace. The garden is kept in good order, and there are seats outside for people and family to sit and enjoy the garden in warm weather.

People have choices regarding their meals. People spoken with said the food is good in the home. We saw the kitchen is well organised and there is a plentiful supply of varied food. We saw from the menus that special diets can be catered for. The cook visits people daily and asks them what they would like to eat the following day. We saw people can access drinks and snacks as they want them.

Staff have updated training regarding safeguarding people who are vulnerable and keeping them safe. We talked to staff members who were able to describe the safeguarding process and evidence they knew the local processes should they be worried about anyone.

Care and Support

People are supported to be as healthy as possible. We saw from the personal plans that people's health is regularly monitored, such as weight and nutrition and oral hygiene. People are referred to the GP and other health care professionals as needed, and in a timely way. Outcomes and instructions from the GP and health professional visits are carefully documented and any instructions shared amongst the staff. People at risk of falls are risk assessed and low beds/ sensor mats put in place to mitigate the risk. General risks to people's safety are regularly reviewed and updated. Charts and plans are kept appropriately should people have any wounds. People's personal plans are also regularly reviewed and any changes to people's condition is updated in a timely manner.

People benefit from a robust medicine administration system. Medicines are dispensed in as safe a manner as possible; Medicines are kept in a secure room. There are good audit trails and receipts for medicines entering and leaving the home. Staff have up to date training regarding medicines and have competency assessments to ensure good practice.

People receive care given at an unhurried pace. We saw people received the help and support they needed in good time. Call bells are answered quickly. We observed staff know people well and can anticipate their needs. People are treated with dignity and respect. Most staff can speak with people in Welsh if they prefer. The RI told us they have a full staff team, they have been able to successfully recruit staff to ensure enough to meet people's needs, we also saw this from the staff work rotas.

People are kept as safe as possible. The manager and RI monitor and audit the care given to people to guard against neglect. The service works well with Local Health Authorities and Care Inspectorate Wales (CIW) and report incidents and accidents appropriately.

People live in a hygienic and tidy home. The home has dedicated housekeeping and laundry staff who ensure people have a hygienic environment and clean clothes. We saw people's rooms are kept clean and tidy and are compliant to the regulations. The kitchen has a hygiene rating of 5 which is the highest available.

People live in a well-maintained environment. We saw the décor is fresh and furnishings are appropriate and comfortable. There has been investment in the home in recent times, the car park has been resurfaced, there are specific out buildings for staff training and one was used for staff to get changed in during the Covid pandemic. A new staff room is being constructed in response to staff requests. The lounge and dining area is about to be remodelled and people have an input in choosing the décor.

People are kept as safe as possible. Health and safety risk assessments are up to date. Fire checks are done on a weekly basis, checks regarding the safety of water and electrical equipment, including other utilities, are up to date. Equipment is regularly checked and serviced. People can access the equipment needed for their care. The lift is serviced and is in good working order.

Leadership and Management

The RI visits the home on most days. They have produced a timely quality report which is compliant to the regulations and demonstrates their oversight of the service. The manager states they are well supported by the RI to perform their role. The RI has included comments from people and staff in the quality report and what has been put in place in response to this.

Staff say they are well supported by the manager and RI and that both are approachable. Staff supervision is up to date, this provides staff with dedicated managerial time to ensure their well-being, gauge their training needs, and enables good practice. Training is up to date to ensure staff have updated knowledge to perform their role effectively.

Staff recruitment practices are satisfactory. We saw staff safety checks are up to date to ensure they are appropriate to work with vulnerable adults. Recruitment and retention rates are good and there is a full complement of staff.

The provider has not declared any financial hardships to CIW.

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	

N/A	No non-compliance of this type was identified at this	N/A
	inspection	

Date Published 16/02/2023