



## Inspection Report on

**Plas y Dderwen Care Home**

**Cilddewi Park Johnstown  
Carmarthen  
SA31 3HP**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

15/12/2022

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## About Plas y Dderwen Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Barchester Healthcare Homes Limited
Registered places	69
Language of the service	Both
Previous Care Inspectorate Wales inspection	06 May 2021
Does this service provide the Welsh Language active offer?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

An experienced and respected manager leads a dedicated staff team who are valued by people living in the service, their relatives and visiting professionals. The Responsible Individual (RI) uses their Regulation 73 visits and quality audit tools to ensure they have a good overview of the service.

The health and wellbeing of individuals is important to those working in the service. People and their relatives corroborate this. In the main, care records provide details of the person and people and / or their representatives are involved in their care when able to. Care workers are well trained and knowledgeable about the people living in the service.

The environment and equipment are well maintained and support people to live as independently as they are able to be.

## Well-being

People are protected from the risk of harm and abuse. Care workers are knowledgeable, well trained and care about the individuals living in the service. They also have a good understanding of people's needs and how best to meet these. Care records provide information about the requirements and preferences of people. The service liaises with health and social care professionals to make sure people remain as healthy as possible.

There are good recruitment, supervision and training procedures in place to ensure staff have the right skills, knowledge and approach to care. Staff respect the general manager who in turn is well supported by their line manager and RI. Care staff are clear on their responsibilities to protect people and are supported by regularly reviewed and updated policies. Appropriate infection prevention and control measures are in place and staff are clear about their role and responsibilities. The service is clean and well maintained and tailored to people's needs.

People's choices and views are recognised. The RI seeks the views of individuals living and those working in the service during Regulation 73 visits. People can personalise their bedrooms, are able to choose their meal preferences and are involved in their care when able to.

## Care and Support

People and their relatives feel they receive the care they need and compliment the staff, they told us; *“I have no complaints, the staff are very kind”, “they [care workers] are lovely, they look after me very well”* and *“my wife is being very well looked after, the food is great and there are always choices for her”*.

Care workers have a good understanding of the needs of the people living in the service. They know about their specific care needs and daily preferences. Interactions between staff and people are kind and caring. Care workers enjoy supporting individuals and working in the service. They told us; *“I thoroughly enjoy the work”* and *“I love it here; the residents are wonderful”*.

All the people and relatives we spoke with tell us they feel Plas y Dderwen is a safe place to live. People and/or their representatives can raise a concern if they need to. One person told us; *“I can raise any concerns and I know they will be dealt with”* and *“I know I can speak to a member of staff if I have any concerns”*. There is a clear complaints procedure included in the information given to people and / or their relatives on moving into the service.

Care and support plans have good details and give a sense of the individual, however, we found personal histories are not always included. This has been discussed with the general manager during the inspection. Where possible, people and or their representatives, sign their care plans to demonstrate they are involved in their care. Health and social care professionals are involved with people's needs. A proportion of the staff team are able to communicate in Welsh, which we observed during the inspection.

The kitchen has a five star food hygiene rating with varied menus offering daily choices. People told us: *“the food is very tasty and nicely presented, and always hot!”* and *“I like the food and the choices available”*. We saw people's personal meal preferences are catered for. Menus are updated according to the season and in consultation with people. Mealtimes appear to be a very positive and an enjoyable social event. Meals are well presented to people eating in the dining areas or having their meals in their bedrooms.

## Environment

There are arrangements in place to minimise risks to people's health and safety. Testing and servicing of firefighting, moving and handling equipment are completed within the required timescales. Personal Emergency Evacuation Plans (PEEPS) are individualised and readily available. Emergency alarms are accessible and when activated are responded to in a timely manner. Maintenance issues are resolved promptly and there is an ongoing refurbishment programme in place. Health and Safety audits of the property are completed.

Infection prevention and control measures are in place. There are appropriate and safe measures to facilitate relatives and friends to visit. This is being kept under review. Substances hazardous to health are stored safely and communal areas are uncluttered and free from hazards. Domestic staff have the appropriate equipment to carry out their tasks safely. There are thorough maintenance checks, servicing and audits in place. The environment is clean and free from malodours.

Furniture and fixtures are well maintained. People's bedrooms are personalised with items of furniture, pictures, photographs and items important to the individual. Bedroom doors have the person's name displayed to help orientate. There are communal lounges and dining areas for people to socialise in each of the communities. These feel homely with, pictures and points of interest.

The environment in one of the communities supports people with more complex needs by playing ambient music during mealtimes. This encourages a more relaxing environment for people to better enjoy their meals.

The communal gardens offer people and their visitors' safe, attractive areas to sit and socialise in warm weather.

## Leadership and Management

Staff are competent, knowledgeable and supported to care for the people living in the service. They attend a range of mandatory and service specific training and records confirm this. Care workers told us about the training they attend and demonstrate a good understanding of their role in the protection of individuals and safe moving and handling practices. Staff records show they receive a thorough induction, have regular supervision and an annual appraisal. Pre-employment checks take place before new employees start work. These include reference checks, right to work and Disclosure and Barring (DBS) checks. We found the staff records we looked at held the required information and checks.

Staff follow appropriate infection prevention and control measures and are able to explain their responsibilities in reducing the spread of COVID-19. There are up to date and regularly reviewed policies and procedures in place to support staff.

Throughout the period of the inspection, staff interact and support people in a caring and respectful manner, which adds to the welcoming and cheerful atmosphere in the service.

People, their relatives and visiting professionals praise the staff and managers and their comments include; *“The carers are very good, and [general manager] is always welcoming and approachable”* *“the carers are very kind and thoughtful”* and *“[general manager] is very efficient and appears to have her finger on the pulse”*. Staff compliment the general manager (who has recently returned to the service), managers of the different communities and working in the service. They told us; *“the service has greatly improved since [general manager] has started”* *“I think [general manager] is marvellous! I love working here”*, *“I can go to my manager at any time, he is always here for us”* and *“the respect given to staff by [general manager] has lifted our morale”*.

There are robust governance arrangements in place. The RI is in regular contact with the service and has undertaken the three monthly Regulation 73 visits. CIW have received copies of their reports, which demonstrates they speak to people and staff as part of the visits to the service. Staff and people confirmed this with us, one staff member said; *“when [RI] visits he does speak to staff and the residents”*. There are a range of monitoring tools and audits undertaken to support the managers and the oversight by the RI. Actions from the audits are acted upon and reviewed regularly. The general manager feels well supported by their line manager, RI and the organisation.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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