



Inspection Report on

Plas Gwyn Care Home

**Plas Gwyn
Llanrhystud
SY23 5BY**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

07/11/2022

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About Plas Gwyn Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Tilmala Healthcare Ltd
Registered places	16
Language of the service	English and Welsh
Previous Care Inspectorate Wales inspection	13 October 2022
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

People are very positive about the care and support they receive, a person who lives at the service told us *“the staff are excellent, so nice and caring to us, I really want you to know how much we appreciate them”*. Care workers are guided by up to date person centred plans. We observed many understanding and caring interactions. A care worker told us *“the residents are lovely”*. People enjoy spending time socialising in communal areas, gardens or in their own rooms and are supported in their local community.

The service has recently been taken over by new owners. They are investing in the building and a decoration programme is underway.

The new Responsible Individual (RI) is fully involved in the development of the service and maintains regular contact with people who live and work at Plas Gwyn. The manager has been at the service since July 2022 and is both liked and respected by people and care workers. A worker told us *“The manager is excellent, really wants to improve the service”*.

Well-being

People are very happy with the service they receive. Personal plans focus on things that matter to individuals. The manager involves health and social care professionals to help people remain as healthy as possible. Interactions with the staff team are warm and friendly. People live in a service that provides an 'Active Offer' of the Welsh language, which means they can communicate in Welsh or English as they choose.

Recruitment processes help keep people safe and the training programme is being developed to ensure people get the right care and support. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People know how to make a complaint if needed and have confidence in the RI and managers.

The environment is being improved by the provider and people are fully involved in the decoration of their own rooms. Communal areas encourage people to socialise and individuals are supported to do things that make them feel happy. The grounds and gardens are accessible for people and help them remain as healthy as possible.

The RI is involved in the development of the service, people and staff talk to them about improving quality. They intend to complete their first Regulation 73 reports in October 2022 and will complete them every three months. The new manager intends to complete the Quality of Care Review with senior managers when they have been in post for six months.

Care and Support

People are very positive about the person-centred care they receive. Interactions between staff and people are friendly and caring. A person who lives in the service had been out shopping and told us they “had a lovely time”. Representatives of people are positive about the service and one said “*they are very kind and look after [family member] really well*”. A care worker told us “*the residents are so sweet and really nice*”.

The manager assesses a range of information from the person, their representatives and external professionals. The manager has worked with people and staff to develop new person-centred plans. Individual pen pictures give care workers a positive and detailed description of individual histories, preferences and focus on what is important to people. Daily notes record the care completed and some include feedback from the perspective of the individual. The manager intends to improve the consistency of the daily records to evidence the positive impact the care and support has on people. There is good documented evidence of health and social care professionals being involved with people.

During the first day of the inspection, we identified areas of unnecessary use of monitoring charts for everyone and found people's plans stored in a communal area. These charts were removed and are now only used for people who require them, and all plans are now stored securely in the managers' office.

People enjoy a variety of activities in the service and grounds. People are supported to access their local communities and maintain relationships with family and friends. A person told us about the support they had to take a day trip to their local community and areas where they used to work and socialise.

There are sufficient numbers of care workers in place to meet the needs of the people living at the service. People are supported by workers who have a good understanding of their individual needs and wishes. Staff have sufficient time to support people and we observed many positive interactions.

The provider has policies and procedures to manage the risk of infection. There are good hygiene practices throughout and staff follow the latest Public Health Wales guidance.

Environment

The environment is being improved by the provider and areas that have been newly decorated are bright and fresh. A care worker told us *“The improvements to the bedrooms are very positive and are the biggest changes so far, it was needed”*. During the first day of the inspection, we noted two fire extinguishers needed servicing and window restrictors had been removed. These issues were resolved by the second day. People can use the different communal areas to socialise with each other and we observed people enjoying each other’s company while listening to music in an outside area. People move around the service freely and appear comfortable and relaxed in the communal areas. The main kitchen is a hub and people are supported to make drinks and snacks for themselves and for each other. People’s rooms are highly personalised and they choose their own colour scheme, furniture and photos/wall art. A care worker told us *“the home is on the right track and the residents are looking forward to it and it will be great when things are finished”*.

Maintenance issues are resolved promptly by the provider. Health and Safety audits of the property are completed. The service is compliant with Fire Regulations and testing of fire safety equipment is now fully up-to-date. An external fire safety check was taking place during the inspection.

People are involved in planning the menu with catering staff. Meals are freshly prepared every day and alternative options are available. People enjoy having a cup of tea/coffee and snacks together inside the building or in the welcoming and accessible grounds.

Leadership and Management

The RI is fully involved in the development of the service, he is accessible and knows people and staff well. A person who lives at the home told us about going out with the RI to visit places he used to live and how much he enjoyed the day. Care workers value the RIs support and one told us *"[RI] always checks that I'm OK when he visits"*. The RI's first quarterly visit report is due in October 2022 and he told us these will be completed every quarter in line with the regulations. The manager is new and will complete the Quality of Care Review with senior managers, within their first six months at the service. A care worker told us *"things are a lot better with the new owners and the new manager has made a big impact"*.

The manager has brought a fresh outlook to the service and is developing a person focused culture. All staff are positive about the new leadership and approach to supporting people, a care worker told us *"The manager is excellent, really wants to improve the home and is very supportive"*. People talk to the manager openly and have a good rapport with them. Representatives are positive about the manager and the standards of care, one told us *"They have really caring staff and manager"*. The manager has not received a recorded formal induction and we discussed this with their line manager who is going to ensure this is recorded formally. We will check this in the next inspection.

Policies and procedures are up-to-date and staff have a sufficient understanding of them. Care workers receive regular constructive supervision meetings with their manager that focuses on them and their development. Staff demonstrate a good understanding around safeguarding and follow appropriate infection, prevention and control measures.

Pre-employment checks take place before new employees start work. These include reference checks, right to work and Disclosure and Barring (DBS) checks. Induction and ongoing training mean staff have the necessary mandatory skills. The service has and is sourcing more specialist training to ensure the care workers have the right skills and knowledge to meet people's needs.

The manager ensures adequate numbers of experienced care staff work on shift to meet people's needs. Care workers have developed positive relationships with people and understand their individual needs. The provider is recruiting an activities co-ordinator who has vast experience and knowledge to meet people's needs.

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
44(4)(i)	The Provider continues to fail to ensure the premises, equipment and facilities are suitable for people living in the home.	Achieved
73(1)(a)	The RI has failed to undertake visits to monitor the service ,seek people's views and ensure quality of care delivery.The provider must meet their statutory obligations.	Achieved
44(2)(b)	The service provider has not ensured the premises , equipment and facilities are suitable for the service, having regard to the statement of purpose of the service.	Achieved

28(2)	The provider is noncompliant because they have failed to ensure people are protected from financial abuse .The provider must fulfil their statutory obligations under these regulations.	Achieved
57	The provider has failed to ensure that any health and safety risks to individuals are identified and reduced. The provider must fulfil their statutory obligations.	Achieved

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 inspection	N/A

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