



Inspection Report on

Priory House Care Home

Priory House Home Care Ltd
61-63
Gronant Road
Prestatyn
LL19 9LU

Date Inspection Completed

16/12/2022

Welsh Government © Crown copyright 2022.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Priory House Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Priory House Care Home Ltd.
Registered places	29
Language of the service	English
Previous Care Inspectorate Wales inspection	27 September 2019
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

People living in Priory House Care Home and their families are happy with the care and support they receive. People are treated with dignity and respect and people's choices are heard and respected. Care workers demonstrate a good understanding of each person's needs and show a caring approach towards people in the home. Personal plans contain detailed information regarding people's needs. Further developments of risk assessments within the home are required to provide effective person-centred care. Falls documentation within the home are carefully and safely cross completed, however an audit hasn't been completed to identify a pattern to prevent future falls.

Staff are happy working in the care home. One member of staff stated that the home "*is like a little family*" and stated that management is "*very approachable and supportive*".

The environment is clean, warm, and welcoming; there is a homely feel at Priory House. People have their own rooms, which are personal to them and contain personal furniture and items of their choice. Improvement is needed to ensure health and safety checks are completed annually.

Well-being

People are treated with dignity and respect. People are supported to make decisions that affect their lives and are listened to. People choose from various healthy meal options, and they enjoy the food very much. One person said *“the food’s gorgeous. Never had a bad meal”*. We saw the staff are aware of people’s dietary requirements and served them accordingly. People told us they are offered alternative food options if they express their dislike for the menu of the day.

People receive their care in a relaxed atmosphere. We saw staff providing a caring approach whilst attending to people in a timely manner. People are supported to access health professionals or other experts such as advocacy services when needed. People feel listened to and can express their views and wishes confidently. We observed meaningful interactions between staff and residents within the home; staff clearly know people well. One person told us *“the carers are great, I have no concerns at all.”*

An activity coordinator visits the home once a week to support people in group activities as well as a mobile hairdresser who visits regularly. People are given a choice to participate in activities and their choice is respected by staff. One person told us *“I look forward to having my hair done, she’s very good.”*

The home provides spacious accommodation and homely communal spaces for people to sit and spend their day. People have personalised rooms furnished with items from their home. Views from some bedrooms overlook a well-maintained garden which they can access directly from their rooms. The Responsible Individual (R.I) explained that many of the residents make full use of their bedroom’s access to the garden in summer months.

Care and Support

Staff consider people's preferences and respect their wishes concerning their daily routines. One person told us *"the care staff are good and kind to me"*. Families also praised staff members' caring approach towards their relative, *"they're very good and very jolly"*. People have regular contact with family and friends and receive visitors as and when they wish. People are encouraged to have regular contact with friends and family face to face, go out on day trips, or contact over the phone. People told us they can contact their family members whenever they want to. A weekly activities programme was seen providing one-to-one and group activities, which provides stimulation and helps people feel part of their community.

Risk assessments are in place for people in the home, however more detail is required to identify risks to the individual's wellbeing and how this is managed whilst ensuring people's independence is maintained. Improvements are required to audits of falls and accidents to ensure appropriate individual risk assessments are put in place for people who have experienced falls, to document how risks have been identified, considered, and mitigated where possible. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People are referred to health services in a timely manner. Safeguarding policies are in place and staff receive up to date Safeguarding training ensuring staff are up to date in which policies and procedures to follow should there be a concern within the home. Staff spoken to were confident in whistleblowing and knew the correct procedures to follow.

Environment

Care and support is provided within an environment which promotes people's sense of belonging. People look relaxed and content. The home is clean and homely and individual rooms are decorated with personal items and memorabilia. We saw people given a choice to stay in their rooms or to socialise in the communal areas. There is a large lounge and dining room providing people with opportunities to socialise and dine with others. The garden is well maintained and is accessible from the lounge area or from numerous bedrooms. This gives people the opportunity to sit outdoors in warm weather if they prefer. There is a family feel to the home; people we spoke to described Priory House as their "*home*" and many referred to others as their "*friend*".

There are regular tests carried out to ensure safety of the home including water temperature checks, electrical testing, fire drills and ensuring staff members have received fire training safety. Improvements are required to ensure health and safety recommendations from external contractors. They should be completed by the specified date ensuring risk assessment of cold and hot water systems and legionella testing are also completed. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The home is free of clutter, clean and free of bad odours. We saw bedrooms being cleaned and the housekeeping service told us they have sufficient equipment and resources. We saw an adequate supply of personal protective equipment (PPE) available throughout the home and effective hygiene arrangements and infection control to keep people safe from harm. There is a range of equipment available to meet people's needs including specialist chairs, beds and hoists which have regular servicing. A call system is in place for people to alert care workers.

Leadership and Management

The provider has a recruitment process in place where staff undergo pre-employment checks. These checks are carried out to ensure staff are fit to work in the home with vulnerable people. Current staffing levels are appropriate with long standing staff providing continuity for people. We looked at monthly rotas and saw sufficient numbers of staff employed in the home.

Staff told us that they feel valued and supported in their duties and confident to discuss any concerns which they may have with management. Staff receive regular training and regular supervision with management. One to one confidential supervision sessions enable a two-way discussion to take place around the performance and training needs of staff members and provide opportunities to discuss any concerns. The provider has good oversight of the service and demonstrates commitment to driving improvements. There is a manager appointed who is responsible for the day to day running of the home. Staff we spoke to described management as “*approachable*” and explained they were confident in discussing any issues with management whenever needed.

There are systems in place to review and monitor the quality of the care provided. People, family, and professionals are asked to provide feedback about the quality of the care people receive. The feedback information we viewed was positive. We saw evidence of changes been made to the service following feedback from people and families. There is regular, ongoing effective communication between the RI and the manager.

People are provided with information about the service. The Statement of Purpose document contains clear information about the service and the facilities available. The RI has made effective changes in working towards the Active Offer providing Welsh language options for Welsh speaking residents in the home.

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
------------	---------	--------

15	No intervention implemented to mitigate any identified risks to people following a fall. Ensure all falls are documented within an audit to identify any possible patterns to reduce future falls from re-occurring.	New
57	Recommendations from external contractors were not completed by the specified date. Health and safety improvement identified were not completed accordingly.	New

Date Published 25/01/2023