

# Inspection Report on

Parc y Llyn Nursing Home

Parc Y Llyn Nursing Home Ambleston Haverfordwest SA62 5DH

**Date Inspection Completed** 

04/04/2023



# **About Parc y Llyn Nursing Home**

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Van Dyk Healthcare (Dragon) Ltd
Registered places	50
Language of the service	English
Previous Care Inspectorate Wales inspection	24 April 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 who have made Parc y Llyn their home receive their care and support from a team of motivated staff who are effectively led by an experienced and well-respected manager. The service is committed to making improvements for the benefit of the people they serve.

All staff are respectful and know what dignity means. Care workers know people well, and personal plans are detailed and informative. But improvements are needed to capture person centred information about people.

People and their relatives are happy with the support they receive, feeling staff know them well and know what, and who is important to them.

The provider has good oversight of the service and there are systems in place to make sure checks are carried out. Ongoing improvements to the physical environment are needed to make sure people live in a safe and well maintained service.

#### Well-being

People are safe because all staff know what they must do if they suspect a person is at risk of harm or abuse. They are confident their manager would deal with any concerns appropriately to safeguard people.

Visitors to the service have to be given access by staff and also sign a visitor's book meaning staff know who is in the service at all times.

People have good relationships with those who care for them. We saw some friendly interactions and one person described the manager as "lovely" and one relative described the staff as "superb". One relative said a person receiving care is "much more relaxed" and another told us their relative is "laughing and smiling in a way they haven't for years". Relatives we talked with said they have peace of mind that their relative is in good hands. People are able to communicate with staff in their preferred language. A number of people are first language Welsh speakers and there are a number of Welsh speaking staff. We saw one of the newer members of staff using some basic Welsh phrases and said they are learning the language from people in the service.

People's well-being is enhanced by being able to do some things they enjoy. Time is spent with people individually and in groups, but the number of people in the service could mean it is difficult for one worker to fully meant the needs of everyone living in the service.

Further improvements to the physical environment would enhance people's well-being further. Some work has been done to refurbish some of the bathrooms and some new flooring has been laid. But some rooms are bland and lack some attention to detail. We have asked the provider to consider the use of colours to enhance the environment and also to benefit people, especially those living with dementia.

#### **Care and Support**

People's physical health needs are met. There is at least one registered nurse on duty at all times and they offer support and advice to the care workers. Care workers can recognise signs of pressure damage and know the importance of regular repositioning. Referrals are made to specialists including dietetics and the GP. We saw the advice from a dietician being acted upon. There is enough pressure relieving equipment.

Following a concern, some changes and improvements have recently been made to ensure that people's care and support needs are being met by an appropriate number of staff, and also that the records clearly state how many care workers are needed to ensure safe moving and handling. The records are being checked by the manager to make sure these needs are being safely met.

There is an understanding of the importance of good nutrition. The catering team take pride in their work and know the important role they have in people's care and well-being. Meals are made using fresh ingredients and there is a choice. Food is available outside meal times, and food is fortified as necessary. Food stores are well stocked and special events are celebrated. However, on the first day of the inspection, no one was assisted to use the dining room for their meals, instead having their lunch taken to them on trays. We discussed this with the manager who said the expectation is that as many people as possible are assisted and encouraged to use the dining room. We talked about the importance of this, especially for people living with dementia and the manager said most people do eat better when they use the dining room. Some staff said this is a legacy from Covid, when the dining room was not used, and others said it was due to a lack of available staff. On the second day of the inspection, more people were using the dining room, with some people chatting happily with each other. We have asked the provider to monitor this and to maximise people's dining experience.

Care plans are written for a range of needs, including mobility; nutrition; communication and oral care. To support these, there are comprehensive risk assessments for areas including falls; use of call bells; moving & handling and choking. Care plans and risk assessments are reviewed every four to six weeks. Daily care records provide evidence of repositioning, personal care and nutrition. But there is very little information about the person; their well-being and how they spent their time. We discussed this with the manager who has already identified this and is working with the team to improve the quality of the records. Staff know people well; they know what and who is important to them, but this information is not always documented. Some people have a helpful "This is Me" document, but some are out of date. They were not available in most of the files we looked at.

People can do some things they enjoy. During the inspection, some people were decorating eggs ready to put on an Easter tree, and one person was happily working with the housekeeper cleaning the windows. Records show some people enjoyed a film afternoon with "popcorn and a G&T". The activities worker is well regarded by the team, with one

describing them as "very good; passionate. Has a really good way with people". They have time to spend with people who are receiving care in bed. Some care workers would like to see more activities, and this is included as an area for development in the quality assurance report, with the aim of offering activities seven days a week.

#### **Environment**

People live in a service that is suitable for their needs. Accommodation is provided over two floors and there is a lift and stair lifts for people to use to move between floors.

There are some communal areas, including conservatories and a dining room. Because of the age of the building, bedrooms are different shapes and sizes, and most have some ensuite facilities.

Some bedrooms have been personalised with photographs, ornaments and soft furnishings.

Greater attention to detail would enhance the environment further as some curtains are not hung correctly and there are no shades on the nightlights.

Standards of cleanliness are generally good and there has been a recent increase in the amount of cleaning time. High dusting is needed in some areas and there are some malodours, mainly in areas where the carpets are yet to be replaced with vinyl flooring.

The new conservatory is a useful addition and we saw one person enjoying some quiet time there. The original conservatory would benefit from having the temporary roof panels removed to enhance the look of the service.

There is some outdoor space and the activities co-ordinator has plans to spend time outside when the weather permits.

The kitchen has been awarded a level three by the Food Standards Agency. This is "generally satisfactory". Since the inspection, work has been done in the kitchen with new flooring; a new fridge and cooker. It is hoped to have the area reinspected soon with a view to getting back the rating of five which they held previously. The catering staff have all of the equipment they need to meet people's needs.

### **Leadership and Management**

Whilst there are some effective and robust governance arrangements in place to monitor quality, following a recent concern these audit processes have been strengthened to make sure care records both identify and demonstrate the correct number of staff needed to provide care and support, as set out in individual care plans.

The Responsible Individual (RI) visits the service regularly and keeps in regular telephone contact with the service. Three monthly reports are written to comply with Regulations. A detailed and reflective Quality of Care report has been written which considers where the service is now and where the manager wants it to be, focusing on well-being; inclusion; person centred care and staffing.

Systems are in place to make sure equipment and services are suitably maintained and the maintenance worker carries out visual checks on equipment and can carry out some repairs.

Care workers are appointed following a safe and robust recruitment process. Staff files are easy to navigate and contain the information necessary, including references; checks and photographic identification. The overseas staff are recruited via an agency and the service works with them to ensure all of the required checks are carried out.

Professional development is encouraged with some workers being promoted. Care workers feel they have had the training they need to safely and effectively carry out their duties and additional training is provided as necessary. Most training is carried out online with an assessment to make sure staff have the necessary competencies. The training matrix shows most training is up to date and care workers meet with a senior colleague for supervision, where they get feedback on their work.

All staff feel valued and part of the team. Catering and housekeeping staff feel involved and consider their important role in the service is respected by the team. Recently appointed care workers also feel part of the team and appreciate the welcome they have had from the rest of the staff team.

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	

Where we find the provider is not meeting the National Minimum Standards for Regulated Child Care but there is no immediate or significant risk for people using the service, we highlight these as Recommendations to Meet National Minimum Standards.

We expect the provider to take action to address these and we will follow these up at the next inspection.

## **Date Published** 26/04/2023