

Inspection Report on

Church Manor Care Home

Church Manor Care Home Towyn Road Towyn Abergele LL22 9ER

Date Inspection Completed

20/02/2024

Welsh Government © Crown copyright 2024.

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: <u>psi@nationalarchives.gsi.gov.uk</u> You must reproduce our material accurately and not use it in a misleading context.

About Church Manor Care Home

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	2SK Care Homes Ltd
Registered places	31
Language of the service	English
Previous Care Inspectorate Wales inspection	24 August 2022
Does this service promote Welsh language and culture?	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 are happy with the support they receive at Church Manor and are supported by skilled staff who know them well and provide positive reassurance and interaction. People are supported to make choices about their daily lives and personal plans are person-centred, detailed, reflect people's needs and reviewed and changed accordingly. Activities are on offer and these are facilitated by staff.

Staff feel well supported by management and are provided with training to meet people's needs. There are good governance arrangements in place and the Responsible Individual (RI) visits the home regularly to oversee management of the home and gather the opinions of people and relatives to help to improve and develop the service. The environment is well-maintained.

Well-being

People have control over their day to day lives. They feel they are listened to and their views are considered; they contribute to decisions that affect their life. Care staff work from personal plans that are written together with the person and care staff cater for people's preferences and listen to their wishes. People say they like living at the home and can make choices on how they live their lives day to day. One person told us, *'I get to do what I want, when I want.'* People and their relatives are involved with the improvement and development of the service and have choices around food and activities that are on offer. Rooms are personalised, clean and tidy. Care records give care staff the instruction required to support people accurately and reviews are carried out in line with regulations. Care staff know residents well and support residents to move around safely. People have visitors coming to the home regularly and have good relationships with other people they live with and care staff.

There are activities on offer in the home with noticeboards on display telling people what activities are happening and when, these included themed activities, parties, games and cooking activities. People say they enjoy the activities on offer. There are digital pieces of equipment used for reminiscent therapy and quizzes.

People are protected from abuse and neglect as much as possible. Care staff receive training in safeguarding and safeguarding policies and procedures are in place and followed. People are supported to maintain and improve their health and wellbeing through access to specialist care and advice when they need it. Referrals are made in a timely manner to specialist services, ensuring people receive the right care and support, as early as possible. Care staff and the manager are proactive and work collaboratively with support agencies.

The layout of the home supports people to achieve a good standard of well-being. People are encouraged to be independent and can get to all the rooms in the home safely. Strategies for reducing the risk to people while they move around the home are sufficient. The person in charge has identified potential hazards and has taken steps to minimise risks to people.

Care and Support

People can feel confident the service provider has an accurate and up to date plan for how their care and support needs should be met. Care plans are reviewed more frequently than required by regulations. People are encouraged to co-produce their personal plans and have choice of everyday decisions such as their meals, clothes they wish to wear and times they get out of bed in the morning. One person told us they are appreciative of having their choice respected when they say they do not wish to take part in activities. Personal plans are personalised, up to date, accurate, regularly reviewed and detail individual outcomes, likes, dislikes and preferences. Robust risk assessments are in place and regularly reviewed. Pre-assessments are completed by the manager before people move to the home. There have been staffing issues at the home more recently, which has resulted in the home struggling to ensure people always receive care in line with their personal plans and risk assessments. The home has been doing everything they can to address the staffing issues and have now recruited staff numbers over the required amount given in their statement of purpose. Care staff are kept informed of important updates from thorough daily handovers. Relationships between care staff and people are good. People say, the staff are excellent', 'I only need to shout or ask for something and the staff come straight away'. We saw call bells answered quickly and support being provided in a personalised and enabling way. Mealtimes are sociable, people have choices of what to eat and can have more if they wish. We saw food is well-presented and appetising. Dietary choices are passed to the kitchen and kitchen staff know about specialist dietary requirements. We observed appropriate manual handling and equipment being used.

Records show people have access to specialist advice and support from health and social care professionals and care plans and risk assessments are updated to reflect professional advice. A visiting professional told us, *'the staff know their residents and are kind and caring.'* Care staff access appropriate and specialist training and feel they can approach the manager if they have any concerns.

People can be satisfied that the service promotes hygienic practices and manages risk of infection. Medicine storage and administration are good and keep people safe, care staff are trained to administer medication with their competency assessed and regular medication audits are carried out by management. Infection prevention and control practices in the home are also good and keep people safe.

Environment

People live in an environment suited to their needs. The service provider invests in the decoration and maintenance of the home to ensure it meets people's needs, we saw a renovation plan in place for the next year covering different areas of the home. Décor in the home looks mostly modern, bright and airy. Bedrooms and communal areas are well maintained, communal dining and lounge spaces are available for people to socialise. People's rooms are clean, tidy and personalised to their own taste with belongings. Moving and handling equipment is stored accessibly but safely out of the way to prevent trips and falls. People say they like their rooms and like the newly completed wet room that has been added in one area of the home. Gardens are secure and well maintained, with access from the main living areas. Residents have been involved in planting in the gardens and more relandscaping of the outdoor areas is planned for the spring and summer. People access the main home through a securely locked door and visitors are required to sign in and provide identification. We saw cleaning staff around the building throughout our visit and observed all areas were clean and tidy. The service provider has infection prevention and control policies, with good measures in place to keep people safe.

People can be confident the service provider identifies and mitigates risks to health and safety. Health and safety audits are completed and identified actions are dealt with swiftly by maintenance staff, this is monitored by management and the RI. The home has the highest food rating attainable. Routine health and safety checks for fire safety, water safety and equipment are completed and records show required maintenance, safety and servicing checks for the lift, gas, and electrical systems are all up to date.

Leadership and Management

People can feel confident the service provider has systems for governance and oversight of the service in place. The RI visits the service regularly to inspect the property, check records and gather the views of people and staff. The RI visit reports show aspects of the day to day running of the service and discussions of current challenges the service is facing. For example, we saw in depth analysis and discussion between the RI and management team regarding recruitment and retention of staff and new initiatives were introduced to overcome these issues. The reports review personal plans and monitor the outcomes of actions identified during previous visits. We saw evidence of in depth and regular management audits of all key areas and action planning as a result. A quality of care survey is conducted by the home every six months, and feedback is sought from residents and relatives to inform these. People say they can speak to the manager about changes to their care and action is taken. The provider has submitted an annual report as required by Regulation.

People can be satisfied they will be supported by a service that provides staff who are suitably fit. Care staff have the knowledge, competency, skills and qualifications to provide the levels of care and support required to enable people to achieve their personal outcomes. Records show the manager has suitable numbers of staff on each shift to support people's needs and when they do not the management team provides support on the floor. The service has recruited a higher number of staff than required following a period of struggling to maintain good staffing levels. Records show new staff undergo thorough vetting checks prior to starting work in the home and receive an induction specific to their role. Staff receive annual appraisals and one to one supervision meetings with the manager. Care staff feel well supported by the manager and have access to the training required to meet people's needs. Training is provided to staff through a combination of online and face to face learning and records are reviewed and updated to make sure they accurately reflect training compliance. Care staff have either registered with Social Care Wales, the workforce regulator, or are in the process of doing so.

People can be confident the service provider has an oversight of financial arrangements and investment in the service so it is financially sustainable, supports people to be safe and achieve their personal outcomes.

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. Th 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 inspection	N/A

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

• Inspection report survey

If you wish to provide general feedback about a service, please visit our <u>Feedback surveys</u> page.

Date Published 02/04/2024