



Inspection Report on

Colwyn Bay Old Convent Nursing Home, Ltd

**Colwyn Bay Old Convent Nursing Home Ltd
15 Lansdowne Road
Colwyn Bay
LL29 7YD**

Date Inspection Completed

27/07/2023

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About Colwyn Bay Old Convent Nursing Home, Ltd

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Colwyn Bay Old Convent Nursing Home Ltd
Registered places	34
Language of the service	English
Previous Care Inspectorate Wales inspection	10 June 2021
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

The home is welcoming and staff are friendly and caring. People's rooms are comfortable and they can spend time in communal areas or access the well-stocked and maintained garden. Personal plans for care and support provide insight into people's preferences and guide staff appropriately. People like living in the home and feel well cared for. This is supported by relatives and professionals we spoke to.

The service provider ensures the home is well maintained and people have access to the equipment and facilities they require. There is appropriate health and safety monitoring in place, and infection prevention and control policies and procedures are followed by staff to keep people safe. Staff told us they are well supported by management. Records show care staff receive training to keep people safe and to meet their care and support needs. The quality of the care in the home is routinely monitored by the manager, the RI, and the service provider via feedback from people, their relatives, and the manager's audits of care delivery.

Well-being

People can have control over their day-to-day lives and express their opinions on how the service is run. People participate in resident meetings with management, who value their thoughts on how the service could be improved and developed. Personal plans describe people's preferences for support including what clothes or activities they prefer. People are supported to make menu choices each day. People's preferences for certain foods or drinks are clearly highlighted in personal plans and the kitchen is kept informed. Different dietary needs are catered for and people told us they like the food. People's rooms are personalised and contain personal possessions and furniture they have brought with them. People are treated with dignity and respect in the home. The provider is working towards providing an active offer of Welsh in the home; we saw bilingual signage and documentation is available for people, and their language preferences are highlighted in personal plans for their care.

People are supported to maintain their health and well-being and do things that make them happy. Pictures displayed in the entrance hall show current residents enjoying different group activities such as coronation celebrations. A programme of activities and hobbies is coordinated by allocated care staff; the programme includes visits from external entertainers, celebrations of national festivals and holidays, and games or crafting sessions. The home has a giant portable tablet people can use to access the internet or watch movies. Records show people enjoy regular visits from the hairdresser. People access support from health and social care professionals in a timely way. The home encourages visitors throughout the day. One relative told us "*I feel well supported and involved in their care*".

People are protected from abuse and neglect by care staff who are trained in how to safeguard vulnerable people. The manager follows the correct procedures to make best interest care decisions effectively and safely for people who lack capacity to make those decisions themselves. Records show people have access to advocacy services and receive visits from paid representatives.

People live in a home that meets their needs. People can use specialist equipment to support their care and enhance their well-being, including electric wheelchairs to support maintaining independence, and specialist furniture and beds to keep people comfortable. People told us they are happy living in the home.

Care and Support

People can be assured they will be fully assessed before admission to the home to ensure the service can meet their needs. The manager ensures information from a variety of sources is used to complete the assessments, including from people, their relatives or representative, and professionals.

Records show personal plans for people's care and support needs are instructive and provide detail on people's preferences for food, routine, clothing and if they are Welsh speakers. We saw appropriate risk assessment of people's individual care and support needs, with outcomes linked to personal plans. Personal plans are reviewed monthly by suitably qualified staff and updated with any changes in need as they arise. The manager told us they are currently working with staff to further increase the personalised detail in people's plans.

People are cared for by kind, respectful, and caring staff who know them well. We saw people were well dressed, with clean clothing, clean hands and nails, and brushed hair during our visit. We saw care staff supporting people to eat their meals were patient and offered gentle encouragement. One relative told us "*care here is excellent and they genuinely care about people*". Another person visiting told us their friend is "*clearly so well cared for*". People we spoke to told us they were happy living in the home and felt well cared for. This was supported by records of feedback collected by the home as part of their quality of care review process.

People told us they receive the support they need from care staff. Care staff know people well and can explain individual care and support needs; this is mirrored people's personal plans. However, we saw records of daily care do not consistently reflect that care is given as planned. The manager is actively working with staff to improve this through raising awareness and providing additional training where required.

The service provider has effective infection prevention and control procedures in place to keep people and visitors safe. We saw domestic staff cleaning the rooms and communal areas throughout our visit, and rotas show they are in the home on the majority of the days each week. There are good levels of personal protective equipment (PPE) in the home. The provider ensures appropriate medicines management and administration practices are followed in the home.

Environment

The home is warm and welcoming, with communal spaces on the ground and first floor, and a separate dining room. The dining room is pleasantly laid out with pretty place settings, glassware and flowers and provides an enhanced mealtime experience for people. Corridors are uncluttered and the home is clean and free of malodours.

The grounds are well maintained, and the gardens wrap around the home and are accessible from the conservatory via a ramp. Flower beds and borders are well stocked and many rooms we saw had views over the gardens. People told us they liked their rooms, which we saw were clean and tidy and were personalised with large furniture items fixed to the walls for safety. All ensuite bathrooms we saw were clean and had storage space for people's toiletries.

The home has a large amount of specialist equipment to assist with people's mobility and care needs. The service provider plans to create more storage space in the grounds to prevent communal areas becoming cluttered. Records show equipment is serviced and maintained regularly. The RI and manager are working on contingency plans to ensure that people's well-being outcomes are not impacted in the event of equipment breakdown or failure.

The service provider has a rolling plan of maintenance and refurbishment in place for bedrooms, bathrooms, and communal areas. The maintenance logs show issues raised by staff are dealt with in a timely way and monitored by management. The service provider ensures regular monitoring of health and safety in the home including fire alarm testing and drills. Health and safety risks are identified and dealt with in a timely way. The home has recently received a food hygiene rating of five, which is the highest rating available.

Leadership and Management

There are robust governance arrangements in place for the oversight of the service. There are policies and procedures in place to guide staff, and the manager completes regular audits of the day to day running of the home. The RI is in regular contact with the manager and meets with them at least monthly to review the outcomes of their audits. Records show the RI makes regular visits to the home during which they speak with people and staff, conducts a tour of the premises to check for issues that need addressing, and reviews a selection of records. There are suitable arrangements in place for ongoing management of the home if the manager is absent.

There are measures in place to monitor the quality of care provided in the home, including regular opportunities for people to provide feedback via resident meetings, speaking with the manager, and feedback questionnaires sent out to relatives. Professionals we spoke to were positive about the care provided and the management of the home. The statement of purpose is available in both Welsh and English, but the service provider is reminded to ensure CIW and commissioners receive updated copies.

People can be assured there are appropriate numbers of trained staff working in the home each day and night. The manager uses agency staff to cover gaps in the rota but ensures the same agency staff are used repeatedly to maintain continuity of care. The manager is actively recruiting to fill vacancies in the home. Records show staff receive the training they require to meet people's needs. Training compliance is monitored by management.

Staff receive one to one supervision with the manager or their department supervisor. Care staff told us they feel well supported by management, and records of team meetings show the manager maintains open communication with staff. We saw the frequency of one to one supervision is not consistent for all staff; we raised this with the manager during inspection and plans are in place to address this.

New staff undergo checks to ensure they are suitably qualified and experienced for their role. Recruitment and vetting processes were updated during our inspection to ensure appropriate information about applicants is kept on file. Records show registrations for all staff with relevant staff regulatory bodies are routinely monitored and updated. The provider monitors Disclosure Barring Service (DBS) checks for staff on a rolling basis as part of ongoing staff vetting checks 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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