



## Inspection Report on

**Plas Y Bryn**

**Plas Y Bryn Nursing Home  
31 Tan Y Bryn Road  
Rhos On Sea  
Colwyn Bay  
LL28 4AD**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

18/12/2023

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## About Plas Y Bryn

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Elmtree Healthcare Limited
Registered places	18
Language of the service	Both
Previous Care Inspectorate Wales inspection	14 November 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 receive care and support from staff who understand them and meet their needs. Staff comments include “*a good level of care is provided*” to people using a person-centred approach. Detailed personal plans inform staff about the support people want from them. People engage in activities, pursue their own interests and staff ensure their goals are being achieved. The management and staff team build positive and supportive relationships with people. They also encourage them to keep in contact with people who are important to them.

Staff enjoy working at Plas Y Bryn. They feel valued, supported and are able to learn and develop in their roles. Additional support for staff is being introduced to ensure good communication and provide opportunities for them to discuss, reflect and improve their practice.

There is good leadership and management of the service. The manager and deputy manager work together and are making changes to improve the service. The Responsible Individual (RI) carries out visits to the service, looking at what works well and any improvements needed. Investment has been made to the home both internally and externally.

## Well-being

People have control over their day-to-day lives. They told us they are able to make choices and are included in decisions about what they want to do each day. Resident and one to one meetings as well as regular reviews of care and support, provide opportunities for people to make changes in their lives. People are listened to and their opinions and rights are respected. They can be part of the recruitment of new staff and are involved in choosing who they want to support them. We saw the manager speaking in Welsh with someone and were told the deputy manager and a couple of care staff and nursing staff are also Welsh speaking. People have a key to their own rooms and a person told us they use their own mobile to ring their family members.

Peoples physical, mental health and emotional wellbeing needs are met. They have access to healthcare services with appointments, referrals and meetings held with professionals as required. Staff promote people's health and wellbeing and progress is being made in encouraging them to lead healthier lifestyles. A range of activities are available for people. People spoke about the things they like to do for example playing games and going out for meals and drinks. They have access to a driver and transport so they can go out to different places. We saw a new activities room was being prepared and someone told us they were looking forward to baking in it.

People are protected from abuse and neglect. Risk assessments are in place with approaches and strategies to keep people safe. People told us they are able to raise concerns. Staff receive safeguarding training with policies in place for them to follow. People have positive relationships with care workers who know them well and they can trust. Incident and accident forms are completed as required and the manager told us these are reported to the relevant professionals. A professional told us *"They will notify us of any issues or problems that arise"* with people.

People live in a home which suits their needs and encourages their independence. Their rooms are personalised and they are supported to keep them clean and tidy. Improvements are being made with the redecoration of the home. The garden area is also being further enhanced for people to access and enjoy.

## Care and Support

People have accurate, detailed and up-to-date personal plans. Plans and other relevant information is very detailed informing care staff how best to support people. Plans include people's preferences, likes and dislikes as well as some very specific routines staff need to be aware of to ensure consistency and continuity. Daily records show care and support is offered in line with people's plans. Plans are reviewed and updated regularly, with any changes being communicated with the staff team promptly.

People are provided with good quality care and support; consulted with and consideration is given to their personal wishes and any risks. A member of staff commented "*I feel that we now have more time to spend with specific residents, for example going out for walks*", spending time in people's rooms talking and "*making their day more enjoyable for them and providing them with company*". People are achieving their goals including gaining meaningful employment. People are encouraged to maintain important relationships and reconnect with family members with support from care workers to contact, visit and spend time with them. Activities are available with a person employed to facilitate these. A new activities room has been created which includes a kitchen people can use to help increase their independence and skills. During our visit the local school children came to sing Christmas carols and an aromatherapist was also visiting a person. There are two vehicles and an allocated driver available for people to go out when they want to. There are assessments, approaches and strategies for staff to support people appropriately and reduce any risks. Positive risk taking is encouraged, opening up more opportunities and experiences to further enhance people's quality of life.

People are supported to access healthcare and other services to maintain their health, development and well-being. Personal plans contain detailed information about professionals involved and any advice or instructions for staff to follow. All health referrals, appointments and correspondence are recorded providing a clear account of any actions and decisions made. Professional's comments include "*I always find the staff welcoming and knowledgeable*" about people. People are achieving their goals regarding their health for example weight loss.

The service promotes hygienic practices and manages risk of infection. Domestic staff ensure the cleanliness of the home. Infection control audits are carried out to identify and address any issues. Staff receive infection control training, there is a policy for them to follow and they have access to personal protective equipment (PPE).

## Environment

People live in a home which provides a suitable environment for them. Their rooms are personalised and contain their own belongings and items which are important to them. Each person has their own key to their door and their privacy is respected by staff. People can spend time with other individuals living there and staff in either the lounge or dining room. Christmas decorations have been put up in different areas. The home is kept warm and clean throughout. Improvements have been made to how the home looks with redecoration underway. The manager and staff confirmed they are able to purchase any items that are needed. There is a large garden area which is being developed with decking and a seating area provided for people to enjoy, weather permitting.

The service provider identifies and mitigates risks to health and safety. There are systems in place to monitor and check the environment and keep it safe. Audits are completed including environmental and health and safety to identify and address any issues. There is a maintenance plan in place which shows what work has already been completed and what is still to be done. Fire checks are completed and recorded and people have personal emergency evacuation plans (PEEPs) in place. We spoke with the manager about adding more detail to these documents and discussing the frequency of fire drills with the fire service.

## Leadership and Management

Comprehensive governance arrangements are in place which support the smooth operation of the service. The RI visits Plas Y Bryn every three months to look around the service, view records and speak with people and staff. They also complete six monthly quality-of-care reviews looking at what works well and any improvements needed. A range of audits are also carried out to identify any issues. A new manager has been appointed who is supported by the deputy manager, they both know the service and people very well and work together to make changes. There is a statement of purpose in place however, this is being updated to reflect the current management arrangements. Different ways of working are being introduced by the manager to ensure good communication with everyone working at Plas Y Bryn. Professionals are very complimentary about the manager, who, they said is settling in well and has started to implement changes for the better. They also told us the manager gives their *“professional opinion in relation to care, support and capacity which is always helpful”*. Comments from professionals include *“All my contact and dealings with the home have only been positive (especially of recent)”* and *“Happy management, happy staff”*. A positive culture is promoted with an open-door policy. Management lead by example and lessons are learnt to ensure safe practices are in place and support for staff is increased.

People are supported by staff who have been recruited, trained and are supervised in their roles. All the relevant recruitment documentation is obtained including disclosure and barring service (DBS) checks. The RI's quality of care review refers to actively recruiting Welsh speaking staff. There is some use of agency staff who are already familiar with the home and the people living there. Staff told us they enjoy working at Plas Y Bryn. Comments include *“I feel that the team works well together, the management are very supportive”*. When asked if they feel valued and supported, staff responded with either excellent or good. Employee of the month is in place which celebrates staff members, acknowledging what they bring to the service and they receive a reward in recognition of this. Staff receive supervisions which are carried out more frequently than is required. There is an on-call system in place which is being developed further. A trainer is employed and they are currently updating the staff training record. Staff consider their learning and development to be either excellent or good. Comments include *“We get a good amount of training”* and *“I feel that I have been able to progress throughout my career very well”*.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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