

Inspection Report on

Plas Isaf Care Home

30-32 Llannerch Road West Rhos On Sea Colwyn Bay LL28 4AS

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed 28 February 2022



About Plas Isaf Care Home

Type of care provided	Care Home Service	
	Adults Without Nursing	
Registered Provider	Elmtree Healthcare Limited	
Registered places	32	
Language of the service	Both	
Previous Care Inspectorate Wales inspection	19 September 2019	
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.	

Summary

Plas Isaf has undergone a renovation in recent years and is decorated to a good standard. The home has good standards of hygiene and infection control. The management and staff teams have coped well with the challenges of the Covid pandemic. The managers have frequently covered shifts themselves and have been visible and supportive to the staff team. Care support workers spoken with said they feel well supported, supervised, and trained. People benefit from being cared for by a stable staff team who know them well and can offer appropriate care and reassurance. The manager needs to attain their level five qualification and register with Social Care Wales (SCW), as per regulatory requirements. This will be tested in the next inspection.

Well-being

People have a voice and can make daily choices. We spoke with residents who said they were "very well cared for". The care support workers and manager were observed to know people well and were laughing and chatting with people. The residents told us they could choose when to get up and go to bed and what to do with their day. They said the food was "very nice" and had plenty of choice. We observed people had a drink to hand and were regularly offered fluids. People said staff were kind and respectful, we saw staff knew people by name. People's personal plans documented their likes and dislikes and were written according to people's needs.

People's physical and mental health are monitored. We found health monitoring, for example recording people's weights, were documented regularly in care records. People were referred to health care professionals appropriately and in a timely way. GP reviews were carefully documented as were any outcomes and instructions.

We saw people are offered activities and socialisation. People were sitting in the large lounge area watching TV and chatting. We were shown arts and crafts projects which people have completed this year. There are photos of people enjoying events such as Christmas and Valentines. People told us they are offered things to do during the day.

People are protected from neglect and abuse. We saw Deprivation of Liberty Safeguarding (DoLS), documents were in place for vulnerable people, they were appropriate to the person's situation and up to date. Staff receive safeguarding training and told us they knew how to contact authorities should they have any concerns.

The environment is fit for purpose. The home is clean and tidy and decorated to a good standard. People can personalise their rooms with things of importance to them so they can feel at home.

Care and Support

People Are provided with the care they need. People can access professional health care advice as required. People's personal plans are computer based, the system flags up when reviews and updates are needed We saw personal plans address people's physical, mental and social needs. They are detailed and centred to the person's needs and preferences and so provide care staff with good instruction. We observed staff giving care in a considerate and sensitive manner. We noted call bells were responded to in a timely way. People have risk assessments for things such as falls and have mobility assessments in place.

People have access to food and drink. The home has regular supermarket deliveries and food is cooked from fresh ingredients. We saw people are offered varied menus and special diets are catered for. People are offered drinks regularly. Care support workers told us they prioritise good hydration for residents as it is important for their health.

Staff adhere to infection control guidance, and we saw they wear Personal Protective Equipment (PPE), appropriately. There are several hand sanitising products in the home and plenty of stock. There is a Covid policy in place which also covers visiting. Families and friends can visit people in a safe manner according to the home's Covid risk assessment to ensure the safety of all.

Environment

The environment is well maintained. The home has been renovated in recent years and is decorated to a good standard. The home is clean and tidy, and corridors and fire escapes are free of obstructions. The medicines room is very clean, tidy and well organised and has good safety systems in place. The lounges are a good size and people can select to be sociable or sit in a quieter area. People's rooms are compliant to regulations and are personalised to the person's taste. The laundry room is suitable for its' purpose; however, consideration is required regarding how to prevent cross over of clean laundry leaving, and dirty laundry entering the room to ensure good infection control.

The service is mindful of health and safety. Equipment is checked and serviced as per manufacturer's instructions. Fire checks are regularly performed and other safety checks as per regulations to ensure people's safety.

Leadership and Management

The service has governance procedures in place to ensure the smooth running of the service. Aspects of the service are regularly audited to ensure people receive a quality service. The responsible individual (RI) has produced reports, as per the requirements of the regulations, to demonstrate the quality of the service provided. However, the RI did not physically visit the home and speak to people and staff because of the Covid pandemic regarding the last report produced. These actions are required to be compliant to the regulations. This will be tested in the next inspection. There is an improved managerial structure in place with a manager and deputy manager in place. The manager is required to complete the level five qualification to register with Social Care Wales as per regulatory requirements. This will also be tested in the next inspection.

Employment procedures are satisfactory. We saw from personnel files viewed; checks are in place to ensure staff are safe to work with vulnerable adults.

Care Inspectorate Wales have not been notified of any financial difficulties regarding the service. People can access equipment to aid their care. Fresh stocks of food are ordered regularly. The home is in a good state of repair.

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		
67	The responsible individual is required to appoint a manager who is registered with Social Care Wales to manage the delivery of the service on a day to day basis.	New		

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