

Inspection Report on

Yr Hen Rheithordy

Amlwch

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

22/11/2023

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About Yr Hen Rheithordy

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Cartrefi Cymru Co-operative Ltd
Registered places	5
Language of the service	Both
Previous Care Inspectorate Wales inspection	20 December 2019
Does this service promote Welsh language and culture?	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 use the service get on well with the care workers who support them, and they praise the standard of care they receive. Activities, which are of interest to people, are arranged within the community. Individuals are involved in creating their personal plans. Their views and what's important to them are documented. Personal plans are not always kept up to date when changes occur in people's circumstances, and this requires improvements. People receive their medication as prescribed, but the arrangements in place for people who self-medicate requires attention. The environment is homely but requires urgent attention in relation to the maintenance and upkeep of the building. Health and safety risks within the care home are not always adequately managed and the level of cleanliness also needs urgent improvements to be made. Care workers enjoy their work, they feel supported in their roles and are provided with relevant training. Care workers do not always receive up to date specialist training and they do not receive one to one supervision sessions as often as they should be. Arrangements are in place to monitor the quality of the service provided, but these are not always effective at identifying areas of the service which require improvements to be made.

Well-being

The arrangements in place for care planning and risk assessing are not as effective as they should be. Personal plans record people's preferences and their chosen daily routines. However, they are not always kept up to date after changes have occurred to their needs. This means care workers do not always have access to written information regarding people's needs, which could affect the care and support people receive. Risk assessments are not always in place when required, which poses a risk to people's health and safety.

People like and get on well with the care workers who support them. They told us: *"the staff are caring, kind and very helpful"*. We saw people are happy using the service. Care workers interact with people, in their preferred language, in a relaxed and caring manner. People respond positively to care workers by smiling and laughing in their company. Efforts are made to get to know what people enjoy doing and activities are planned around people's individual interests. This includes going on day trips and taking part in social community events. People's voices are heard as part of the care planning process, and they are involved in decisions about the care they receive.

People are protected from neglect and abuse. Staff receive safeguarding training and demonstrate a clear understanding of their responsibilities in relation to protecting people from harm. A safeguarding policy is in place and reports are made appropriately to the local authority when required.

People's health is not always fully protected. There is a medication policy in place and medication training is provided, but medication management at the service does not follow the correct guidelines. The medication of people who self-medicate is not always safely stored, and risk assessments are not in place to show people can safely manage their own medication.

The environment within the home does not support people to achieve a positive sense of well-being. The environment is not well maintained, and this is affecting people's comfort and their sense of worth. Some areas of the home are not clean, and this poses an infection control risk to people's health. Health and safety risks within the environment are not proactively identified and this means measures are not in place to reduce risks to people's safety.

Care and Support

Personal plans record people's individual preferences regarding how they wish to be supported, but they are not updated following changes in people's needs. Assessment documents are obtained from professionals who know people before the person comes to the service. Personal plans show people, and their families are involved in their creation. What is important to each person is recorded within personal plans as well as people's strengths. However, changes to people's needs are not always reflected within their personal plans. This means care workers do not always have access to up-to-date written information regarding people's care and support needs. Risk assessments are not always effective. We saw they do not always fully record the known risks to people's health and safety and the measures in place to mitigate the risks. This is an area for improvement, and we expect the provider to take action.

The arrangements in place for medicines management are not robust. People's personal plans do not always record accurate information regarding their medication. We discussed this with the manager who told us personal plans had not been updated to show this change. We found risk assessments are not always in place when people are self-managing their medication. This is not in line with the service's own medication policy. We saw an over-the-counter medication was stored in a person's room, which should have been kept securely. The service's medication policy states medication in people's own rooms should be locked away. This is to reduce the risk of an unauthorised person accessing the medication. This is placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

The infection control practices in place are ineffective and do not promote people's health. We found most areas of the care home were clean and tidy. However, the shower room had areas which were not clean. The shower curtain and shower surround frame are not clean, and a toilet surround frame is showing signs of rust. The lack of cleanliness in the shower room compromises people's sense of worth and their comfort. This is also placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Environment

Risks within the environment are not always identified and this means people's safety is not fully protected. During our walk around the care home, we saw several risks to people's safety which required attention and improvement. Heavy furniture in bedrooms, such as wardrobes, are not secured to the walls. This poses a risk to people who are at risk of falls, as they could pull the wardrobe upon themselves. Radiators are hot to touch and uncovered, and this poses a risk of scalds. In the shower room a glass panel, within a surround frame, has come away from the wall fixing and this is not safe. This is placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Routine servicing of equipment and building utilities take place. Arrangements are in place to promote fire safety at the service. Regular fire alarm tests and fire drills take place. The fire alarm system is serviced by an external contractor as is required. Care workers complete fire safety training. Personal Emergency Evacuation Plans (PEEPS) are in place to record the support each person requires to leave the premises safely in the event of a fire, or other emergency. Equipment such as hoists and the passenger lift are serviced, as is required, to ensure they are safe for people to use. Gas and electrical systems and appliances are also serviced when required to ensure they are operating safely.

Not all areas of the care home are kept clean and well-maintained, and this is affecting people's ability to achieve their outcomes. Care workers told us they feel the condition of the care home is *"letting us down."* The wooden window frames are damaged, and this is causing rainwater to come into some rooms, causing visible damp on the wall in one room. In another bedroom a window could not be fully closed at the time of our visit. The room did not feel cold, due to the heating within the room, however not being able to fully close the window could potentially cause discomfort to people by way of a draught, or noise or rain coming into the room. This is placing people's health and well-being at risk, and we have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Leadership and Management

People can access written information regarding the service provided. The statement of purpose described the service which can be provided and how it is delivered. There is a service user guide in place, which is written in an easy read and pictorial form. This means this information is accessible to people who use the service. The document includes information regarding how people can complain about the service, if they need to do so.

Care workers are recruited safely. Pre-employment suitability checks are completed before new care workers are accepted to work at the service. Care workers told us they enjoy their roles, they feel supported and confirmed regular team meetings take place. Records we saw show care workers are not receiving one-to-one formal supervision from their manager, every three months, which is required. We also saw care workers complete mandatory training. However, they are not always provided with the required specialist training at regular intervals, to ensure their knowledge is up to date with current guidelines. These are areas for improvement, and we expect the provider to take action.

The arrangements in place to monitor the quality of the service provided are not effective and does not identify areas of the service which require improvement. We saw regular audits and monitoring visits take place at the service. However, these processes had not identified each of the areas of the service which we identified during our visit as requiring urgent attention or improvement. Some areas of the service provided compromise people's health and safety in addition to impacting upon people's ability to meet their well-being outcomes. The provider must take immediate action to address this issue.

The service provider has sufficient oversight of the financial arrangements in place at the service so that it is financially sustainable. However, the service provider does not own the actual care home premises. This means the service provider is unable to directly invest in making improvements to the building itself, which is required to support people who use the service to 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. 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		
58	The arrangements in place for medicines management are not robust. Ensure records regarding medication are kept up to date. Ensure the protocols in place to enable people to self medicate are in line with the service provider's medication policy.	New		
56	The service provider has not ensured all areas of the care home are clean. Ensure the care home is clean.	New		
44	The service provider has not ensured the care home is well-maintained throughout and that repairs and works required are promptly completed.	New		
8	The systems in place for monitoring the quality of the service is not effective and does not adequately identify areas of the service which needs improvement. Review the monitoring arrangements in place at the service to ensure they proactively identify	New		

	areas of the service which are not operating as they should be.	
57	The service provider has not ensured health and safety risks within the environment are identified and managed so far as possible. Improvements are required to be made to ensure people's health and safety are protected within the environment.	New
44(9)(a)	The registered person is not complaint with regulation 44 (4)-(a) (d) (g) (h), (9) (a).	Achieved

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	
15	People's personal plans do not record up to date information regarding their care and support needs. Personal plans should record detailed information regarding people's care needs and how they should be supported. Risk assessments should be in place to record known risks to people's health and safety and the measures in place to mitigate the risks.	New	
36	We found care workers were not receiving one-to- one supervision sessions every three months, which is required. Care workers should receive one-to-one supervision sessions every three months. We found care workers were not receiving specialist training as often as required. All care workers should receive specialist training to ensure they provide the correct care to the people they are supporting.	New	

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