



## Inspection Report on

**Plas Newydd Care Home**

**Pwllheli Road  
Criccieth  
LL52 0RR**

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

**This report is also available in Welsh**

**Date Inspection Completed**

17/08/2023

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## About Plas Newydd Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pangea Healthcare Ltd
Registered places	18
Language of the service	Both
Previous Care Inspectorate Wales inspection	09 May 2023
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

This inspection was to establish whether the provider and responsible individual (RI) have made the required improvements to the service following actions required at the last inspection. We therefore did not consider all the inspection themes in detail.

Work has commenced to improve the environment, but many areas identified at the last inspection remain outstanding. We noted several health and safety issues which are of continued concern. We also observed hygiene issues regarding the environment. External contractors are addressing some of the environmental issues.

There is currently no manager at the service, with the RI overseeing the day-to-day management. Staff development and training for all staff has improved but needs to be sustained to improve their skills and knowledge.

## Well-being

People have choice and control over their day-to-day lives. Staff treat people with respect, and we saw staff respond promptly to individuals' needs and preferences. People are relaxed and comfortable in the presence of staff who converse in a friendly, caring, and respectful way. People can choose to stay in their bedrooms or join others in the lounge or entrance foyer. One person told us they were happy with the care and support provided by staff.

People do things that matter to them and have some opportunities to experience a choice of activities. They can relax in their bedrooms or in one of the communal areas to chat, watch television or join in activities. A selection of books, games and craft items are readily available around the home. One visitor told us they would like to see people offered more activities.

People's physical and mental health is looked after, and we saw personal plans have been updated to include personal preferences. A new electronic system has been introduced to include personal plans and risk assessments.

The quality of the environment is a long-standing issue and many matters raised in previous inspections continue. Some areas of the environment have received attention but the poor condition of the building means people are not always valued or respected. When discussing the environment, one person told us they were pleased with new flooring in their bedroom. A visitor and staff told us they would like to see improvements in the cleanliness of the premises. The environment does not support people's well-being or help them to achieve their desired outcomes.

We saw improvements in staff development. Staff have received safeguarding training to ensure they have the knowledge to protect people from harm and neglect.

The 'Active Offer' of the Welsh language is provided. We heard staff speaking both Welsh and English to people to help them feel at home.

## Care and Support

We observed staff attend to people's needs in a caring manner. Staff rotas show there are three care workers on duty during the day and two during the night. The staff told us they felt there are enough care workers on duty to meet the needs of people currently at the service. The recruitment of a manager and domestic staff is ongoing.

People receive care and support that meets their individual needs. A new digital software programme has been introduced. Care workers use the programme on the services mobile devices to store all personal documentation regarding people. This includes personal plans, and risk assessments providing staff with information to support and care for people in line with their identified needs.

People told us they can choose how they spend their days, either in their bedroom or in one of the communal areas. Our observations show some people sit in the lounge watching television, others sit in the entrance foyer or in the personal surroundings of their bedrooms. We heard staff interact with people in a meaningful way, with one-to-one activities taking place during the afternoon. Activities such as nail care and board games are offered. Visitors are welcome and can spend the day with their relatives if they wish. One person receiving support told us *"Staff are kind, the food is good, I'm lucky to be here"*, another said, *"The food is good, and I can ask for anything I want"*. Relatives told us *"Very good in every way, food good and staff are aware of my relative's needs. The home could be cleaner and more activities for people."* We heard staff using both Welsh and English language with people according to their preference, to help people feel they belong.

During this inspection we did not look at medication administration and storage in detail. Senior care staff take responsibility for the administration and storage of medication. The senior staff and RI are reviewing the storage of medication and medication room to create a secure clinical area. The storage of controlled drugs and other valuables does not comply with current guidance and legislation. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

## Environment

We noted several health and safety issues during previous inspections pertaining to trip hazards and risk of injury for people. Some of these risks remain outstanding and continue to place people's health and well-being at risk, and therefore the priority action notice remains open. The provider must take immediate action to address these failings.

The environment does not promote people to achieve their personal well-being outcomes. The food hygiene rating for the home remains at three out of a possible five for hygiene standards. We saw the kitchen has been cleaned but further work is required to improve the standards of the preparation of food and serving areas. Other areas in the home also require a deep clean such as toilets, some walls, and carpets. The recruitment of domestic staff is ongoing with two new domestic staff currently going through the employment process. Staff and visitors to the home told us the home could be cleaner. Health and safety issues are ongoing and do not promote people's well-being, the priority action notice therefore remains in place. The provider must take immediate action to address these issues.

Other areas around the home continue to need major work to enhance the quality of life and wellbeing of people living at the home. Some bedrooms have had new flooring replaced and one person told us they were happy with their new flooring. The RI has commissioned external contractors to rectify the issues. Environmental issues are ongoing but there is continued risk to people's well-being, the priority action notice, therefore, remains in place. The provider must take immediate action to address this.

## Leadership and Management

The provider has some governance arrangements in place to support the operation of the service. The RI is currently at the service providing day-to-day management support. There is no manager at the service, with senior care workers responsible for some management tasks. Recruitment processes are in place, including processes to recruit a manager and domestic staff. Staff told us they are supported by the RI and staff morale has improved.

The RI has produced a quality-of-care review report. The report refers to the views of people, but does not evidence the RI has asked their families, staff and visiting professionals their views of the service to inform improvements. The RI has not analysed audit information regarding quality markers in the service such as incidents and accidents, falls rates, safeguarding, staffing issues and environmental issues. Therefore, many of the issues we identified at the last inspection remain.

Leadership and management issues are ongoing and do not promote people's health and well-being, the priority action notice therefore remains in place. The provider must take immediate action to address these issues.

Improvements have been made in training and supervision of staff. Staff have attended training including safeguarding, food hygiene, client moving and handling and first aid. We emphasised to the RI that training opportunities should be ongoing to enable staff to update their skills and maintain their registration with Social Care Wales (SCW). Staff told us they receive supervision; we explained this needs to be sustained in the absence of a manager.

### 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
66	The provider has not supervised the management of the service sufficiently to ensure the proper management, quality, safety and effectiveness of the service.	Not Achieved
57	People cannot always be assured of all practicable risks to their person being mitigated as far as is possible.	Not Achieved
56	The provider has not ensured the home meets reasonable standards of hygiene in some areas.	Not 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
58	The storage of controlled drugs is inadequate. The service provider must have arrangements in place to ensure that medications are stored safely.	New

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**Date Published** 20/10/2023