

Inspection Report on

Alexandra Nursing Home

Alexandra Nursing Home Sandilands Road Tywyn LL36 9AS

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

16/02/2023



About Alexandra Nursing Home

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	ALEXANDRA TYWYN LIMITED
Registered places	25
Language of the service	Both
Previous Care Inspectorate Wales inspection	This is the first inspection under RISCA since registration with CIW in August 2022.
Does this service provide the Welsh Language active offer?	This service provides an 'Active Offer' of the Welsh language and promotes the use of the Welsh language and culture.

Summary

People are happy with the care and support they receive at Alexandra. Care staff are knowledgeable, respectful, and caring, and support people with their care needs in a dignified and timely manner. Opportunities for people to take part in activities are being developed. People receive visitors and can choose how they spend their day.

A recruitment process is in place including all the necessary checks. Staff receive training to ensure they are competent and skilled. Staff development in relation to supervision and appraisals are being addressed by the responsible individual (RI) and manager. Staff handover meetings take place to share relevant information regarding people's well-being.

The premises are in their own grounds with panoramic views. People are happy with the recent changes to the environment and furnishings. Attention is given to ensuring the home is clean and tidy with infection prevention and health and safety measures in place.

Well-being

People have control over most aspects of their day-to-day life. A copy of the Statement of Purpose (SoP) is available at the home which informs people what to expect. People are involved in decisions that may affect them. Staff build relationships with people by spending effective one-to-one time with them, and seeking people's views and preferences. Relatives' involvement is also considered as part of the assessment process.

The service promotes people's physical and mental health. Referrals are made to a range of healthcare professionals to support people in a timely way. Training by specific health professionals ensure staff understand their responsibilities to report any concerns about people's wellbeing and safety.

The accommodation supports people to achieve their outcomes. The new provider has invested in redecorating bedrooms and communal areas with an ongoing programme of refurbishment in place. Improvements seen and discussions with people conclude there are positive outcomes for people using the service.

People have access to information when they need it. Management is approachable and has an open-door policy. Communication with people, staff, and relatives, is good. The manager is supportive, and the RI has good oversight of the service. Up-to-date written information about the service is available. Policies and procedures are in place to help protect people from harm or abuse. Risk assessments are in place to safeguard people and staff.

Care and Support

People receive care and support that meets their individual needs. Personal plans and risk assessments are clear, and provide staff with information to support and care for people in line with their identified needs. We saw personal plans show information gathered from people, their relatives and health and social care professionals. Daily notes and charts show people receive the care they need when it is required. Personal plans are reviewed and updated to reflect current needs of people using the service.

People receive good support from friendly, respectful, and caring staff. Activities are being developed with a designated activity co-ordinator, spending dedicated time with people to develop individual activity programmes. In addition, people have choice to participate in group activities celebrating seasonal events such as pancake day, Valentine's Day and St David's day. We heard staff using both Welsh and English language dependent on the persons preference. People receiving support told us "I'm very lucky to be here," "Brilliant care home, I haven't got a negative word to say about them" and "11 out of 10 staff are very kind."

People remain as healthy as they can be due to care provided, timely referrals to health professionals, and effective administration of medication. People receive the medication they require safely. Staff competency is checked before they can administer medication. People's dietary needs are considered, and healthy, nutritious meals ensure people remain well. One person told us their preferred choice of diet is respected by staff. We saw hot and cold refreshments and a choice of home-made cakes available.

People's safety is well maintained. There are processes in place to safeguard people. Individual risk assessments are in place and staff are aware of the importance of making the relevant referral to the local authority if they have any concerns about the people they support. Care workers told us they are aware of the safeguarding procedures and staff receive up to date safeguarding training.

Environment

The environment is safe, homely, and warm. Both internal and external parts of the home are undergoing extensive renovations and refurbishment. New furniture has been provided in both communal and individual bedrooms. People told us they were involved in the choice of décor and furnishings. Areas are decorated to a good standard and individual rooms have personal items of memorabilia. All parts are accessible for people with mobility difficulties with a passenger lift for access to the first-floor bedrooms and bathrooms.

Overall, the day-to-day maintenance of the building is to a good standard. The periodic testing records show that utilities, equipment, and fire safety equipment have regular checks and servicing. People have a personal emergency evacuation plan specific to their individual support needs.

Infection control measures continue to be in place to ensure people are safe from infections. Visitors to the home are requested to follow current guidelines in relation to infection control.

Leadership and Management

There are arrangements to maintain oversight of the service, and processes to monitor the quality of the service. The RI conducts regular visits and discusses residents, staffing, the environment, complaints, health and safety, and compliance.

People are supported by a service that employ staff who are suitably fit and have the knowledge, competency, and skills to meet their personal needs. Care staff are registered with Social Care Wales (SCW). Records show required checks are carried out prior to commencing employment. The providers have a selection and vetting process, including obtaining references. Staff are supported to undertake training to enable them to fulfil the requirements of their role and meet the needs of people using the service. There is training in mandatory subjects which includes first aid, moving and handling and safeguarding. Staff said they attend training and are aware of the safeguarding procedures.

Records show individual supervision is provided. The management is in the process of redeveloping formal supervision records for staff to ensure the annual appraisals are incorporated into the schedules. Staff have access to the home's mobile phone messaging app which informs staff of any health and safety issues, training and changes to service delivery. Formal staff meetings are being reintroduced for all staff. Staff rotas show there are sufficient staff on duty to meet the needs of people living in the home.

The service has a SoP, which clearly describes who the service is for and how it will be delivered. People are given information that describes the service and how to make a complaint.

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 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		

N/A	No non-compliance of this type was identified at this	N/A
	inspection	

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