



Inspection Report on

Cerrig yr Afon nursing home

**Resicare Ltd
Cerrig Yr Afon Nursing Home
Caernarfon Road
Y Felinheli
LL56 4NX**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

04/09/2024

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About Cerrig yr Afon nursing home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Healthcare Management Solutions
Registered places	57
Language of the service	Both
Previous Care Inspectorate Wales inspection	8 November 2023
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 are happy with the care and support they receive at Cerrig Yr Afon and spoke highly of all the staff who work there.

The service is currently in administration and a specialist company have been appointed to manage the service until a permanent buyer is found.

Improvements within the service provision were identified at the last inspection and we saw at this inspection, these improvements have been sustained and continue to be developed.

People are listened to and supported to spend their time how they want to. People receive care and support which is person centred and meets their identified needs. There are sufficient staff employed at the service and good recruitment processes to ensure staff are safe and suitable to work with adults at risk.

The manager is well supported by a regional manager and the responsible individual (RI), who work collaboratively to ensure good oversight of the service provision. The RI carries out their role in line with the requirements of the Regulations.

Well-being

People have choice and control over their day-to-day life and their views are sought, listened to and actioned. We saw regular resident's meetings take place and there is a '*you said we did*' board which shows what suggestions have been made and what the provider has done to action these. People can choose when to get up and go to bed, where they want to spend their time, what activities they want to do and what they would like to eat and drink. We observed the lunchtime experience and saw people are supported to sit at the dining table or remain in the lounge or their rooms if they choose to. Staff take time to support people with their meals, chatting and providing gentle encouragement. There was music in the background which created a pleasant atmosphere. We saw where staff were concerned about a person, they reported this to the nurse, who assisted the person in a timely way. Meals appear appetising and people told us the food is very good. The catering staff meet many different dietary requirements in line with guidance from dieticians and speech and language professionals.

People are supported with their physical and mental wellbeing. Records show where health concerns are identified, the manager seeks medical advice and makes referrals to ensure people have the right support in place. Changes to care needs are updated within support plans. There is a detailed daily handover as well as a daily meeting, which ensures key messages and actions are communicated between the team and addressed. People have their health needs met by the registered nurses at the service or by the community district nursing team. Records show people have reviews with their GP and the manager told us the local surgery is currently reviewing all residents at the service to ensure their medication is appropriate for their needs. Additionally, staff ensure people's personal care needs are met and can access hairdressing and podiatry services to enhance their overall wellbeing.

People are supported to do things which matter to them and are offered the opportunity to take part in group and one to one activity. We saw people taking part in chair exercises where staff encouraged and motivated people, visitors can also take part. One person fed back that "*activity the other day was amazing, everyone laughing and cheering,*" another told us animals come to visit and they can have lunch with their husband. We spoke with family members and friends visiting their loved ones who all gave positive feedback about the service. Other activities seen included one to one discussion/reminiscing, colouring, reading, and watching tv or listening to music. People have access to specialist seating so they can spend time sitting in communal areas. We were told about other activities which take place in the service, including 'trips around the world' where people have tickets and passports to experience the culture, history, and food of specific countries for the day. Photos in the service document people having fun and celebrating special events.

People are protected from abuse and neglect. All staff complete safeguarding training and policies are in place to support people with reporting any concerns. These policies are in line with the All-Wales Safeguarding Procedures. The manager records and reports any safeguarding concerns appropriately to the local authority, health board and the Regulator.

Incidents, accidents, and safeguarding concerns are recorded and reviewed as part of the monthly quality auditing process to ensure all actions are met.

Care and Support

People receive care and support which is in line with their care needs and individual wishes. This is because the provider carries out initial assessments with people to ensure the service can meet their needs. We saw care records are detailed and up to date, providing information to care staff about what they need to do to support people safely and in a person-centred way. Care records contain a '*This is Me*' document which details information about people's life history, likes, dislikes, routines, family dynamics and what is important to them. We saw where changes have happened, care plans are updated to reflect this, and where people develop an additional care need, further plans are put in place. Care records are reviewed monthly, along with relevant aspects of monitoring such as pressure care, weight, diet, and nutrition. The provider utilises records by the health board which support detailed planning, review, and monitoring of people's wellbeing.

People have care and support delivered with dignity and respect. We observed warm and caring interactions between individuals and the staff who support them which was not only limited to the nurses and care staff, but included the maintenance, catering, activities, housekeeping, and administrative teams. People spoke positively about the staff who support them. One person told us "*Staff are magic,*" another said, "*I am made to feel part of the home.*" We saw people are involved in the daily running of the service by being encouraged to carry out gardening, small housekeeping tasks and conducting interviews. Where staff were carrying out aspects of their job, they did this alongside people, explaining what they were doing and engaging them in the task. On the day of inspection, we saw care staff are always present in all communal areas, so people do not have to seek out support. People in their rooms have call bells and drinks within reach and we saw care staff checking people on a regular basis to say hello and to encourage fluids. We saw call bells are answered promptly.

Medication is managed safely within the service. A recent medication audit by the health board was positive and we observed good practice on the day of inspection. Medication records are detailed and fully completed. There are processes in place to ensure appropriate administration and recording of 'as required' medication (PRN), topical creams and pain management medications.

Environment

People live in a service which is safe and promotes independence. The service is secure with visitors required to sign in and out, but people can move about inside the home without restriction. There is a maintenance team in place attending to the general upkeep of the service. Audits of the environment are carried out and acted upon. Due to the service being in administration, investment in the service is limited but we saw essential works in relation to health and safety and procurement of essential equipment have been actioned. The manager identified bed rail bumpers needed to be upgraded and this has been actioned. Some bedrooms have been decorated and some flooring has been replaced. Whilst the service requires some cosmetic redecoration, it is safe, warm, and secure. The housekeeping team work hard to ensure people live in a home which is clean and inviting. We found all areas of the home to be very clean and free from unpleasant odours. People's bedrooms are made up in the morning ready for them later in the day.

Infection prevention and control is managed appropriately in the service. Staff complete training in this area and we saw personal protective equipment (PPE) is available, worn and disposed of appropriately. Areas which may pose a risk to people such as the kitchen, laundry, and areas where cleaning products are stored are locked. We observed good food handling procedures, and the service was inspected by the Food Standards Agency in October 2023 and awarded a level 5 rating which demonstrates a high standard of food cleanliness, hygiene, and management.

People can choose to spend time in communal areas which offer a variety of seating to meet people's needs. Others choose to spend time in their rooms which we found to be clean, a good size and personalised with photos, soft furnishing, and personal items. Where people require specialist equipment to support their wellbeing, this is in good condition and serviced as required. The provider has replaced some profiling beds as required. The manager and maintenance person audit bedrooms and equipment to ensure it is in a good state of repair. We saw monitoring forms are in place and completed daily to ensure airflow mattresses and other pressure relieving equipment is working and on the right settings for the person.

Leadership and Management

People live in a service which is well managed by a dedicated and experienced team. The administrators have appointed the provider to manage the service. People, their families and staff at the service all report improvements in the service since the manager has been in post. Staff told us the service runs smoothly because people understand their delegated role and work as a team to support the people who live there. Processes are in place to manage the quality of care within the service through area specific audits and more widely in a monthly quality audit. The monthly quality audit provides an oversight of all areas of service provision, helping the provider to identify patterns, trends, and areas to be addressed. We saw the actions from these audits are reviewed to log progress and reach compliance. Documents are available in the service to support with good practice and to inform people about what they can expect from the service. Documents are available bilingually.

People are supported by staff who are safely recruited, well trained and appropriately supervised. We looked at recruitment records in the service and saw the appropriate pre-employment checks are carried out before a person begins working at the service. The provider has a robust induction process in place which ensures key training modules are completed before staff begin their shifts. Staff told us the induction process is good and they were well supported throughout their probation period. We looked at supervision records for all staff at the service and saw everyone has had an annual appraisal of their work and meets with the manager on a regular basis for one-to-one supervision. This supports staff in their role and encourages good practice. We looked at the training records for all staff at the service and saw all staff have completed the required training relevant to their role. The provider has recently changed to a new training platform and has identified that some refresher training has become overdue, this is being addressed and we saw within the quality audits the action being taken to support staff to complete refresher training. Nursing staff are supported with clinical training and continual professional development (CPD) as the provider works with the local health board and local authority to review training and access courses to ensure skills are up to date and meet the needs of people at the service.

The service is currently in administration, but the manager told us where essential works are needed or equipment replaced, the administration company meets these requests.

At this inspection, we saw the positive changes implemented at the last inspection have been sustained and the manager demonstrated a commitment to continuing these improvements. Without exception, everyone we spoke with or received feedback from spoke positively about the service, especially in relation to the management and the staff who work there.

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.

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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