

# Inspection Report on

Y Gilwen

Caernarfon

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

07/05/2024



## **About Y Gilwen**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Prestwood Residential Homes Ltd and CareTech Community Services Limited.
Registered places	6
Language of the service	Both
Previous Care Inspectorate Wales inspection	06 September 2022
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 living at the service, and they receive the care and support they require to achieve their individual outcomes. People's needs are discussed with them, and their care coordinators, before they move into the service. Written information is available to people regarding the service provided, so they can decide if it's a place they wish to live in. Personal plans are created with people, they record what is important to them and how they wish to be supported. These documents are not always completed promptly, and this area of the service requires improvement. Risk assessments are used to promote positive risk taking, whilst ensuring measures are in place to keep people as safe as possible.

The environment is homely, well maintained and safe. Ongoing maintenance takes place which means the home is comfortable and well kempt. People can personalise their own rooms to reflect their interests and tastes. Health and safety risks within the environment are overall identified and managed.

Care workers enjoy their work and feel well supported by the manager. Suitability checks are completed as part of the recruitment process for new care workers. Appropriate training and supervision sessions are provided. There are arrangements in place to regularly monitor the quality of the service and people are involved in quality-of-care reviews.

### Well-being

People are happy with the service provided and have positive relationships with the care workers. We saw people are relaxed in the company of care workers and they feel comfortable asking for support when required. As the manager and several care workers can converse bilingually, people can communicate their needs in their preferred language. Care workers listen and speak with people in a respectful manner. People told us they like their living environment and they can make their own choices regarding the layout and décor of their own rooms. This helps people to feel settled and at home at the service.

The service facilitates opportunities for people to do things they enjoy as well as developing their independence. People are supported to take part in social activities which they are interested in. This also means individuals can feel included in their community. Increasing people's confidence and their independence is encouraged. The environment within the care home includes daily life skills appliances, such as kitchens and laundry facilities, which enables people to do as much for themselves as they can. Care workers are familiar with people's abilities as well as the outcomes they want to achieve.

The care and support people require is known before each person arrives at the service. This ensures people can be confident the manager has considered whether the care home is a suitable place for them and can meet their needs. However, people's specific care and support needs are not always written within personal plans in a timely manner. This means there is a risk care workers may not always provide people with the correct care and support. This is an area of the service which requires improvement.

People contribute to decisions that affects their lives. Care documents show individuals are involved in planning how they wish to be supported, and their views and feelings are recorded. Each person decides how they want to spend their time and their preferred daily routines are respected. When people are unable to make decisions about important life matters, arrangements are made for appropriate formal support to be in place. This ensures decisions are only made in people's best interests, when there are no other possible options available. People's views are gathered and considered as part of the monitoring of the service provided and when considering its future development.

#### **Care and Support**

Arrangements are in place to understand people's care and support needs before they move into the service. Assessments completed by professionals, who are working with the person, are obtained by the manager as part of the preadmission process. The manager also meets people to explain what the service can provide and discuss their expectations of the service. This ensures the manager makes an informed decision, confirming the service can support people to meet their individual outcomes, when offering people a placement.

Personal plans are not always in place to record what support each person requires to meet their care needs. We saw care documentation had not been fully completed for each person using the service. This means care workers do not always have access to written information to guide them as to what support they should provide to people and how. This could potentially affect the continuity of care people receive. The manager was aware this was an area of the service they needed to address. Personal plans are an area for improvement, and we expect the provider to take action. Completed personal plans show people are involved in discussions regarding how they wish to be supported. Care documents reflect what is important to people, their likes and dislikes and the specific outcomes they wish to achieve. Risk assessments are used to manage known risks to people's health and safety, whilst enabling people to make decisions regarding how they want to live their lives.

People can receive their care and support in the language of their choice. Each person's preferred language is recorded within their care document and is recognised as an important part of their identity. The manager and some of the care workers can speak Welsh. This means support can be provided in people's preferred language, be it Welsh or English.

Policies and procedures are in place to protect people from harm and abuse. There is a safeguarding policy in place and care workers complete relevant training. Care workers are confident in the action they should take if they have any concerns regarding the welfare of the people they support. The manager reports safeguarding matters to the local authority appropriately and Care Inspectorate Wales (CIW) are notified.

#### **Environment**

Support is provided within a main house and two adjoining self-contained flats. We saw there is ongoing investment in the maintenance of the environment. This ensures it provides a comfortable living space which enhances people's sense of worth. People's own rooms are personalised with their own belongings, which enables people to feel at home in their own space. A communal lounge and dining room is available within the main house for people to spend time in the company of others, if they want to. There is a garden and we saw work is underway to improve the outside seating patio area. A smoking shelter is available for those who require this provision.

The facilities provided supports people to increase their independence. A kitchen is available within the main house, and within both flats, so people can become more confident in preparing their own meals. Care workers provide support with this task, with food shopping and planning meals, if required. Laundry facilities are available in the main house and both flats so people can increase their life skills. Care workers motivate and encourage people to complete their laundry tasks. Increased support is provided when required.

At the previous inspection we found measures were not always in place to reduce health and safety risks within the environment. At this inspection we found improvements had been made and overall health and safety risks within the environment are appropriately managed. Routine testing of electrical and gas appliances take place, as is required. Fire safety measures are implemented, and practice evacuation drills occur. Written plans are in place to record the assistance each person requires to leave the building safely in the event of an emergency.

#### **Leadership and Management**

People can access written information regarding the service provided. The provider's statement of purpose document accurately describes the care and support it can deliver and how. At the previous inspection we found the service user guide did not contain all the required information regarding the service people can expect to receive. At this inspection we saw action had been taken and this key document included all the relevant information. The information is provided in a clear format which assists people to make an informed decision if the service is right for them. Information regarding how to make a complaint, and how they are responded to, is included within the guide. People told us they felt able to raise any issues they may have with the care workers and the manager.

Arrangements are in place to ensure care workers are safely recruited. Records show overall suitability checks are completed before new persons come to work at the service. Care workers complete shadow shifts as part of their induction programme and they told us they feel confident in their roles when they start to work independently. Training is provided and care workers told us this had improved their knowledge and skills. Care workers are encouraged to complete formal social care qualifications and they are registered with Social Care Wales (SCW), the workforce regulator. The manager provides care workers with one-to-one supervision sessions to discuss their work and identify any training needs. Care workers told us they felt supported in their roles, and they could always access managerial guidance when required. Team meetings take place regularly which provides an opportunity for sharing information and discussions about the service provided.

The service provider has systems in place to consistently monitor the quality of the service provided. Records show the manager completes audits of different areas of the service on a regular basis. Overall, this system identifies areas of the service which need attention promptly. Formal quality of care reviews occur every six months and people are involved in this process. The review considers how well the service is enabling people to meet their outcomes and reflects on what the service does well. It also considers which areas of the service can be improved and how this can be achieved. The responsible individual (RI) visits the service regularly and gathers people's views about the service they receive. The RI records feedback received and the actions taken in response.

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		

15	Personal plans are not always completed in a timely manner, before or promptly following their move into the service.	New
57	Health and safety checks at the service are not robust and do not ensure potential risks within the environment are appropriately monitored and managed.	Achieved
19	The Service User Guide does not contain all the information required by the Regulations.	Achieved

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