



## Inspection Report on

**Pennal View Residential Care Home Ltd**

**Pennal View Residential Home  
Blaenpennal  
Aberystwyth  
SY23 4TR**

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

**This report is also available in Welsh**

**Date Inspection Completed**

02/07/2024

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## About Pennal View Residential Care Home Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pennal View Residential Care Home Ltd
Registered places	16
Language of the service	Both
Previous Care Inspectorate Wales inspection	5 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

People are happy with the care and support they receive. Representatives are positive about the staff and describe a family feel at the service. People have built up effective relationships with the sensitive and caring staff team.

The building is homely and people are comfortable in their surroundings. The provider has completed internal and external work at the service and has plans to continue these improvements.

The Responsible Individual (RI) works at the home on a day-to-day basis and has good oversight of the service. Information from their visits and internal audits inform the six-monthly quality of care review. The manager knows people well, communicates effectively with their representatives and is approachable to staff.

We have identified the services supervision process as an Area for Improvement and will check them in the next inspection.

## Well-being

People receive person centered care and are treated with dignity and respect. People are supported to remain as healthy as possible because the manager involves health and social care professionals when required. There is a family feel at the service and interactions between people and the staff team are positive. People live in a service that offers an 'Active Offer' of the Welsh language and can communicate in Welsh or English as they choose.

People are protected because recruitment processes are effective. Training systems are being improved to ensure care workers give people the right care and support. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People and/or their representatives know how to make a complaint if needed and have confidence in the manager.

The building is homely and people personalise their own rooms as they choose. Communal areas are comfortable and people use the different spaces available to do things they enjoy, for example chatting with each other, reading books or papers. The RI told us about plans to improve the accessibility into the grounds to enable people to use the area and to help keep them as healthy as possible.

People have a voice because they and/or their representatives know the RI well and are involved in quarterly Regulation 73 visits. This information is recorded and used to help inform the six-monthly Quality of Care Review.

## Care and Support

People receive good care and support that meets their needs. We saw many warm and friendly interactions between people who live and work at the home. An individual told us, *"The staff are wonderful, they are very, very kind"*. A representative of an individual who lives at the service said, *"I'm very happy with the care, she's well cared for and quite content"*. Passionate care workers know people well, understand their individual needs and preferences. A care worker told us, *"The residents are lovely it's like a big family"*.

People, their representatives and care workers are involved in developing and reviewing personal plans but this needs to be recorded. A document about the person, called 'This is Me' helps staff to learn about people and their preferences. When discussing personal plans a care worker said, *"They are very helpful to get to know people, especially when we get a new resident"*. The manager reviews personal plans every three months to ensure information is accurate and up to date. Documentation shows evidence of health care professionals being involved in people's care when needed. Risk assessments support people to maintain their independence, while helping them to remain as safe as possible.

Care workers take time to meet people's needs and we observed many patient and understanding interactions during the inspection. People take part in regular day to day past times such as reading newspapers, listening to audio-books, watching TV and chatting with each other. The manager is looking at different opportunities to increase the variety of structured activities at the home.

Medication storage, administration and recording systems are accurate, safe and in line with national guidance. Care workers take time to ensure people get the right dose of medication at the right time.

## Environment

The environment is homely and maintained to meet people's needs. People spend time in the communal areas interacting with each other and the staff team or in their rooms doing their own activities. People are supported to personalise their rooms with their choice of décor, furnishings, pictures and furniture. People can move around the home independently, with staff support or with mobility aids.

The provider has a planned upgrade programme to ensure the home is well maintained and meets people's needs. All internal doors have been replaced, several bedrooms have been re-decorated and a bathroom has been refurbished. Windows and guttering have been replaced in a section of the home. The RI intends to replace the remainder of the windows and gutters in the near future, as well as developing a new patio area at the front of the building for people to enjoy the outdoors. We were told that any issues with the environment are acted upon quickly and repairs are completed promptly.

Regular Health and Safety audits of the property are completed. Testing of fire safety systems and equipment is up to date. Personal Evacuation Plans are available in emergencies.

The kitchen has a food hygiene rating of five. People enjoy home cooked meals and staff understand how each individual likes to eat their meals.

## Leadership and Management

The RI is involved in the day to day running of the service, people and staff describe them as approachable and supportive. We observed lots of friendly and understanding interactions between the RI and people during the inspection. When discussing the RI care workers told us, *“He’s really good and you can’t fault him”* and *“He’s very approachable and easy to talk to”*. The RI knows people who live and work at the service well and communicates with them daily. Quarterly visit reports are completed by the RI and this information along with feedback from internal audits is used to inform the six-monthly Quality of Care Review.

The manager is visible at the service and understands the needs of each person. There is a friendly and caring culture at the service. Staff describe a ‘family feel’ and one said, *“We try and make it feel like the residents are in their own home”*. Representatives describe good communication and one told us, *“[RI] and [Manager] are very approachable. If there is a problem I am kept in the loop”*.

Care workers told us the manager is accessible and easy to talk to. However, they do not receive face to face supervision every three months and team meetings do not take place. This means staff do not have a recorded of one-to-one opportunity to discuss their personal performance or a group discussion about the service they provide. The RI confirmed this and told us that he will address this immediately. We have identified this as an Area for Improvement and expect supervisions and team meetings to take place in line with the regulations.

New staff complete an induction and all care workers receive ongoing mandatory and person specific training to meet people’s needs. However, we found mandatory training is not always allocated in a timely manner; the manager responded immediately and enrolled all staff on the relevant courses. Care workers complete the ‘All Wales Induction Framework for Health and Social Care’ and register with Social care Wales but up-to-date records are not available. We will check for these records in our next inspection.

Discussions with staff, demonstrate a good awareness of safeguarding and they are confident to report matters appropriately. Care workers have a good understanding of the key policies and procedures that support good practice.

The required pre-employment checks take place before new employees start work. The service has recruited news staff to ensure there are sufficient numbers of care workers available to meet individual’s needs. Care workers take time to get to know people well and develop positive relationships with them.





### 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
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
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36	The provider does not ensure staff receive appropriate supervision.	New
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**Date Published** 02/08/2024