



## Inspection Report on

**Park Lodge Residential Care Home**

**M J S Care Ltd  
Llannerch Park  
St. Asaph  
LL17 0BD**

**Date Inspection Completed**

04/03/2024

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## About Park Lodge Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	MJS CARE LTD
Registered places	17
Language of the service	English
Previous Care Inspectorate Wales inspection	04 January 2024
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

### Summary

Improvements have been made in the home since the last inspection to ensure it is now fully compliant with the regulations. People are now supported by kind and attentive staff who know them well. Personal plans for people's care and support are written using information from a variety of sources including risk assessments, to ensure they reflect people's care and support needs and preferences. People feel well looked after by kind and respectful staff and like living in the home.

The service provider has appropriate governance systems in place to monitor the day to day running of the service and inform its development. There are policies and procedures in place to guide staff and ensure the service is meeting the statement of purpose for the home. The Responsible Individual (RI) is in the service frequently and speaks to people and staff about their experiences in the home. Records show they provide appropriate oversight of the management of the home. The manager completes routine audits of the care provided as part of quality review processes. The manager and the RI work together to ensure staff receive the supervision and training required to be skilled, competent, and confident in their roles.

## Well-being

People have choice in how they live their lives day to day. There is a varied daily menu to choose from and the cook prepares alternatives if people do not want what is on offer that day. People can spend time where they please throughout the home; we saw people enjoying time socialising in the lounge and relaxing in their rooms. People's rooms are personalised with objects, personal items and pictures that are important to them. People told us they can shower and bathe when they want and get up or go to bed and rest when they want. The RI ensures accurate information is provided to people via the service user guide. People are able to feedback about their experiences living in the home via speaking with the manager and RI directly, and regular questionnaires and resident meetings.

People's physical and mental health and well-being are maintained and promoted by the service provider. People told us staff support their care needs in a timely way and they feel well looked after. The provider ensures people have appropriate access to medical and social care professionals where required. The hairdresser and chiropodist visit the home regularly, and records show people have recently seen an optician and accessed the emergency dentist.

People can do things that make them happy. Visitors are welcome into the home every day and staff facilitate people going out with their families. People told us they enjoy the activities and events laid on by the manager and RI to celebrate national holidays and significant dates. One person told us an event laid on for Chinese New Year, "*was lovely and they made a fantastic effort!*" There is a schedule of daily activities planned each month, with additional visits from external entertainers each week. Recent events for St David's day included Welsh music and a talk about the history of St David, as well as a visit from a miniature pony. People are encouraged to participate but if they decide not to this is respected by staff. People's religious and language preferences are acknowledged, respected, and catered for as far as possible. Welsh language and culture is promoted in the home through signage, activities and events and access to Welsh medium magazines, radio, and television. Records also show links with the local churches ensure people can attend religious services in the home or at church if they wish.

People are protected from abuse and neglect by trained staff who follow policies and procedures in how to report and identify potential issues. The manager completes routine audits of the care provided to people to ensure it is of good quality and meets people's needs. This includes monitoring of any falls and accidents in the home, and individuals' weight loss and gain to identify if they require support from healthcare professionals. People can access information about the home's complaint procedures via the service user guide in their rooms and the procedures are displayed in the main entrance hall for visitors.

## Care and Support

People can be assured the provider assesses and regularly reviews whether their care and support needs can and are being met. Records show appropriate pre-assessment processes are followed by the manager and incorporate information from various sources to ensure effective and safe admissions to the home. Once the manager has confirmed the service can meet a person's needs, a personal plan is written with clear instructions for staff on how to care and support the person. The plans are detailed and supported by appropriate risk assessments to help staff understand what specific adjustments people need to keep them safe from harm and neglect. People's personal plans are reviewed regularly and updated as changes occur.

People experience good health and well-being living in the home and receive support that meets their needs and preferences. Care staff are respectful, kind and caring towards people. People told us the staff know their preferences well and this is supported by daily records of care. People staying for short periods of respite care experience improved health and well-being outcomes to the point of being able to return home with a care package. People told us they "*can't think of a better place*" to live and they are "*110% well looked after*". Everybody we saw throughout our visit was well presented, with clean and pressed clothes, brushed hair, and clean hands and well-groomed nails. Care staff are happy, attentive, and approachable to people and visitors. We heard call bells throughout our visit, and these were answered in a timely way by staff. People we spoke to confirmed this is usual practice in the home, including overnight.

Medication administration practices in the home are audited by the manager on a regular basis and any issues identified are addressed in a timely manner. The provider has arranged for an external professional to complete a pharmacy audit in the coming weeks. We saw good medication administration practice from staff during our inspection visit. This is supported by records seen.

The provider has measures in place to manage the risk of infection in the home. Staff receive training and follow the provider's policies and procedures for hygienic practices. Records show there are domestic staff working in the home daily, and we saw cleaning in progress during our inspection visit. We saw supplies of personal protective equipment (PPE) are available to staff and residents and kept in a secure place so that they do not pose a hazard to residents.

## Environment

People live in an accommodation that meets their needs. The building and grounds are well maintained and provide a homely environment for people to live in. The home is warm, clean, and welcoming. Communal lounge areas are pleasantly decorated and provide ample comfortable seating with access to the garden via patio doors in the main lounge for when the weather is warmer. The dining area has seating available for people so they can have sociable mealtimes, people are able to eat their meals wherever they wish. People live in an environment which considers their Welsh language needs. Signs around the premises are provided in Welsh and English and with pictures to help orientate people to where they are in the home.

There is appropriate equipment and facilities in the home to meet people's needs. The service provider has installed new profiling beds in all bedrooms since the last inspection and people told us they are comfortable to sleep in. Records show all equipment in the home is regularly serviced and tested to ensure it remains safe to use. Staff receive training in how to use the equipment safely. The provider ensures external professionals regularly service and test the gas, water and electricity supplies and systems in the home.

The manager and RI conduct regular audits of the home and grounds to identify potential health and safety risks and issues that need addressing. These issues are risk assessed and appropriately addressed in a timely manner. Risk assessments are conducted by external professionals for fire safety and water safety across the whole home and are updated as required by relevant legislation. Personal Emergency Evacuation Plans (PEEPS) are in place for every person in the home; these guide emergency services and care staff in how to support individuals to get out in the event of an emergency. The PEEPs are regularly reviewed and updated as required to ensure they reflect people's current mobility and health needs.

## Leadership and Management

The service provider has appropriate governance systems in place to support the smooth running of the service. Improvements have been made since the last inspection to ensure the service provider is fully compliant with the regulations at this inspection. The provider has amended the service user guide and the statement of purpose to ensure commissioners and people looking to move to the home have complete and accurate information about how the service is provided. The RI continues to visit the home regularly and has improved their recording of these visits. Records demonstrate they speak with people and staff, and review care records in the service as part of their oversight of the running of the service and the provider's quality of care review processes. Feedback from people and staff is collated and considered in the twice yearly quality of care review report to the provider by the RI. Policies and procedures are in place to guide staff to effectively support people to achieve their desired outcomes. The RI is currently reviewing and updating all of these to ensure they accurately reflect current best practice and relevant legislation, and staff have read those already updated.

The provider ensures appropriate numbers of trained, vetted, and competent staff are in the home at all times. Recruitment records show appropriate checks of Disclosure Barring Service (DBS) and Social Care Wales (SCW) registration for new staff, alongside their interview and reference checks. DBS and SCW checks are routinely repeated on an ongoing basis for all staff to confirm they remain fit to work in the home. The RI ensures these checks are done for any agency staff used. Rotas show all shifts are covered by permanent staff or regular bank staff, with the occasional use of regular agency staff to cover sickness. The RI ensures senior care staff who deputise for the manager in their absence, have the skills and knowledge required to do this.

New staff complete core training subjects such as safeguarding of vulnerable people, fire safety, and health and safety training online as part of their induction. They shadow existing permanent staff for their first few shifts until management deem their competence and skill to be at the required level. Face to face training is also provided through external providers such as the local authority, for subjects such as moving and handling and fire safety training. Records show all staff training is monitored by the RI and manager to ensure staff are compliant and have the skills required to meet people's current needs. In addition to this training, the RI supports staff in their ongoing professional development, with multiple care staff enrolled for accredited care qualifications. Staff receive supervision regularly with the manager on a one to one basis.

### 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
66	The RI must demonstrate they have a full understanding of the responsibilities of their role in overseeing the management, quality and effectiveness of the service. They must demonstrate their ability to ensure the service complies with the Regulations.	Achieved
72	The RI must demonstrate that senior staff appointed to deputise in the absence of the manager are suitably competent, knowledgeable, trained, and fully aware of the provider's policies and procedures to adequately demonstrate they have appropriate systems in place to ensure continuity of effective management in the home.	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
N/A	No non-compliance of this type was identified at this inspection	N/A
19	The service provider has failed to provide people with accurate information about the service. The provider must ensure the service guide is accurate, provides all required information, is specific to the service, and reflects the service delivered.	Achieved
7	People are not provided with adequate and accurate information about the way the service is delivered. The service provider must ensure the Statement of Purpose is an accurate reflection of the service provided and contains all relevant information required under the Regulations.	Achieved

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