

Inspection Report on

Plas Gwilym

Plas Gwilym Victoria Road Caernarfon LL54 6HD

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

14/03/2024



About Plas Gwilym

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Gwynedd Council Adults and Children's Services
Registered places	27
Language of the service	Both
Previous Care Inspectorate Wales inspection	16 November 2021
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 who use the service have positive relationships with others living at the home and with the care workers who support them. They decide how they want to spend their time and they enjoy taking part in various activities arranged by care workers. Care workers know each person's individual care needs and how they wish to be supported. Personal plans are in place to record people's support needs, but they are not always created promptly. This is an area of the service which requires improvement.

The environment is comfortable, clean and homely. It is well maintained, and any work required is completed as and when needed. Appropriate health and safety checks are in place.

Care workers are recruited safely and complete relevant training. The manager is described by care workers as "supportive" and by people who use the service as "approachable". Staffing levels reflect the number and the needs of people who use the service. Kitchen and housekeeping staff are employed which means care workers can focus their attention upon supporting people and spending time with them. Arrangements are in place at the service provider level to monitor the quality of the service provided.

Well-being

The service is provided in people's preferred language. The Welsh language is recognised and valued as an important part of people's identity and of the local community where the home is located. People are offered a choice regarding which language they would prefer to have their care documents written. All information documents are readily available bilingually as is the signage on display within the environment. All the staff working at the service can speak Welsh, as well as the manager and Responsible Individual (RI).

People are happy living at the home, and they praise the service they receive. We spoke with people and their relatives, and they all provided positive feedback. People told us "hapus yma, staff yn gret" ("happy here, staff are great)"; Relatives told us they always feel welcome when visiting and they describe the care provided as "fantastic" and "great". We saw care workers speak with people in a kind, friendly and caring manner. People have good relationships with those working at the service and with others who live at the home. They told us "i gyd yn iawn, annwyl" ("they're all ok, kind"). Care documents record the care people receive is in line with their personal plans and their preferences.

Choices are provided which ensure people's rights are protected. Choices are available in relation to people's preferred daily routines and how they wish to spend their day. A variety of different activities are provided, which people can choose to participate in or to observe if they prefer. During our visit we saw people taking part in an Easter arts and craft activity. People told us they enjoy it when special social events are celebrated with activities or parties, and we saw photos of people taking part in these.

Arrangements are in place to ensure people's voices are heard. People are involved in creating their personal plans and have opportunities to say how they wish to be supported. Opportunities are provided to encourage people to share their views about the service they receive. Resident's meetings take place as well as informal discussions with people to gather information regarding any changes they would like to see made.

The support provided meets people's physical and emotional well-being needs. People's health conditions are known before they move into the home and this information is recorded within care documentation. Personal plans are not always created promptly to record important information regarding people's care needs and how they should be supported. This is an area of the service which requires improvement, and we expect the service provider to take action.

Care and Support

People's care and support needs are known before they are offered a placement at the service. We saw arrangements are in place for the manager to meet with people, and their relatives, to discuss their care needs and what outcomes they wish to achieve by moving into the service. Assessments are obtained from professionals who already know the person as part of the pre-admission process. This ensures the manager makes an informed decision to whether the service can meet the person's needs before they are accepted into the home.

Personal plans are in place most of the time, but they are not always created in a timely manner. We saw personal plans are created with people and they record their life stories and what is important to them. They record the person's specific care needs and their individual preferences for how they wish to be supported. Also included is detailed guidance for how each person's care and support needs should be met. Personal plans are reviewed within the required timescales and contain up to date information. However, personal plans are not always put in place promptly, and this is affecting care worker's ability to access pertinent information regarding people's needs. This is an area of the service which requires improvement and we expect the service provider to take action.

Arrangements are in place to protect people from abuse, harm and neglect. There is a safeguarding policy in place and care workers are provided with relevant training. Care workers are confident in the action they should take if they have any concerns regarding people's welfare. The manager reports safeguarding matters appropriately to the Local Authority and Care Inspectorate Wales (CIW) are also notified. People told us they feel safe at the service.

Support is provided to enable people to be healthy. Records show health and social care professionals are appropriately contacted for advice when any changes occur in people's circumstances. The guidance provided is recorded and followed to ensure people receive the correct support. People told us they are offered a varied diet which supports them to be healthy. Specialist diets are accommodated, and the cook told us they can offer flexibility in meals provided if people want something different to what is on the menu. People's weights are monitored regularly. Medication charts record people are receiving their medication as prescribed which helps to manage their health conditions. Medication storage is safe.

Environment

Support is provided within a warm, clean and homely environment. There is a choice of communal lounges where people can choose to spend time with others, or their families if they want to. A dining room is available for people to have their meals in the company of others, or if they prefer, they can have their meals in their own rooms or in one of the lounges. Seating areas are provided within the longer corridors so people can rest if they need to whilst walking within the home. Communal areas are decorated with framed artworks of local landscapes and local people, which brings a sense of the community into the home. Level access and seating areas are available in the garden for people to sit outside when the weather permits.

The home is clean and well-maintained. Housekeeping staff are deployed to specifically focus upon ensuring the environment is clean and fresh for the comfort of people living at the service. Ongoing redecoration takes place and maintenance work is completed when required.

People's own rooms are personalised with their own items which enables people to feel comfortable and at home. We saw people have photos of their families and their own mementoes of importance in their rooms. This creates a homely feel within people's own personal space.

Health and safety risks within the home are overall appropriately managed. Ongoing checks are in place to ensure risks to people are identified and appropriate measures are in place to manage the known risks. Records show fire safety mechanisms are in place to ensure necessary precautions are in place in the event of a fire. The manager told us they intended to carry out a fire evacuation drill soon. This is to ensure the newly appointed care workers are familiar with the actions to take if the care home required evacuating in the event of an emergency. Other areas of health and safety, such as the servicing of lifting equipment, the testing of electrical equipment and the servicing of gas appliances take place as required.

Leadership and Management

Robust arrangements are in place to ensure care workers are safely recruited. Records show suitability checks are completed before new staff come to work at the service. Care workers confirm they worked shadow shifts as part of their induction to the service. Relevant training is provided which promotes care workers' knowledge, skills and their understanding of the needs of the people they support. Care workers are also supported to achieve formal care qualifications. Staff rotas show staffing levels are sufficient and we saw care workers attend to people's needs as they arose. People told us they received support when they needed it. Relatives told us they had no concerns regarding staffing levels. Care workers told us staffing levels are safe at the service, however they do have very busy periods at times. They told us; "Ile braf i weithio" ("nice place to work"), they work well as a team, and they also feel well supported by the manager.

People can access information regarding the service provided. The provider's Statement of Purpose (SoP) accurately describes the service it can provide. This information assists people to make an informed decision if the service is right for them. Information regarding how to make a complaint is included as well as how complaints are responded to. People, and their relatives, told us the manager is approachable and they feel able to raise any issues if they need to.

Arrangements are in place to regularly monitor the quality of the service provided. The RI visits the service regularly and discusses the service provided with people who live at the home. The manager completes regular audits to check the service is running as it should be and in line with the SoP. Formal quality of care reviews occur every six months, and people and their families are involved in the process. The reviews assess people's satisfaction with the service they receive and reflects upon how the service is enabling people to achieve their desired outcomes.

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	Not all persons using the service have personal plans in place following their move into the service. Ensure people have personal plans in place before they move into the service.	New
60	Regulation 60 Notifications are not always submitted to CIW, when required.	Achieved

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