

Inspection Report on

Plas Maesincla

Plas Maesincla Caernarfon LL55 1DB

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

26/09/2023



About Plas Maesincla

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Gwynedd Council Adults and Children's Services
Registered places	23
Language of the service	Both
Previous Care Inspectorate Wales inspection	21 January 2020
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 appear happy with the care and support they receive at Plas Maesincla. Care workers are respectful, and caring, and support people with their care needs in a dignified and timely manner. Relatives are happy with the way care and support provided by staff and the way the home is managed. There are opportunities for people to take part in activities. People receive visitors and can choose how they spend their day. Personal plans and risk assessments provide good detail about how to meet people's needs.

Staff feel supported by the manager. Recruitment processes are ongoing with all the necessary checks undertaken. Staff training is in place to ensure staff are skilled in their roles. Staff handover meetings take place to share relevant information regarding people's well-being.

The premises are in their own grounds with secure areas for people to sit and safely walk outside. Bedrooms are decorated with personal items, and communal areas display items of memorabilia. The home is clean and tidy with good practices regarding infection prevention and control measures.

Well-being

People have choice and control over their day-to-day lives. Staff treat them with respect and their views are important. We saw staff respond promptly to individuals' needs and preferences. People are relaxed and comfortable in the presence of staff who converse in a friendly, caring, and respectful way. Staff speak with people in their preferred choice of language, Welsh or English. Staff encourage people to express themselves and make choices in their daily routines, such as choice of refreshments and activities.

People are supported by care workers to be as healthy as they can be. Visitors we spoke with told us they feel the care their relatives receive is good. Menus show a variety of meals offered with an alternative meal available if required. Observation during the lunch period confirmed this. People were seen to enjoy the food. People are appropriately referred to health care professionals in a timely manner.

People can do the things that are important to them and experience a choice of activities. There is evidence in photographs seen of people enjoying the facilities and activities available. A selection of games, craft items and pieces of memorabilia around the home enhances people's well-being. Staff told us people enjoyed the rail journey experience across Wales via a social media link connected to a large screen. A mini shop has been created for people to purchase toiletries, cards, and treats. Relatives told us they are able to speak to staff if they had any issues, and they would be listened to.

People are protected from abuse and neglect. There are measures in place to safeguard people from the risk of harm. Individual risk assessments are included in personal plans and are reviewed as required. Care workers told us they know what steps to take if they are concerned about a person/people. Staff told us they have received training in safeguarding, moving and handling, and medication.

The environment of the home supports people to achieve a good standard of well-being. The home is well organised, and people have a choice of lounges or quiet room to spend their time. Improvements in the décor in communal areas have further enhanced people's well-being.

Care and Support

People receive good support from caring staff who treat them with dignity. Relatives we spoke with are satisfied with the way aspects of care and support are provided and how the home is managed. One relative told us they were happy with the care provided as care workers have time to spend with people and support them with their care needs.

People can choose how they spent their days, either in the comforts of their bedroom or in one of the communal areas. We saw photographs on display of activities that take place. Our observations showed some people are engaged in activities whilst others prefer to watch or relax. We saw care workers interact with people in a friendly way discussing past and present events, encouraging sing-a-longs and dancing. People who preferred to stay in their bedrooms or smaller quiet lounges are respected by staff. Staff told us people enjoyed making craft items for Halloween with videos and photos of activities posted on the service's social media page for relatives and friends to see. The individual daily records evidence what activities have taken place, but these are not completed daily.

People remain as healthy as they can be due to the care provided, timely referrals to health professionals, and effective administration of medication. People receive the medication they require safely. People's dietary needs are considered, and healthy, nutritious meals ensure people remain well. We saw hot and cold refreshments on offer. An alternative main meal is served if people dislike the meal prepared.

People receive care and support that meets their individual needs. Relatives are consulted and involved with developing personal plans, which include personal outcomes in relation to people's health and well-being. Personal plans and risk assessments are reviewed and reflect how people would like to be supported. Daily records and charts show people receive the care they need when it is required.

There are processes in place to safeguard people. Individual risk assessments are in place and staff are aware of the importance of making the relevant referral to the local authority if they have any concerns about the people they work with. Staff receive up to date safeguarding training. Staff administrating medication are required to pass a competency test prior to administering medication.

Environment

The environment is safe, homely, and warm. Bedrooms and communal areas are decorated and furnished to a good standard. People are surrounded by their personal items and belongings. To help people find their bedroom, memory boxes, displaying small personal items of interest and photographs are located outside each person's bedroom. There are aids and adaptations to support people to access all areas. Access to the first floor is by the stairway or passenger lift. A locked door policy is in place to safeguard people from risk of harm if they look to leave the premises unsupervised.

The provider ensures the environment supports people to achieve their personal outcomes. The layout of the home, together with the provision of aids and adaptations helps to promote independence. The outside areas are secure enabling people to sit outside or walk around the patio area.

Infection control measures continue to be in place to ensure people are safe from infections. Visitors to the home are requested to follow the home's current guidelines in relation to infection control.

Leadership and Management

There are arrangements to maintain oversight of the service, and processes to monitor the quality of the service. The Responsible Individual (RI) conducts regular visits and considers residents views, staffing, the environment, complaints, health and safety, and compliance. Care workers told us the manager is easy to approach and provides support on both personal and professional levels.

People are supported by staff who are suitably fit and have the knowledge and skills to meet their needs. Records show required checks are carried out prior to commencing employment. The provider has a selection and vetting process in place, which includes obtaining references. Staff employed are registered with Social Care Wales (SCW). Documentation provided shows staff have undertaken training, in first aid, moving and handling and safeguarding. Care workers told us they were looking forward to attending the dementia training. The training matrix shows not all staff have received specialist training in dementia care. The manager told us this was due to the lack of training availability in the subject and would continue to resource training for staff. Staff rotas show there is sufficient staff on duty to meet the needs of people living in the home. Staff meetings are arranged to share operational matters such as training, health and safety, and provide opportunities for staff to share ideas or any concerns regarding service delivery.

The service has a statement of purpose, which clearly describes who the service is for and how care will be delivered. People are given information that describes the service and how to make a complaint.

Health and safety of the home is well managed. The provider acts on the views of external agencies. Records show that utilities, equipment, and fire safety features have regular checks and servicing. The home has a 5-star food rating from the Food Standards Agency (FSA). All residents have a personal emergency evacuation plan specific to their individual support needs.

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	

N/A	No non-compliance of this type was identified at this	N/A
	inspection	

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