



Inspection Report on

Plas Ogwen

**Plas Ogwen
Bangor
LL57 3PW**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

4 May 2022

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About Plas Ogwen

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	This is the service's first inspection since it's re-registration under the Regulation and Inspection of Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	Yes. 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 at Plas Ogwen. Staff support people to engage in activities and interests. People receive visitors and go out in the community. Personal plans include individuals' needs and details for staff to meet people's needs. Risk assessments are in place to safeguard both people and staff.

Staff are supported by the manager. A recruitment process is in place including all the necessary checks. Staff receive training and are skilled in their roles. Staff development in relation to supervision and appraisals are ongoing and daily handovers and staff meetings take place to share relevant information regarding people's well-being.

The premises are in their own grounds and in close proximity to local community facilities. The home is clean and tidy with infection prevention and control measures in place. Communal areas and some external areas have been decorated with new furnishings. Investment in the catering area is needed.

The service also offers respite care and day care for people.

Well-being

People live in an environment that is supportive and provides appropriate care for them. Care staff are kind, polite and aware of the individual needs of the people they care for. People take part in activities; trips out are being re-introduced following the pandemic. People were very complimentary about the food and activities.

People commented positively about the care they receive, and felt their wishes are respected. We observed staff talk to people in a dignified and respectful manner. One person told us *"I'm very happy here and I'm looking forward to going out to visit my friends,"* others told us *"I am very happy here;"* whilst another said, *"it's not home from home but it's the best you can get."*

People can choose how and where they spend their day. They said they can get up and go to bed when they choose and there is a variety of food offered. We saw people chatting with each other and staff in the café area. There were no planned activities taking place on the day of the inspection; however, evidence in photographs and the social media page shows varied activities are offered.

Management is approachable and has an open-door policy. Communication with people, staff, and visitors, is good. The manager is supportive, and the responsible individual (RI) has good oversight of the service with processes in place to identify areas of improvement. The service has various formal and informal opportunities for people and their representatives, to ask questions and to give feedback. Up-to-date written information about the service is available. Policies and procedures are in place to help protect people from harm or abuse. Risk assessments are in place to safeguard people and staff.

The environment supports people to achieve a good standard of well-being. People have personalised their rooms. Some communal areas have been decorated and new furnishing provided to enhance the areas people use. The main kitchen requires refurbishing. The floor was stained with patchy repairs, worktops and kitchen units damaged or broken, and the industrial food mixer requires replacing.

Staff follow a recruitment process including all the necessary checks and receive the training to be skilled in their roles.

The Active Offer of the Welsh language is provided. Staff respected people's cultural background and language preferences.

Care and Support

People and their relatives are involved with developing personal plans and include personal outcomes in relation to people's health and well-being. Personal plans and risk assessments reflect how people would like to be supported. New personal plans are clear and provide staff with information to support and care for people in line with their identified needs. Personal plans are reviewed three monthly as required. People told us they are involved in the review process.

People remain as healthy as they can be due to care provided, timely referrals to health professionals and effective administration of medication. People's dietary needs are considered, and healthy, nutritional meals ensure people remain healthy. Our observations of lunch confirmed this.

Regular, appropriate activities and opportunities for people to pursue interests or hobbies are provided. We saw weekly activity programmes on display, staff encouraging people to participate in activities and where people preferred to sit and read or watch the television, this is respected by staff. Staff interact with people in a meaningful way and are aware of individuals' preferences in relation to recreation. There are records and photographs of activities and a social media page for sharing information about these. One person told us they are looking forward to visiting friends in the community and going to the shops.

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. Care workers told us they are aware of the safeguarding procedures and staff receive up -to- date safeguarding training.

The service promotes hygienic practices and manages risk of infection. Since the coronavirus pandemic, they have introduced additional information to staff on extra precautions required. Safe practices are maintained, and the appropriate PPE is provided for staff to safely give care to people. Care workers confirmed they have access to sufficient PPE and people receiving a service said they felt safe with the current practices in place. Visiting continues and follows current Public Health Wales (PHW) guidelines and the home's visiting policy, which has been reviewed during the pandemic.

Environment

The environment is safe, homely and warm. The home has four units with space for use of wheelchairs and transfer aids. Each unit has a kitchenette which enables people to be supported to prepare refreshments and snacks. Areas are decorated to a good standard and individual rooms had personal items of memorabilia. There are specialist rooms, such as for hairdressing, people attending for day care, visitors or private conversations. All parts are accessible with a wheelchair. People were enjoying refreshments in the café within the home. Outside facilities are being improved. People described the home as being comfortable and clean.

Overall, the maintenance of the building is to a good standard. The main kitchen is showing signs of wear and tear. This has also been acknowledged by the responsible individual as part of the regulatory visits with recommendations made to upgrade the kitchen. We advised the RI and manager that we endorse these recommendations. We expect the provider to take action, and this will be followed up at the next inspection.

The maintenance records show that utilities, equipment and fire safety features have regular checks and servicing. All residents have a personal emergency evacuation plan specific to their individual support needs.

The home is secure, and staff checked our COVID status and identity prior to entering. Visitors to the home are requested to follow current guidelines in relation to infection control. Day care is currently offered; however, people are restricted from utilising all areas of the home due to the COVID guidelines in place.

Leadership and Management

There are arrangements to maintain oversight of the service, and processes to monitor the quality of the service. The RI conducts regular visits and discusses residents, 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 a service that has sufficient numbers of staff who are suitably fit and have the knowledge, competency and skills to meet their needs. Staff said they are supported by the manager and deputy and are part of a staff development programme including training, supervision and annual appraisals. Staff meetings are arranged to share operational matters such as training and health and safety and provide opportunities for staff to share ideas and any concerns regarding the service delivery.

Records show required checks are carried out prior to commencing employment. The providers have a selection and vetting process, including obtaining references. Limited face-to-face training has taken place since the pandemic due to government restrictions. Staff are provided with alternative learning opportunities, including mandatory and specific training. Training includes first aid, moving and handling, safeguarding and dementia care. Staff told us they have received the relevant training to undertake their roles and responsibilities. Staff administering medication have received medication training and passed a medication administration competency test. Staff rotas show there are sufficient staff on duty to meet the needs of people living in the home. Staff spoken with confirmed this.

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

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 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
44	The kitchen is not free from hazards to the health and safety of individuals and any other persons who may be at risk, so far as reasonably practicable. the kitchen is not properly maintained.	New

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