



Inspection Report on

Plas Pengwaith

**Plas Pengwaith Home For The Elderly
Maes Padarn
Caernarfon
LL55 4TP**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

3 May 2022

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About Plas Pengwaith

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gwynedd Council Adults and Children's Services
Registered places	31
Language of the service	Both
Previous Care Inspectorate Wales inspection	Manual Insert This is the first inspection 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

Plas Pengwaith is very much part of the local community and offers a full active Offer of the Welsh language and culture. Most of the staff and residents speak Welsh and we heard them conversing naturally in Welsh together. People's personal plans are centred on their individual needs and preferences. and people are involved in the process of devising their plan of care. The home is well maintained and homely. Where areas need redecorating or equipment is to be replaced, we saw these have been identified and plans are in place to address issues. People benefit from a stable staff group who give consistent care. Many staff members have worked in the home for several years. Care support workers receive regular training to keep their practice updated and have supervision to support them in their role. The responsible individual (RI) visits the home and reports on the quality of the service provided to people in accordance with the regulations. The home has been challenged from the onset of the Covid pandemic and have suffered losses. The team have worked well through this period and have continued to give good care and support.

Well-being

People have a friendly relationship with staff who understand their needs. People and care support workers speak warmly of each other, and we saw people are given individual, appropriate choices on how to spend their day. A resident told us, *“Mae’n neis iawn yma, pawb yn ffeind. Rhanfwyaf o staff yn siarad Cymraeg. Mae na fwyd da iawn yma. Dim cwynion.”* The resident said it was very nice in the home, everyone is kind. Most staff speak Welsh. The food is very good. No complaints. Other residents said, *“lovely place to be,” “the staff are lovely”, “the food is good, you don’t need snacks in-between meals as you are so full”, “no complaints”, “they are very welcoming to visitors.”*

People have an active offer of the Welsh language. We heard care support workers doing a bilingual quiz with residents and later, singing Welsh songs. Signs and documents are bilingual, care staff write daily care reports in Welsh. People’s first language preferences are documented in their personal plans, and this then runs through individual care plans and details how to reassure the person in their chosen language. Varied activities are offered daily, and this is also shared with families using a dedicated Facebook (social media), page. Families are included in some activities such as afternoon tea, birthdays, and themed meals. We saw recent “thank-you” cards from families thanking the managers and care support workers for the care of their family member and for including them in events.

People have their health monitored and they are referred to health care professionals in a timely way. Instructions and outcomes of health professional assessments for people are documented in their personal plans. Health monitoring is good and care support workers know people and their needs well. The Covid pandemic has made GP visits difficult, but the manager told us people can access weekly reviews by phone. The home has a particularly good relationship with the district nurses that regularly visit.

Care staff receive training in safeguarding vulnerable adults. Training was largely e-learning during the pandemic, but some face-to-face learning is now being considered. Care support staff told us they are aware of the safeguarding process and know whom to contact should there be any issues. People can access an advocacy service via social services should they need it.

People can remain in contact with people who are important to them. Family and friends can visit people inside the home on an appointment basis if it is safe to do so regarding Covid results. The home has Covid policies and procedures in place. Visitor’s Covid test results are asked for before they enter the home. People and care staff are supported with their tests and can access vaccinations should they choose to have them.

Care and Support

People receive the care they need. The manager completes an assessment before people are admitted into the home to ensure the service can meet their needs. People's activities of daily living are addressed in their personal plans to ensure they receive an appropriate care service. Personal plans are reviewed monthly as are risk assessments to ensure people's health and safety. Some more detail in personal plans regarding people's care would better instruct care support workers regarding people's needs. People are involved in their plan of care and can influence the care they receive.

People can access diet and fluids to maintain their health. We saw fluids and snacks were available for people throughout the day. Meals are cooked from fresh ingredients on the premises. People can have a choice of meals and special diets can be catered for. People eat together around nicely laid tables and there is a sense of community in the home. People's weights are monitored, and specialist advice sought if there are any issues. People can access specialist advice regarding their health in a timely way and any instructions/outcomes are documented in their personal plans. The manager told us the local pharmacy is mainly supportive of the home and they can readily access medications for people as prescribed. We saw the medicines room is safely locked and is organised. The processes for ordering, storing, administering, and disposing of medicines are good with a robust audit trail in place.

The home adheres to Public Health Wales guidelines regarding the Covid pandemic. Staff check visitor's Covid test results on entry to the home to ensure people's protection. We saw Personal Protective Equipment (PPE), in the home was plentiful. We observed care workers wearing PPE appropriately. There are hand-sanitising stations throughout the home; we saw care staff making use of them. Care support workers told us they have training for the proper use of PPE and regarding Covid issues and testing.

Environment

The home is clean and homely. We saw people can personalise their rooms to make them feel at home. Each “house” in the home has their own set of rooms, bathroom, lounge, and kitchen. We saw a redecoration programme is underway with the lounges that have been decorated looking fresh and homely. Certain equipment that needs replacing has been noted, and new ones are on order. Areas to be redecorated have been identified, and plans are in place to address this. Corridors are clean and free of any obstacles. The outside areas are tidy and there are seats available for people to use in good weather. People can access appropriate equipment for their care. Equipment is maintained and serviced as per manufacturer requirements.

We found health and safety assessments are in place. Maintenance and fire checks are up to date. Processes for evacuation in the event of emergency or fire are personalised for everyone so that care staff and the emergency services know how best to help people. The medicines room is secured. Confidential information is safely kept in lockable offices.

Leadership and Management

Governance arrangements are in place to support the smooth running of the home. The responsible individual produces quality assessment reports regarding the home as required by legislation and conducts visits to have over-sight of the care given to people. The manager is suitably qualified and registered with Social Care Wales (SCW). The manager is in the home daily, care support workers told us they are approachable and supportive of them. There is a robust management structure in the home with a deputy manager also in place.

Recruitment practices are good in the home. We saw personnel files are in good order and have checks in place to ensure staff are appropriate to work with vulnerable adults. Care staff receive training to ensure they have a solid knowledge base to give the care needed by people. The Covid pandemic has provided challenges for the service regarding staff training which has taken the form of e-learning, a return to classroom learning is now being considered. Care support staff told us they receive training, support, and supervision to perform their daily roles. We saw that care support staff supervision was conducted frequently as per the regulations, this ensures staff are supported in their daily roles and perform tasks according to best practice guidance. Care support staff said they are happy to be working in the home, many have worked there for several years and are able to give consistent care.

The service has not declared they have financial concerns. There is an ongoing maintenance programme in the home. There are plentiful stocks of fresh food, and the home was warm.

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 inspection	N/A

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