



Inspection Report on

Plas Y Don

**Plas Y Don Residential Home
Bro Heli
Pwllheli
LL53 5BD**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

13 April 2022

Welsh Government © Crown copyright 2022.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Plas Y Don

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gwynedd Council Adults and Children's Services
Registered places	28
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 who live at the service are happy. They are supported to stay healthy and make decisions regarding how they wish to live their lives. Positive relationships are formed between residents and with the care staff. People speak highly of the care and support they receive and feel able to raise any issues with the manager. Care is provided bilingually with the Welsh language and culture promoted at the service. People are included in planning their care and personal plans reflect their preferences. Improvements are required to the amount of detail contained within people's personal plans when they first arrive at the service. Care staff enjoy working at the service and feel supported in their roles. Staff receive relevant training to enable them to carry out their duties safely, however, some refresher training is currently overdue.

Well-being

People are happy, feel at home and have good relationships with others. Friendships are made and people enjoy the company and conversations with fellow residents and staff. Care staff are attentive, provide support in a respectful manner and people praise the care they receive. Feedback we received included: “*staff yn dda*” (“*staff are good*”), “*staff yn dod i helpu yn handi*” (“*staff promptly come to help*”) “*staff yn glên*” (“*staff are pleasant*”).

People can choose how they spend their day. People told us they choose their own daily routine in terms of when they get up, how and where they spend their time and when they retire for the evening. Resident’s meetings take place where people’s views are gathered regarding the type of activities they would like to take part in. We saw people enjoying a game of Bingo during our visit and people told us this was an activity they looked forward to.

Physical and emotional well-being is promoted. People feel supported to adjust when they move into the home, and they feel well cared for. Physical health is supported by people receiving their medication as prescribed, which helps to manage people’s health conditions. Professional advice is sought in response to changes in people’s physical and emotional health, to ensure people receive the correct support. A nutritious and varied diet is provided, people are offered a choice of meals and people’s weight is also monitored. Staff encourage people to maintain their independence which helps people to feel a continued sense of achievement.

The Welsh language and culture are celebrated and are recognised as integral parts of people’s identity. Framed Welsh poems are displayed on the walls in corridors, including ones written by people living at the home. Paintings depicting local areas and Welsh flag bunting bring colour to the corridors and are reminders of the locality where the home is situated. Bilingual signage is available throughout the building and the Welsh radio station Radio Cymru is played within the main corridor. Staff and the management team are Welsh speakers, which means people can receive their care and support in their preferred language.

People feel safe and know who to speak with if there was anything they were not happy with. The management team are available and approachable, people feel listened to when they raise any issues. Staff are confident in their duties regarding protecting people from harm and abuse.

Care and Support

Pre-admission assessments and personal plans are in place but do not always fully record people's specific care and support needs. Personal plans record what people can do for themselves and risk assessments are used to identify and manage known risks to people's health and safety. Personal plans lack sufficient detail regarding the support people require with specific tasks when they first come into the service. This means staff may not always have access to written information regarding people's immediate care and support needs, which may affect the care delivered. Personal plans become more detailed following the admission, and the provider is in the process of introducing new personal plans templates. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Referrals to health and social care professionals are made appropriately and promptly, in response to change in people's circumstances. People told us staff had provided good care when they had recently been unwell and medical attention had been promptly arranged; *"mae'r gofal yn dda pan rydych chi ei angen"* *"the care is good when you need it"*. Staff advocate on people's behalf to ensure professional assessment and treatment is promptly provided. Records show when a professional is consulted with, and the outcome of this contact. A variety of healthy meals are provided, and people's weights are monitored. People praise the food provided *"digonedd o ddewis"* (*"plenty of choice"*) and one person told us they were pleased they had gained weight since moving into the home.

People benefit from good hygiene and infection control provided. A staff member checked we had undertaken a Covid-19 test before we entered the building and checks are in place for all visitors to the service. Staff wear appropriate PPE (personal protection equipment) to protect people, and themselves, as far as possible from the virus. There are arrangements in place to enable friends and relatives to visit the service safely and a contingency plan in place in the event of a Covid-19 outbreak. Management undertakes regular infection control audits to ensure the correct procedures are being followed to keep people safe.

Safeguarding arrangements are in place to protect people from harm and abuse. Staff receive safeguarding training and are confident in their responsibilities in relation to protecting people from harm. A safeguarding policy is in place and safeguarding matters are reported to the Local Authority appropriately.

Environment

Care and support are provided within a comfortable environment, which promotes people's sense of well-being. The home is separated into smaller units, which helps to maintain a homely feel. There is a choice of lounges available and a large conservatory area which opens out onto an accessible garden. Raised beds are provided in the garden, which people can use to plant flowers. People told us they are happy with their own rooms, and they appreciate being able to make their room feel like their home. People's rooms are personalised with their own items from home, such as photos and soft furnishings.

Each individual unit has its own kitchenette, which encourages people to maintain some of their independence in relation to preparing their own hot drinks, if they choose to, or to prepare themselves a snack. People told us they liked being able to walk independently around the home, with the support of their walking frame, because the building has all level access.

Overall, the maintenance of the building is to a good standard. One unit has been fully refurbished recently and this creates a very fresh, bright, and modern environment. Other areas of the home are showing signs of wear, such as the handrail provided in the corridors, which is peeling in places and in need of repainting. The deputy manager told us they were aware of this and were hoping this would soon be addressed.

Health and safety risks are identified and appropriately managed. The kitchen has the highest possible Food Hygiene rating of five (very good) following the most recent Local Authority inspection. There are arrangements in place for the safe storage and preparation of food. Good stocks of branded fresh and frozen food are available and are regularly ordered to ensure a continued supply of nutritious food. Arrangements are in place to regularly test the fire alarm and personal emergency evacuation plans are in place. The fire alarm system and the electrical system are serviced regularly.

Leadership and Management

Staff are recruited safely, and overall, suitable checks are completed before new staff are employed to work at the service. Care staff enjoy working at the service and feel supported in their roles. Appropriate training is provided which enable care staff to carry out their duties effectively and safely. Some staff completed their mandatory training several years ago, including first aid, therefore staff are overdue a refresher course. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Regular resident's meetings take place and minutes of the meetings are available for people who were unable to attend the meeting. This provides people with regular opportunity to share their views regarding the service and to make suggestions regarding changes they would like to see. People told us they regularly saw the management team, and felt able to raise any issue with them, if needed. Visits by the RI to the service have recently re-started, which improve the provider level oversight of the quality of the service delivered.

Care staff are provided in sufficient numbers to ensure people receive care and support at the right time. People told us there were enough staff generally, but they were aware Covid-19 had affected staffing levels at times; *"gallu gweld bod y staff o dan straen"* *"could see the staff were under strain"*. The manager and deputy manager will step in as care workers, and deliver care and support to people, needed. Staff told us they have appreciated this proactive approach when staffing levels have been affected by Covid-19 restrictions. This has supported staff to provide a continuity of care and support to people during this time. Kitchen and housekeeping staff are provided, which enable care staff to focus their time upon providing people with care and support.

Written information regarding the service provided is available, but not all the information required is included. The statement of purpose document is in line with the service provided. The service user guide does not contain all the information required by the regulations, to enable people to have a clear understanding regarding service provision. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

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	Upon admission into the service people's personal plans do not always record clearly the care and support they need in relation to their personal care.	New

19	The Service User Guide does not contain all the information as is required by the regulations.	New
36	Staff have not received refresher mandatory training.	New

Date Published 11/07/2022