



# **Inspection Report on**

**Westhaven Nursing Home**

**9 Francis Avenue  
Rhos On Sea  
Colwyn Bay  
LL28 4DW**

**Date Inspection Completed**

**21 October 2024**

21/10/2024

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## About Westhaven Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	JA Care Ltd
Registered places	19
Language of the service	English
Previous Care Inspectorate Wales inspection	5 December 2022.
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People living in Westhaven benefit from being cared for by a stable staff group who know their needs well. We observed good relations between people and staff. People are treated with dignity and respect. People and families spoken with are happy with the care given in the home. People are offered activities to encourage socialisation and stimulate their memories. People can have daily choices and are happy with the food offered.

People have their care planned according to their individual needs. People's personal plans reflect their preferences, choices and personal history. People can access specialist health care advice in a timely manner and their care plans are updated according to any new instructions. People can obtain their medications and prescriptions as needed. Medication storage is good in the home and processes are audited by senior staff.

The home has a continuing refurbishment and maintenance plan to ensure people live in an environment which supports their desired outcomes. People's rooms are being redecorated one by one to ensure people's comfort. People can access equipment needed for their care, these are serviced appropriately to ensure people's safety.

The Responsible Individual (RI) visits the home regularly as per the legislation to measure the quality of the service provided. Care staff are recruited appropriately and have supervision to provide them with support in their role. Whilst mandatory training is largely up

to date for care staff, Nurses need to be released for specialist training as offered by the local authorities to ensure best practice.

## Well-being

People are supported to achieve their desired outcomes. An activity person visits the home once a week and offers individual and group activities for people to enjoy. People's preferences and routines are recorded in personal plans and people are given daily choices. People spoken with are happy with the food provided, we saw the menus which offer two main choices and have a variety of food through the week. The home caters for special dietary needs. A person's relative said, "*staff are kind here, people are well looked after.*" The person also told us the manager and provider are visible and approachable and communication with families is good. We observed good relations between people and staff, people are treated with dignity and respect. We saw people have daily choices regarding how to spend their day, food choices and drinks. Care staff receive training regarding safeguarding to keep people safe.

People live in an environment which enables their care needs. People can personalise their rooms to make them homely. People can access the equipment needed for their care and health care reviews to ensure it remains appropriate for them. People spoken with said they are comfortable in their room. Health and safety is regularly audited and reviewed to enable people to be as safe as possible.

The RI and manager are visible to people and care staff and audit the quality of the service. Care staff recruitment and retention is good ensuring continuity of care. Care staff are supervised to support them in their role. Nurses are not consistently released to attend specialist training supplied by local authorities to enable best practice. This has been identified as an area of improvement and the provider is required to take action to meet the requirements of the legislation.

## Care and Support

People receive care which supports their individual needs. People's personal plans are personalised to their needs and contain information regarding their preferences and history. Personal plans are largely reviewed monthly to ensure the care plan remains valid for their needs. People have core risk assessments which are frequently reviewed to ensure their safety as far as is practicably possible. Care staff use assessments regarding people's mouthcare, nutrition, skin health, falls risk and body maps to record people's needs. Care staff are aware of local safeguarding processes to keep people safe from abuse and neglect. We saw people can access an advocate if they need one to maintain their rights. Senior staff assess prospective residents for the home to ensure the service can meet their care needs. People spoken with said they are happy with the care provided. A person said, *"I do like it here, I'm having a lovely day."*

People have their medication as prescribed. Medication storage is good in the home the medications room is locked as are cupboards and trolleys. The service has changed pharmacy and say the new service is working well and prescriptions are obtained in a timely way. The manager audits medication administration charts and supports nurses with their medication administration practice. The service also receives a medication audit from the local health authority to support them towards best practice.

Infection control is monitored to keep people as healthy as possible. The manager audits infection control practices and advises care staff of the result to enable good practice. Communal bathrooms and toilets have liquid soap, paper towels and pedal bins to ensure good hand washing practice. Care staff can access Personal Protective Equipment (PPE), to keep themselves and others safe.

## Environment

People live in an environment which supports their personal needs and outcomes. The kitchen hygiene rating is five, this is the highest rating possible. The home presents as clean and tidy. Fire alarms and equipment are tested weekly. The recommendations from the Fire Officer have been largely achieved to ensure people's safety. The provider is reminded about safe storage of equipment to ensure all fire escapes are clear of obstruction. Health and safety risk assessments are in place to ensure people are as safe as possible. The provider is reminded that free standing mobile heaters need a guard to prevent the risk of people scalding. Utility checks and certificates are up to date. We noted a more robust record of water testing is required. PAT testing had been booked on the day of inspection to ensure electric equipment in the home are safe to use. The lift and equipment used for people's care are serviced as required to ensure they are safe for people's use. The home has an on-going programme of maintenance to refurbish and refresh rooms. We saw the rooms already completed are done to a good standard and are compliant with the legislation. People have Personal Emergency Evacuation Plans (PEEPS), to evacuate them safely in an emergency or fire.

## Leadership and Management

The RI visits the home regularly and provides reports regarding the findings. The RI speaks with people and care staff to ask their opinions regarding the service. The environment is also surveyed to identify any areas in need of maintenance. The RI and manager discuss any issues and staffing numbers to enable over-sight of the service. The RI provided a quality report and is reminded of bi-annual quality reviews for the service. A quality review is planned for the end of the year.

Care staff are safely recruited. From the staff records reviewed, we saw checks are in place to ensure staff are appropriate to work with vulnerable adults. New staff receive an in-house induction to familiarise them with the home and the standards expected of them. Care staff spoken with are happy working in the home and feel enabled to give good care. A care staff member said, *"I'm happy working here, People get good care. The manager and RI are approachable and supportive."* We saw from the records reviewed; care staff receive supervision to support them in their role. The manager said the home has a full complement of staff and was interviewing for a senior member of staff to strengthen the managerial structure. Whilst mandatory training for care staff is largely in date, we found that nurses are not supported to attend specialist training needed for their role. This has been identified as an area for improvement and we expect the provider to take action.

People benefit from a home which has financial investment. The home is undergoing maintenance to refresh rooms for people's comfort. People can access equipment needed for their care; these are replaced as necessary. The staffing is at full complement and the managerial structure is being strengthened. The home has weekly deliveries of fresh produce for people's meals.



Summary of Non-Compliance	
Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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.

Area(s) for Improvement		
Regulation	Summary	Status
36	The provider is required to ensure nurses attend specialist training pertinent to their role in order to	New

	achieve compliance.	
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