

# Inspection Report on

Plas Crigyll Residential Care Home

Plas Crigyll Salem Street Holyhead LL65 3RA

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

15/06/2023



## **About Plas Crigyll Residential Care Home**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Isle of Anglesey County Council Adults and Children's Services
Registered places	25
Language of the service	Welsh
Previous Care Inspectorate Wales inspection	08 January 2019
Does this service provide the Welsh Language active offer?	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 living in Plas Crigyll and their families are happy with the care and support they receive. Staff and management demonstrate a good understanding of people's needs and show a caring approach. Detailed, person-centred information is recorded in individual personal plans and risk assessments and are updated accordingly. The service supports people to do things that matter to them. The provider completes referrals to professionals and specialist services for people living at the home as and when needed.

Staff are happy working in the home and feel supported by management and the responsible individual (RI). Staff receive regular training and supervision to ensure they are knowledgeable in their caring role. The RI visits the home regularly to monitor and further improve the service.

The environment is clean, homely, and relaxed. Rooms are personalised with people's memorabilia and belongings. Communal areas are spacious and bright and recently decorated, giving families and friends space and privacy to spend time with people who are important to them.

#### Well-being

People are treated with dignity and respect and receive person-centred care from staff who know their likes, dislikes, and preferences. Feedback from people in Plas Crigyll consistently commented on how "Happy" they are and how "Safe" they feel. People are supported to do things that matter to them and chose where they would like to spend their time. People receive regular visits from family members and friends and are encouraged to spend time with their visitors in the community. People are given a choice of what they would like to eat and we saw evidence of the staff offering alternative options if people express a dislike to the menu.

We saw people taking part in various activities within the home, doing things to keep them healthy. Management plan and keep records of activities on a weekly basis. During the inspection, we saw evidence of staff supporting people to engage with laundry tasks, painting pebbles, and playing games in the conservatory. People benefit from having access to a mobile hairdresser and from spending time with therapy pets such as rabbits and dogs. We saw regular positive mentioning of the home within the local newspaper giving people living in Plas Crigyll a voice within the community.

People are protected from abuse and neglect. The provider refers people to health services in a timely manner and they receive the right care and support. All interventions with external health professionals are documented within people's personal plans for all staff to be up to date with any changes. Staff feel confident in approaching management should they have a safeguarding concern, and they are aware of the Safeguarding Policy. Management respond promptly to matters relating to the safety and well-being of people and inform all relevant agencies. All staff are up to date with safeguarding and other core training. The provider ensures staff maintain their understanding and awareness of their responsibilities. Pre-employment checks are completed prior to staff starting their role in the home to ensure they are safe to work with vulnerable people.

The environment of the home supports people living with dementia to achieve a good standard of well-being. All rooms are personalised to suit their individual needs and are spacious and clean. A choice of communal areas is available for people to spend their days as well as a refurbished café within the home allowing people and families to spend time together in a relaxed atmosphere.

#### **Care and Support**

People's needs are fully assessed prior to moving to the home. The manager gathers information from people, their families or representatives, health professionals and Social Workers to have a better understanding of people's needs and how to support them safely. People are happy living in the home and described staff in Plas Crigyll as their "Family". One person told us "The welcome from everyone here has been fantastic. I call them (staff) my guardian angels." Others said "Tydi staff methu bod dim gwell. Mae'r bwyd yn lyfli. Dwi wrth fy modd yma, braf iawn yma." This person states they are very happy with the staff, the quality of the food and happy living in the home. We saw staff approach people in a calm, dignified and timely manner. People look relaxed and content in the home and have regular interaction by kind care staff. During the inspection, we saw staff entertaining people by singing along to Welsh music, both staff and people appeared to enjoy the activity.

Personal plans contain detailed person-centred information which is regularly updated by management to ensure staff know how to care for people correctly. People's personal plans are written in the language of their choice. Appropriate risk assessments are in place which are reviewed regularly by staff. There are systems in place to record and update the personal plan to include contact from external agencies such as district nurses, physiotherapists and dieticians. From the care files viewed, we saw people referred to health care professionals as and when required and people receive regular reviews from GP's and psychiatrists.

Staff have a good understanding of the whistleblowing and safeguarding policy. Deprivation of Liberty Safeguards (DoLS) applications to the local authority for people who do not have the ability to make decisions about their care are up to date in people's files. Medication is appropriately stored and ordered. We saw correct checks and balances of medicines during spot checks and medication trolleys and printed administration charts are used for safe medication administration.

The service provider has policies in place to promote hygiene and infection control. Domestic staff look after the cleanliness and hygiene of the home. Laundry supplies, Personal Protective Equipment (PPE) and ample cleaning supplies are available and used appropriately by staff.

#### **Environment**

The environment is clean and homely with people's rooms decorated with items and memorabilia from their homes. The home is spacious and communal areas allow plenty of room and space for families to visit to spend times with their relatives. Bedrooms, bathrooms, and communal areas are all well decorated. A maintenance worker is employed by the home and is on hand to complete any repairs needed in the home. Hallways are uncluttered reducing the risk of falls, all wardrobes and large furniture items are all fixed to the walls and all windows have restrictors in place for safety.

There are two lounges, two dining rooms and a newly refurbished café which has provisions for relatives to help themselves during visits as well as comfortable seating areas to socialise. Plans are in place to build a decked area in the garden to be accessible via the café giving people, family, and friends a seating area outside during warm weather.

People have access to appropriate equipment which is serviced and maintained regularly to ensure safety of use. We saw up to date health and safety checks in place. Fire alarms are tested weekly as are other fire safety checks. The Food Standards Agency awards the home a Level 5 food hygiene rating, which is the highest rating achievable. Health and safety risk assessments are reviewed on a regular basis with personal emergency evacuations plans (PEEPs) in place for people living in the home.

#### **Leadership and Management**

During the inspection staff spoke very highly of the management, and expressed the manager is approachable, and staff receive regular supervision from them. All staff attend core training as well as e-learning training on specific subjects in relation to people's health conditions. Courses attended by staff meet the needs of the people living in the service.

We saw records of staff registration with Social Care Wales, the workforce regulator and records relating to vetting and safety checks for new staff in place prior to staff starting their role. Records show there are adequate numbers of staff employed by the service to meet the needs of the people living there. Some staff members have worked at the service for decades and told us they still enjoy working at Plas Crigyll, stating "Dwi wrth fy modd yn gweithio yma hefo'r staff a'r trigolion", stating the worker is in their element working with the other staff members and "residents". The service employs agency workers to maintain staff numbers and is experiencing challenges due to staff retirement. Management reassured us there is no impact on the effectiveness of the service and arrangements are in place with the care agency to provide continuity of care.

The RI has arrangements in place for the oversight and monitoring of the service delivery. Records show the RI regularly visits the service to speak to people and staff to help improve the service. We saw records of formal RI visits documented as required by legislation.

The Statement of Purpose document provides people with clear up to date information about the service, the staffing structure, and the facilities available. 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 the service. Numerous staff members are fluent with the Welsh Language and are skilled to provide care and support in people's language of choice.

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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