



Arolygiaeth Gofal  
**Cymru**  
Care Inspectorate  
**Wales**

## Inspection Report

### Plas Y Bryn



Plas Y Bryn Nursing Home, 31 Tan Y Bryn Road, Rhos On Sea, Colwyn Bay, LL28 4AD



01492544117

Date(s) of inspection visit(s): 18 June  
2025.

17/06/2025

### Service Information:

Operated by:	Elmtree Healthcare Limited
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Provision for mental health
Registered places:	18
Main language(s):	Welsh and English
Promotion of Welsh language and culture:	The service provider makes an effort to promote the use of the Welsh language and culture, or is working towards a bilingual service.

## Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

## Summary:

Plas-Y-Bryn care home is situated in a residential area in Rhos on Sea which is close to local amenities. People can go out and about and are supported to be part of the local community. There is a core work force who provide continuity of care for people and know their needs well. New staff are being recruited in consideration of the new extension to the home. People spoken with say staff are kind and helpful.

The home has risk assessments in place to keep people safe. A new extension is being built to the home and safeguards are in place to mitigate risks. The home has a rolling programme of redecoration and maintenance to ensure a homely environment for people. People said they can choose the décor and furniture for their rooms to ensure their comfort. People can access

equipment needed for their care and this is regularly serviced to ensure their safety.

There is good governance and over-sight of the service to ensure good standards for people. There is an interim manager in place, the post is being advertised to ensure continuity of leadership in the home. The Responsible Individual (RI) provides over-sight of the service and support for senior staff. The RI provides quality reports in line with the regulations.

## Findings:



### Well-being

Good

People live healthily and safely; they have choices and can access meaningful activities. We observed friendly interactions between people, care staff and nurses (staff). Staff know people well and attend to their needs sensitively. A person told us, “*Staff are kind, they help me a lot.*” A new activities person has been recruited and senior staff in the service have high hopes for future activities provision for people. We saw people going out for a walk, a person told us, “*I get out and about for walks.*” Some residents were doing karaoke on the day of inspection; others were watching TV. One person said they like baking and another likes to sing. We saw an activities calendar on the wall for people. There is a driver available to take people to health appointments, these journeys are risk assessed for the safety of people and the driver. A person likes to travel, but is physically unable to, staff have found a website which gives daily suggestions for activities per country, as if the person were abroad, they can also access menus, travel posters and pictures of currency. For the people who choose to smoke, they can do so outside. This is in a temporary caged off area due to building works on the grounds, this has been risk assessed for people’s safety. People told us they have choices regarding what to eat, and what they want to do with their day. The provider is working towards an active offer of the Welsh language for people; some staff can speak Welsh. People can access Welsh literature and have Welsh greetings cards for celebrations.

People live in an environment which supports their well-being outcomes. Some people told us the building works cause them anxiety, but they are aware it will come to an end and there will be prospects of larger rooms and a new lift. People can choose the décor in their own rooms and communal areas. Some people keep pets in their rooms and are helped to look after them and keep the environment clean by staff. A person said they appreciate having pets as it keeps them calm and gives them things to do. Residents are working with the manager to design an American Diner themed room on the first floor. There are plans to change an office on the first floor into a quiet room/ library for people’s use.

People are protected from abuse and neglect. We saw from training records, that staff receive safeguarding training to keep people safe. Staff spoken with confirmed they have had safeguarding training and are aware of local protocols and who to contact should they be worried about people’s care. People who are unable to leave the home for their own safety, have Deprivation of Liberty Safeguards (DoLS) in place to safeguard their rights. People who cannot advocate for themselves can access an independent advocate to speak on their behalf.





## Care & Support

Good

People receive the quality of care and support they need to achieve their personal outcomes. From the personal plans selected, we saw people are central to their plan of care. People's preferences, personal history, and people of importance to them are recorded. Personal plans are regularly reviewed, in line with regulations, to ensure they remain appropriate to people's care needs. Risk assessments are also regularly reviewed to ensure risks are mitigated as far as possible, to keep people safe. Senior staff assess people before they are admitted to the home to ensure the service can adequately cater for their needs. People can access medical care and review in a timely manner and psychiatric reviews. People are assisted to attend health care appointments and can access the dentist, chiropody and optician. Where people experience changes to their care needs, these are documented, and risk assessments are updated. People's first language choices are recorded; the service is working towards an active offer of the Welsh language. We observed good interactions between people and staff; staff know people's needs well and can anticipate their needs. More staff have been recruited for the home, especially considering the extra rooms provision in the new extension. There are a core group of staff who are familiar to people and provide continuity of care.

Medications are safely managed in the home. Medications are stored appropriately in a locked room. There are detailed records kept of medications entering the home and leaving the home. Medications are given to people individually according to their prescription and are signed for. People can access their medications in a timely way. There are auditing processes in place to ensure the correct count of medications, good administration of medication practices, testing of ambient temperature to ensure medications are stored appropriately and safe storage of medications. Staff receive medication training and refresher training to support good practice.

The service has safeguards in place for people's safety. The service is transparent in its' dealings and reports incidents which impede the smooth running of the service to Care Inspectorate Wales (CIW) and relevant authorities in line with legislation. Records are kept of accidents and incidents which are shared with the RI and staff to ensure a continually improving service and lessons learnt are reflected upon. The service has a missing person's protocol in place. People's expressions of anxiety behaviours are monitored and safeguards put in place to mitigate risks to themselves and others.



## Environment

**Good**

People live in an environment with appropriate and well-maintained facilities and equipment. The home has dedicated cleaning staff. Walkways and fire exits are kept free of clutter to ensure people's safety and mitigate falls risks. There are building works around the home at present as an extension to the building is being constructed. Outside areas have been risk assessed, and safety measures put in place. We saw utility checks and certificates are in place for gas, electricity and water. Fire alarms are tested weekly, and staff are updated in their fire evacuation training. Equipment needed for people's care is serviced as required by the manufacturer to ensure they are safe to use. We saw wheelchairs have been cleaned and serviced. Laundry services are in line with the regulations, and a new tumble dryer has been purchased. The home has a rolling programme of maintenance and redecoration to maintain good environmental standards. We saw upstairs corridors and some rooms have been painted recently. People told us they can choose their own décor for their rooms to make them homely. Health and safety risk assessments and policies for the building in general are in place. There is a new policy in place regarding a no smoking policy within the building. People smoking in the building are given an advisory letter and reminded of the no smoking policy.



## Leadership & Management

**Good**

People are supported to achieve their outcomes as there is good governance in place for the service. There are effective quality checks and audits in place to ensure good standards in the service. The RI produces a quality report twice a year demonstrating analysis of people, family and staff opinion regarding the service, assessment of the environment in the home and any maintenance required, audits of falls and infection control and other care quality markers. There is a Statement of Purpose document in place which is kept up to date. This document is available for people and describes what they can expect from the service and what it offers them. There is a temporary manager in place, the manager's post has been advertised to ensure good leadership and stability for the service. The home has open communication with CIW and local authorities regarding the service and its' delivery.

People are supported by staff with the necessary skills and experience. We selected staff files at random, and found employment checks are in place to ensure staff are appropriate to work with vulnerable adults. Records show staff receive annual mandatory training to help them in their role. Staff have supervision every three months in line with the regulations and are given support as and when they require it. Staff spoken with feel supported by senior staff and confirm they have regular training and supervision.

## Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

**CIW has no areas for improvement identified following this inspection.**

**CIW has not issued any Priority action notices following this inspection.**



Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

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