



Inspection Report on

High Pastures Nursing Home

**High Pastures Nursing Home
Pentywyn Road Deganwy
Conwy
LL31 9YT**

Date Inspection Completed

13/11/2024

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About High Pastures Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	High Pastures Nursing Home limited
Registered places	44
Language of the service	English
Previous Care Inspectorate Wales inspection	23 November 2023
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 High Pastures benefit from person centred care planned around their individual needs. Family and friends can visit and stay in touch. People are offered activities and social opportunities if they so wish. People spoken with said they are happy with the care in the home and the food is good. Care staff are aware of local safeguarding procedures to protect people from neglect and abuse. People can access an advocate to protect their rights if they require one.

The care given on the day of inspection reflects that which is described in the Statement of Purpose document for the service. We saw that people's care checks correspond to the intervals prescribed in people's plan of care. People can access equipment needed for their care which are maintained to ensure that they are safe to use. Medicine administration and storage practices are good. Infection control is monitored to ensure good standards.

People are happy with their rooms and the cleanliness of the home. There are lounges available for people to be sociable or quiet in and to receive visitors. People can choose to eat their meals at a dining table if they prefer. The kitchen and laundry are compliant to the legislation.

There is good governance in place to ensure the smooth running of the service. There is a management structure in place to ensure there is sufficient cover to run the service. The staff work rota reflects the numbers of staff recorded in the Statement of Purpose document. The Responsible Individual (RI), for the service produces a quality report twice a year to ensure the service meets good care standards.

Well-being

People have their voices heard in the home. We saw care is planned according to people's individual needs. People's likes and dislikes are recorded as are their preferred routines for day and night care. If people cannot speak for themselves an advocate is provided to ensure people's rights. We observed a good rapport between people and staff and saw people are treated with dignity and respect. People's first language choices are recorded in their personal plans and their choices are acknowledged by the care staff. The provider performs quality audits and asks the opinions of people, families and care staff twice a year to ensure good standards of care. People spoken with are happy with their care and praise the care staff and the food provided in the home. A person said, *"The staff are always good; they get me food and drink and help me to get washed and dressed. The food is good, they know what I like."*

People get the right care and support as early as possible. We saw from the care records viewed, people have their health monitored closely and medical or specialist advice is sought in a timely manner. People can also access hospital appointments, chiropody, optometrist and the dentist. People are protected from abuse and neglect as care staff are updated in their safeguarding training and are aware of the local safeguarding process. People are encouraged to join in with activities such as singing and arts and crafts to stimulate memory and encourage socialisation. People can remain in contact with family and friends and receive visitors.

People live in a home which supports their wellbeing. People can personalise their rooms with possessions which matter to them to make the space homely. The rooms viewed are clean and compliant to the legislation. There are large and small lounges available for people to be sociable or quiet in or to have privacy to receive visitors. The garden is well maintained, and people can sit outside during warm weather if they so choose. There is a dining room available if people choose to have their meals there.

Care and Support

People are consulted regarding their care as able. People can advocate for themselves if they have capacity to do so, an advocate is sought if they require help with maintaining their rights, wishes and objectives. People's personal care plans are written according to their individual needs. These are reviewed monthly to ensure the plan remains appropriate for the person's needs. Senior staff assess people before they are admitted to the home to ensure the service can meet their needs. Aspects of people's care needs are risk assessed to care for them safely. People's health is monitored and recorded, and people can access medical and specialist advice in a timely way. People have the equipment needed for their care and these are serviced regularly to keep them in good working order. Medicine storage and administration is good, and people receive their prescribed medications. Personal plans and sensitive information is stored in a confidential manner to maintain people's privacy. People spoken with were happy with their care. A person said, *"The staff are good at feeding me, they always help me."* Another person said, *"Staff help me get washed and dressed and do my hair. The staff have a lot to do, but they're very good."* We saw from care records that people are checked regularly to ensure their comfort, the regularity of checks corresponds to the care plan assessments viewed.

People benefit from living in a clean home which promotes good infection control. We viewed the home and facilities and saw they are clean and tidy. Care staff are up to date with infection control training to enable them to care for people safely and stop the spread of infection. Senior staff audit infection control practices in the home and share the results with care staff to ensure good practice. There are appropriate facilities in the home to enable good handwashing techniques.

Environment

The environment in the service promotes achievement of people's personal outcomes. People can access equipment needed for their safe care which is regularly serviced to ensure their safety. The hygiene rating for the kitchen is five, this is the highest rating available. We saw the kitchen is clean and well organised. Laundry facilities are compliant to the legislation and in the rooms viewed, we saw people's clothes are clean and neatly pressed and have their names on them to ensure their safe return. A person told us the laundry service is good and they always have the right clothes returned to them. People told us they are happy with their rooms and the standard of hygiene in the home. We viewed maintenance records and saw there is an ongoing programme of maintenance to ensure the home is kept to a good standard.

The service mitigates risks to people's health and safety as far as is practicably possible. We saw health and safety risk assessments for the home are present and are reviewed and updated to ensure they remain relevant. Health and safety policies are also reviewed and are available for care staff to read to ensure good practice. Utility checks for fire equipment, water, electricity and gas are within date. The lift is serviced as per the manufacturer's requirements to keep it in good working order. Liability insurance for the home is within date.

Leadership and Management

There is good governance in place to ensure the smooth running of the service. There is a management structure in place to ensure adequate cover for any absences. The care given on the day of inspection corresponds to that which is described in the service's Statement of Purpose. The RI conducts bi-annual quality audits to ensure the home delivers care of a good standard, opinions are asked of care staff, people using the service and their families. The RI is also the manager of the home and is usually present during the working week.

The service has an almost full complement of staff. The RI told us there is only one post outstanding at present. The work rota seen reflects the staffing numbers described in the service's Statement of Purpose. We saw recruitment and retention of staff is good. Care staff have appropriate checks in place to ensure they are appropriate to work with vulnerable adults. We viewed training and supervision records for care staff and saw they are up to date. Care staff spoken with said they feel well supported in their role and have sufficient training and supervision. A care staff member said, *"I love it here. There is good training, supervision and support. The manager is approachable and helpful."* Another said, *"People get good care. The Manager is supportive",* and another said, *"I like it here. I can give good care. We have good training and supervision."*

The budget provided for the home supports good outcomes for people. The kitchen staff told us of daily deliveries of fresh ingredients for people's meals. Care staff are supplied with sufficient mandatory training for their role. Staff are recruited to maintain the numbers described in the Statement of Purpose. People can access equipment needed for their care which is maintained to ensure their safety. Care staff told us equipment is replaced as necessary as are towels and linens.

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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

21	Care and support is not being provided in accordance with personal plans in relation to repositioning requirements. Support staff must ensure care and support is being provided in accordance with personal plans and risk assessments.	Achieved
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