Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Rhosyn Melyn

Plas Rhosnesni Nursing Home
Cefn Road
Wrexham
LL13 9NH

Date Inspection Completed

01/12/2023

About Rhosyn Melyn

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Plas Rhosnesni ltd
Registered places	66
Language of the service	English
Previous Care Inspectorate Wales inspection	22 May 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 are happy with the support they receive at Rhosyn Melyn. People are supported by skilled and attentive staff who know them well. We saw care staff provide positive reassurance and interactions. People are supported to make choices about their daily lives. Personal plans are person-centred, detailed, and reflect people's needs. They are reviewed and changed accordingly. There are various activities on offer throughout the week and two dedicated activity coordinators to support people to engage in activities.

Staff feel well supported by Management and are provided with training to meet people's needs. There are good governance arrangements in place. The Responsible Individual (RI) visits the home regularly to oversee management of the home and gathers the opinions of people and relatives to help to improve and develop the service. The environment is well-maintained. The service is operating in line with the statement of purpose.

The previous area for improvement identified at the last inspection for standards of care and support has been met.

Well-being

People have control over their day to day lives. They feel they are listened to, and their views are considered; they contribute to decisions that affect their life. Care staff work from personal plans that are written together with the person or their relatives. Care staff cater for people's preferences. People say they like living at the home and they make choices on how they live their lives day to day. People and their relatives are involved with the improvement and development of the service. There are choices around food and activities on offer. Care staff listen to peoples wishes. Call bells are answered in a timely way. Rooms are personalised and well-maintained. Care records give care staff the instruction required to support people accurately and reviews are carried out in line with regulations. Care staff know residents well and they support people to move around safely. People have visitors coming to the home regularly and have good relationships with people they live with.

There are activities on offer in the home facilitated by two dedicated activity coordinators. Care staff also support people to engage with activities. Activity Coordinators keep records of activities people take part in. There are weekly activity boards on display, telling people what activities are happening and when. People say they like the activities on offer. We saw a singer visiting the home during inspection, with many people present. People can practice their faith as religious representatives come to the home on a regular basis.

The service is working towards the Welsh language 'Active Offer'. The service tries to match Welsh speaking residents with Welsh speaking care staff and provides some documentation in Welsh. The service provider should refer to Welsh Government's 'More Than Just Words: Follow-on strategic framework for Welsh Language Services in Health, Social Services and Social Care' for further information.

People are protected from abuse and neglect. Care staff receive training in safeguarding and safeguarding policies and procedures are in place and followed. People are supported to maintain and improve their health and well-being through access to specialist care and advice when they need it. Referrals are made in a timely manner to specialist services, ensuring people receive the right care and support, as early as possible. Care staff and the manager are proactive and work collaboratively with support agencies.

The lay out of the home supports people to achieve a good standard of well-being. People are encouraged to be independent and can get around home safely, with good strategies for reducing the risk to people while they move around the home in place. The person in charge has identified potential hazards and has taken steps to minimise risks to people.

Care and Support

People can feel confident the service provider has an accurate and up to date plan for how their care and support needs should be met. People and their relatives are encouraged to co-produce their personal plans and have choice of everyday decisions such as the clothes they wish to wear, times they get out of bed in the morning and where they spend their time. Personal plans are personalised, up to date, accurate and regularly reviewed. They are detailed and contain personal outcomes, likes, dislikes and preferences. Robust risk assessments are in place and reviewed monthly. Pre-assessments take place before people move to the home, these are completed by the manager or deputy managers. Documents are completed telling staff about people's history and how they came to be at the home. People receive care in line with their personal plans and risk assessments. Care staff are kept informed of important updates, from thorough daily handovers.

Relatives said *'the staff are fantastic, they are giving mum more independence and encouraging her to walk around. It would be much easier for them to keep her in bed, but they make sure she is up and interacting with people'*. Care is provided in a warm and compassionate way by skilled and reassuring care staff. Relationships between staff and people are positive.

People have choices of what to eat and can have more if they wish. Food is well-presented and appetising. Dietary choices are passed to the kitchen staff. We observed appropriate manual handling and equipment being used.

Records show people have access to specialist advice and support from health and social care professionals. Care plans and risk assessments are updated to reflect professional advice. Care staff access mandatory and specialist training relevant to the needs of people. Care staff feel they can approach the manager if they have any concerns.

People can be satisfied that the service promotes hygienic practices and manages risk of infection. Medicines administration, storage, infection prevention and control practices in the home are good and keep people safe. Nursing staff are trained and administer medication. Regular medication audits are carried out by management.

Environment

People live in an environment suitable to their needs. The service provider invests in the decoration and maintenance of the home to ensure it meets people's needs. Windows in the home are in the process of being replaced and new furniture and curtains have been purchased on the first floor since the last inspection. Rooms and communal areas are mostly well maintained. An ongoing programme of maintenance is in place. People enjoy using communal lounges and dining rooms. People can socialise in communal spaces and have privacy in their own rooms if they wish. There are quieter dining rooms available for people to use if they wish.

People's rooms are clean, tidy and personalised to their own taste with belongings. Moving and handling equipment is stored accessibly but safely out of the way to prevent trips and falls.

The gardens are secure and well maintained. People access the main home through a securely locked door and visitors have to sign in and provide identification.

We saw cleaning staff around the building throughout our visit and found all areas were clean and tidy. The service provider has infection prevention and control policies, with good measures in place to keep people safe.

People can be confident the service provider identifies and mitigates risks to health and safety. Records show there is a monthly health and safety audit, and actions are dealt with swiftly by maintenance staff. This is monitored by management and the RI. The home has the highest food rating attainable. Routine health and safety checks for fire safety, water safety and equipment are completed, and records show required maintenance, safety and servicing checks for the lift, gas, and electrical systems are all up to date.

Leadership and Management

People can feel confident the service provider have systems for governance and oversight of the service in place. We saw records of regular RI visits to the service, who speaks directly with residents and care staff to gather their views, completes an inspection of premises and views a selection of records. The area manager also completes monthly reports that consider all aspects of the day to day running of the service, including personal plans, medication administration and skill mix of staff in the home. We saw evidence of monthly management audits of all key areas and action planning as a result. A quality of care survey is conducted by the home every six months. Resident meetings are held for residents to feedback to managers. The RI gathers feedback directly from people using the service. People say they can speak to the manager about changes to their care and action is taken. The provider has submitted an annual report as required by Regulation.

People can be satisfied they will be supported by a service that provides appropriate numbers of staff who are suitably fit. Care staff have the knowledge, competency, skills and qualifications to provide the levels of care and support required to enable people to achieve their personal outcomes. Records show the manager has suitable numbers of staff on each shift to support people's needs. Staff records show new staff undergo thorough vetting checks prior to starting work in the home and receive an induction specific to their role. Staff receive annual appraisals and one to one supervision meetings with the manager or deputy managers.

Staff are employed specifically for cleaning, activities, maintenance, and cooking. Care staff state they feel well supported by the manager and have access to the training required to meet people's needs, *'The managers make me feel appreciated and they tell us when we are doing a good job.'* Training is provided to staff through a combination of online and face to face training. Training records are reviewed and updated to make sure they accurately reflect training compliance.

People can be confident the service provider has an oversight of financial arrangements and investment in the service, so it is financially sustainable, supports people to be safe and achieve their personal outcomes.

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 inspection	N/A
21	The service provider has not ensured people consistently receive meaningful interactions when receiving support from care staff.	Achieved

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