



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru  
Care and Social Services Inspectorate Wales

## Inspection Report on

**Plas Bod Llwyd**

**Plas Bod Llwyd  
Cae Gwilym Lane  
Newbridge  
Wrexham  
LL14 3JG**

## **Date of Publication**

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## **Description of the service**

Plas Bod Llwyd is a residential care service located in Newbridge, Wrexham, provided by Clwyd Alyn Housing Association, which is a member of the Pennaf Housing Group. Plas Bod Llwyd is registered to provide personal care for a maximum of 29 people over the age of 65. The company has nominated a person to be the responsible individual and the registered manager is Judith Richards.

## **Summary of our findings**

### **1. Overall assessment**

People experience warmth and a sense of belonging. They develop appropriate friendships with others living at the service and members of staff. People have choice of what they have to eat and the food provided is of a good quality and nutritious. Regular activities are held. People have their needs assessed prior to them moving and at regular intervals once they have moved in. We were advised by one health care professional that the care and support provided was, in her opinion, excellent. The home is set in its own grounds, is spacious, light, airy and cleaned regularly. Staff recruitment systems are robust and staff receive regular training which enables them to support people appropriately. Staff have regular supervision and are well led, supported and trained.

### **2. Improvements**

Our previous report made the following recommendations for improvement:

- The recruitment files should be reviewed to ensure they contain the required documentation. The information should be clearly organised and easily located. We saw that this has now been done.
- It is strongly recommended that the system for maintenance and organisation of records is reviewed. Records were found not to be in good order, this is because the information in the files was not organised in a way that information could be easily found. We found this has been addressed.

### **3. Requirements and recommendations**

Section five of this report sets out recommendations to improve the service. They are:

- Ensure that care plans are signed and dated when people have input into them.

# 1. Well-being

## Summary

People feel they belong and have developed appropriate friendships with staff and other people living at the service. People have choice in what they want to do as there are activities provided on both a communal and individual basis.

## Our findings

People experience warmth and belonging. We saw care workers approach people in a warm and friendly manner. People looked relaxed in the company of staff and each other. We saw people had developed friendships with each other and were interacting in a positive manner. There were quiet areas where we saw people talking privately with friends and relatives. We saw staff who were kind and caring at all times, treating people with dignity and respect. It was evident the well-being of the people living at the service was the main priority of the registered manager and this attitude was evident in the staff working at the home. We saw friendly "banter" between staff and people, which was appropriate at all times, appreciated and led to a relaxed and happy atmosphere. We spoke with a number of people, one person told us *"I am happy here, it's brilliant."* Another said *"I can talk to the staff, staff have time for you, they are busy but they make time."* We also spoke with two professionals; one said *"staff treat people as friends in an appropriate way."* Another professional told us *"there are good interactions between staff and those living at the service."* People feel they belong.

We saw people could eat in the dining room, in the communal areas on their own or with others or in their own rooms. People had a choice of breakfast, such as toast and /or cereal; it was evident from the menu and from speaking with people living at the service and staff that a cooked breakfast was available upon request. Copies of the menu were on the noticeboard in reception and we saw copies of these menus which showed they were changed regularly and people had choice of what they had to eat. Of four people living at Plas Bod Llwyd whom we spoke to, all enjoyed the food. One person told us *"the food is very nice though it can be a bit samey."* Another person told us *"the food is beautiful; we get plenty of choice and can have a cooked breakfast if we want."* Of seven questionnaires returned by relatives, six rated the quality of food as good or very good, with one as average, four rated the choice of food as good or very good with two saying it was average and one saying the choice was poor. Five relatives rated the quantity of food as good or very good whilst two rated it as average. Of the two professional who returned questionnaires, one considered the quality of food as very good whilst the other felt it was good. In regards the quantity of food, one professional felt it was very good whilst the other felt it was good.

Activities were organised and arranged by staff at the service. We saw a programme of activities for the month which were advertised on the noticeboard and included pamper afternoons, lunch clubs, crafts, an outing to Ellesmere lake and armchair exercises. We spoke with two people living at Plas Bod Llwyd who advised us the activities provided were good, whilst another told us there was *"not a lot going on."* We spoke with a professional who told us she had seen the registered manager taking people out when she had to go on

an errand. This professional also told us they had been invited to attend when a South African choir that had attended the service recently. We spoke with a relative who told us the service “*organises trips to Llangollen and staff did (my relatives) hair so (my relative) could go.*” We received seven questionnaires from relatives regarding activities at the service, four said they were good, two said they were average and one said they were very poor. Two questionnaires received from professionals advised activities at Plas Bod Llwyd were mostly appropriate for the people taking part. On balance people can be confident that they are as healthy and active as they can be and are content and happy living in the service.

## 2. Care and Support

### Summary

People have their needs and requirements assessed prior to them moving in so that appropriate support is in-place from the outset of their stay. Care plans are detailed, updated regularly and person centred. Care is given quickly and without fuss and people are treated with dignity and respect at all times. In regards the care provided, we were advised by one health care professional that the care and support provided was, in her opinion, excellent.

### Our findings

People's care and support needs are met. Assessments were undertaken before admission to ensure that the home and local services were able to meet their individual needs. We saw pre admission assessments and spoke with a senior care worker who confirmed pre-assessment information was available prior to people moving in so they were aware of the person's requirements in advance. This pre-assessment also contributed towards the information entered into the care plan. We were told by three people living at Plas Bod Llwyd they had been visited by the registered manager and that a pre-assessment had been undertaken. One person told us *"yes I was visited at home before I moved in, I knew the home anyway, I knew it by reputation as it has a good reputation which it has lived up to."* We also viewed three people's files where pre-assessments were present and care plans were in place before people moved into the service. This ensured health and welfare needs were met as soon as people moved in to the service. Of the three care plans viewed, only one had been signed by the person to say they had contributed to it. We spoke with three people living at the service, one advised they had a care plan but weren't sure if they were involved in it, and two said they did have input into the care plan, one person told us *"I have a care plan in place and I do get involved in it."* Of seven questionnaires returned by relatives, three said they always contributed to the care plan, three said they contributed to the care plan "sometimes" and one person said they never contributed to the care plan at all. People were able to get up and go to bed when they wished. Of the three staff we spoke with, all advised that people got up and went to bed when they wanted. All four people we spoke with confirmed this. . One person told us *"I have always got up at 6 a.m. and am able to do this here, I can keep to my routine."* On balance people are involved in making decisions that affect their lives.

People receive timely, appropriate person centred care. All the care plans we viewed were detailed, giving profiles of the person and a brief summary on how to support that person. The care needs summary helped staff see what support was needed and how best to deal quickly with any issues which might arise. We saw detailed risk assessments in place along with comprehensive information in regards to falls. Care plans were up to date and had been reviewed in a timely manner. We saw good interactions between staff, not just care staff but all staff employed at the service, and people living at the service, with appropriate "banter", which was appreciated by all involved. We witnessed someone being moved from a chair to a hoist in a lounge. This was done with great care and forethought, the person was treated with dignity at all times. Staff involved sang softly with the person during this hoisted transfer, which helped alleviate any stress and worry the person might have felt. We received questionnaires from two professionals who advised us that the service followed

their instructions either well or very well and they felt the attitude of the staff towards the people was very good. We were advised by one health care professional that the care and support provided was, in her opinion, excellent. These three professionals advised us that communication between the service and themselves was very good. People receive the right care at the right time in the way they want it.

### **3. Environment**

#### **Summary**

The home is welcoming, spacious, airy, clean and secure. Internally and externally Plas Bod Llwyd is well maintained and has enough space for people to socialise in groups or to speak with people in private. There are appropriate equipment and aids available. Testing of equipment is up to date.

#### **Our findings**

The premises are welcoming, comfortable, clean, homely and secure. The entrance to the home was locked and secure with visitors unable to gain access without ringing the bell and being let in by a member of staff. Visitors were required to sign in and out of the building for security and fire safety purposes. People living at the service were free to come and go as they chose.

The premises were well maintained and decorated. We saw schedules which showed that the service was being cleaned on a regular basis and on the day of the inspection we found Plas Bod Llwyd to be clean and free from odours. People could furnish their rooms to ensure a personal touch. There are appropriate aids and equipment available to help with people's independence. We noted that the service had been awarded a food hygiene rating of five which is "very good" and suggests that appropriate hygiene methods are used in the kitchen.

We looked at the records of the testing and servicing of equipment and appliances. We found these were up to date. We looked at the fire safety system and fire safety equipment. Records showed us staff received training in fire safety and individual emergency evacuation plans for those living at the service had also been completed. Other areas of testing also up to date included stair lifts, electricity and gas safety.

People had their own private rooms (with a toilet and wash hand basin) and communal areas where they could socialise. There were quiet areas where people could also go and we saw people using these. We found the dining areas had adequate numbers of tables and chairs to facilitate and encourage people to interact, with the opportunity for people to eat on their own if they wished. The service was set in its own grounds which were accessible to those living at the Plas Bod Llwyd; these were being maintained during the inspection. People live in accommodation which meets their needs and supports them to maximise their independence and achieve a sense of well-being.

## **4. Leadership and Management**

### **Summary**

Vigorous measures are in place for the recruitment and supervision of staff. Quality assurance measures are detailed and ensure people have a say in how the service is run and improved. There are sufficient numbers of well trained staff working with people at the service at all times. There is a detailed statement of purpose and service user guide in place, ensuring people are aware of what the service will provide for them.

### **Our findings**

The service's quality review process influences how Plas Bod Llwyd operates. People using the service, working in the service or linked to the service were involved in measuring the quality of the service as they are asked for their opinion on the quality of care provided. This was analysed both internally and by an independent external consultant. The service had comprehensive self-evaluation, annual development plans and a quality assurance framework. The quality assurance was influenced by a number of different sources; they included commissioner's reports, board of management unannounced visits, our (CSSIW) inspection reports and anonymous staff questionnaires carried out by an external company. People using the service and relative feedback also fed into the quality assurance process; this was also independently reviewed annually. We viewed minutes of the registered managers' meetings with senior carers and staff meetings, we were told by staff of meetings with people using the service which took place. There was a complaints policy in place which took account of any concerns and implemented any necessary changes from this. People benefit from care which is committed to innovation and is informed by best practice.

We found that the registered manager ensured that there were sufficient staff who had relevant and appropriate qualifications, training and experience in working with people using the service. In regards staff responsiveness to people's needs, of seven questionnaires received from relatives, five felt the amount of time spent by staff with people living at the service was either good or very good whilst two felt it was average. Of the seven relatives four said staff were "always" quick to respond to their relatives needs whilst three said staff were "sometimes" quick to respond. We received two questionnaires from professionals and spoke with another who said there always appears to be enough staff on duty to meet the needs of people living at the service. We saw staff rotas which showed that staffing was adequate. Staff were recruited through a robust recruitment procedure. We looked at staff files and found all the information required was present. Staff had support and training to help them in their role. Staff told us they received a lot of training and we were given records which showed a wide range of appropriate training was undertaken. This included; safeguarding, infection control, dementia training and food hygiene training. We spoke with a health professional who told us the registered manager had requested specialist training from their service, which was to be implemented. We saw records which showed staff had regular supervision, appraisals and team meetings. People benefit from a service where the well-being of staff is given priority and staff are well led, supported and trained.

The service has a clear and comprehensive statement of purpose and service user guide, a copy of which is given to all people moving into the service. These provided an accurate picture of the service and the services provided. We saw that the correct registration certification was displayed in reception, showing clearly who the registered manager and responsible individual for the service was. Whilst viewing people's files we saw that everyone had a signed contract and that this was done either prior to them moving in or upon their moving into the service. Pre-assessments were undertaken by the registered manager of the service and people were able to visit Plas Bod Llwyd before they moved in. We spoke with people who had visited before they started living at the service. We were told that there were three Welsh speaking staff. Any Welsh speaking people living at the service are allocated a Welsh speaking staff member as their key worker which helps people communicate in the language of their choice. People know and understand the care, support and opportunities which are available to them.

## **5. Improvements required and recommended following this inspection**

### **5.1 Areas of non compliance from previous inspections**

None

### **5.2 Areas of non compliance identified at this inspection**

None

### **5.3 Recommendations for improvement**

- To ensure there is evidence people have had input into their care plan.

## 6. How we undertook this inspection

This was a full unannounced inspection undertaken as part of our inspection schedule on 13 July 2017 between 08.30 and 19.20.

The following methods were used:

- We used the Short Observational Framework for Inspection 2 (SOFI2). The SOFI2 tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.
- We spoke with people living at the home, visiting relatives, visiting professionals, the registered manager and staff on duty.
- We issued questionnaires to people receiving the service, relatives, staff and professionals. Nine completed questionnaires were returned.
- We looked at a range of records. We focused on four care plans and associated documents, staff records, training records, quality assurance reports, staff rotas, computer records, menus, internal surveys and staff supervision records.
- We looked at the communal areas both inside and outside the home, including the kitchen and a sample of people's bedrooms.

Further information about what we do can be found on our website [www.cssiw.org.uk](http://www.cssiw.org.uk)



## About the service

<b>Type of care provided</b>	<b>Adult Care Home - Older</b>
<b>Registered Person</b>	<b>Clwyd Alyn Housing Association Ltd</b>
<b>Registered Manager(s)</b>	<b>Judith Richards</b>
<b>Registered maximum number of places</b>	<b>29</b>
<b>Date of previous CSSIW inspection</b>	<b>20 September 2016</b>
<b>Dates of this Inspection visit(s)</b>	<b>13 July 2017</b>
<b>Operating Language of the service</b>	<b>English</b>
<b>Does this service provide the Welsh Language active offer?</b>	<b>The service is currently working towards the Welsh Language active offer.</b>
<b>Additional Information:</b>	

