



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

Care and Social Services Inspectorate Wales

Care Standards Act 2000

Inspection Report

Penrhos Polish Nursing and Residential Home

Penrhos
Pwllheli
LL53 7HN

Type of Inspection – Baseline
Date(s) of inspection – 19 May 2016
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Summary

About the service

Penrhos Care Home is owned by The Polish Housing Society Ltd and is situated in the Polish Village. The Village is situated close by to the village of Penrhos, on the outskirts of Pwllheli. The company is registered to provide personal and nursing care for up to 44 older persons, two younger adults and an older person requiring nursing care due to a diagnosis of dementia.

On the day of the inspection visit, there were 42 people accommodated in the home, 13 of whom were in receipt of personal care, and 29 were receiving nursing care.

The Responsible individual is Mr Michal Drewenski.

The home does not have a Registered Manager at present. The acting manager has recently gained an accredited qualification with the Care Council (Wales) which is a relevant qualification for the management of a care home. The manager is now required to submit an application to the Care and Social Services Inspectorate Wales (CSSIW) for the position of Registered Manager.

The service has a Statement of Purpose which explains the services offered to the People living in the home.

What type of inspection was carried out?

We, (Care and Social Services Inspectorate, Wales), conducted a baseline inspection of the home looking at the quality of life for people living in the Penrhos Care Home, the quality of the leadership and management, staffing and quality of the environment.

The inspection visit was unannounced, and was carried out between the hours of 11am and 3pm on the 19th of May, 2016.

Information for this report was gathered from the following sources:

- Discussions with the manager.
- Discussions with two members of staff.
- Discussions with two people using the service, and one relative.
- We looked at two care files.
- We saw two staff files.
- Full tour and observations of the premises including people's rooms.
- We saw the staff training records.
- We have copies of the staff rotas for April and May 2016.
- Observation of 5 people living in the home using the Short Observational Framework for Inspection (SOFI 2) tool. The SOFI 2 tool enables inspectors to observe and record life from a service user's perspective; how they spend their time, activities, interactions with others and the type of support received.

What does the service do well?

The service supports the ethnicity and cultural needs of Polish, Welsh, and English people who are using the service.

Signs in all three languages were seen throughout the home.

People and staff were seen to be conversing in all three languages. Polish, Welsh and English speaking staff are available on each shift.

What has improved since the last inspection?

In the last report, dated the 9th of June, 2015, a non-compliance notice was served in respect Regulation 18(1)(a) which states that the service must provide suitably qualified, competent, skilled and experienced persons to work in the care home in such numbers as to ensure the health and welfare of people using the service. We have seen the staffing rotas for April and May, 2016 which show that staffing numbers have improved, enabling the service to better care for people residing at Penrhos. People we spoke with said they receive good, timely, care at the home. We saw that care giving was relaxed and responsive.

An activities leader has now been appointed who can play the piano, play chess, and is knowledgeable regarding gardening. The service has made this appointment to provide activities and stimulation for people using the service.

What needs to be done to improve the service?

The service remains non-compliant with Regulation 8 (1) (a) of The Care Homes (Wales) Regulations (2002), in respect of the lack of appointment of a Registered Manager who is registered with CSSIW. **A previous non-compliance notice has been issued in respect of this. However, as previously stated, a manager has been appointed and an application to register with CSSIW is expected.**

Quality Of Life

Overall, the Penrhos Care Home provides a safe, homely, familiar environment for the people living there.

People are treated with dignity and respect. People living in the Penrhos were seen to be comfortable, and were dressed appropriately in clean clothing, ensuring their dignity. Staff members were seen to address people in a friendly, respectful manner in the language of their choice. People spoken with said that staff were kind to them and treated them with respect. We saw staff giving people care and attention in a relaxed way with due regard for people's likes and needs. Bathrooms had lockable doors, and staff were seen to knock or call out a greeting before entering people's rooms to ensure their privacy.

People feel that their religious and spiritual needs are acknowledged and supported. We saw that the home had their own chapel with regular visits from ministers of all denominations. People were seen to have religious pictures and ornamentation in their rooms which had special meaning for them. The home organises outings to attend services at local churches.

People are a little inactive at times, people we spoke with confirmed this, but measures have been put in place to improve the level of activities available to people at the home. People were seen to receive visitors in their rooms and in the lounges. We saw people watching TV, and saw that people could have the daily papers delivered if they so desired.

People benefit from a healthy diet and attention to hydration and nutrition. We observed five people in an assisted dining room with aid of the SOFI 2 tool; they were receiving aid with their eating needs. People seemed to enjoy the food given to them, and all of them ate the whole meal. Some people we spoke with did not like the meals on offer, but were happy that they could ask for an alternative if so needed. We saw that people could ask for tea/coffee as needed and that there were beverage and snack rounds with a selection of foods on a trolley in-between meals. People were seen to have their drinks close to hand in their bedrooms and in the lounge, so that they could keep themselves hydrated. Food is provided from a general on-site kitchen in the grounds of the home. Special diets can be catered for, and we viewed the menus offered. The service is looking to further improve the food provision, there is only one choice at meal times at present, however, people can request an alternative if needed. The kitchen in the home is only used to provide drinks and snacks at present, but the home is advertising for a cook in order to fully utilise the kitchen and offer more food choices for the people living in the Penrhos.

People can be sure that they experience appropriate, responsive care from staff that have an up to date understanding of their individual needs and preferences. We viewed a sample of care plans and saw that they were detailed, covering all aspects of the people's care needs. We found that care plans and risk assessments were updated on a monthly basis, or as people's care needs change. We saw from the training records that staff receive updated training as appropriate in order to give people evidence based care.

People remain healthy because their needs are anticipated and they are enabled to have access to specialist or medical support. Staff receive the necessary training in order to identify people's changing needs. We saw evidence of referrals and follow up instructions from GP's and other health care professionals in the care files viewed, and that appropriate actions were taken by staff.

People experience warmth, attachment, and belonging. People and relatives that we spoke with said that staff knew them well, and that staff were friendly and responsive to their needs. Family members said that the home encouraged visits throughout the day, and that the home's communication, regarding their relative's changing care needs, was good. We saw that staff and people living in the Penrhos conversed in a natural manner, and that staff were referencing people's interests and families. We saw from our observations using the SOFI 2 tool that staff and the people using the service had good relationships, staff understood the needs of the people, and were able to assist them sensitively.

Quality Of Staffing

Overall, the staffing levels at the Penrhos Care Home has improved.

People we spoke with felt that the care and communication had improved in the home after the advent of greater staffing numbers on the shifts. We observed that care giving was flexible and un-hurried.

People needs are anticipated and people benefit from good, timely decisions and responsive care. We saw that there was a good standard of care planning and evaluation in people's care notes. We saw from all of the intentional rounding sheets viewed- a document specifying the times and types of care to be given to people throughout the day and night- that people received two hourly positional changes whilst on bed-rest, this was also continued throughout the night. This is done to guard against pressure sore development and to ensure people's comfort.

People are now cared for by familiar staff as turnover is low, sickness rates are low, and there is limited use of agency staff. People spoken with stated that the staff are familiar with their needs and that they appreciate being cared for by staff that they know well. We saw that staff had good knowledge of the people they cared for and were able to anticipate their needs.

Staff members spoken with said that they were happy to be working at the home. Staff said that they received good support and that management listened to them and were proactive. Staff felt that they could approach the manager with any problems and that issues would be dealt with and kept confidential. Staff said that they had good training and supervision, and were enabled to give good care to the people of Penrhos Care Home.

Quality Of Leadership and Management

Overall, People receive effective support from a service which can meet their needs.

People feel that they get reliable, good quality care. The people and relatives spoken with were happy with the standards of care in the home, and spoke positively of their experience within the home.

People using the service can be confident that the provider will respond positively to feedback and critical incidents. The improvements required from the previous CSSIW report have been worked upon, and we saw positive changes within the home.

People see that there is visible management within the home. However, the service is yet to apply to CSSIW for the position of Registered Manager, this needs to be done as a matter of urgency, and the non-compliance notice from 2014 still remains active.

People experience an improving service which they can rely upon. We saw that the home has undergone positive changes. We saw from the training records that some staff have attended dementia care training, and have new ideas regarding the appropriate decoration of the home and activities provided.

We were told that the Responsible Individual visits the home several times a week to check the quality of care. We await copies of their quality assurance reports.

Quality Of The Environment

Overall, people feel valued by an environment which helps to reinforce a sense of identity and personal worth.

We saw that people were able to personalise their rooms with their own furniture, ornaments and pictures. Rooms were reflective of people's individuality and preferences. We saw the lounge and communal spaces were clean, warm, and bright and that people were enabled to relax and feel at home. People are free to express their ethnicity and beliefs through the decoration of their rooms. Rooms were clean, warm, and tidy.

We saw that visitors were made to feel welcome and relaxed. We saw that people's relatives had been given a cup of tea, and were watching TV with them. The relatives said that they felt comfortable when visiting the home.

People are able to meet others in the communal lounges or have private space should they need it. We saw that people were happy being cared for in their rooms should they choose to be, or were encouraged to socialise with others in the lounge.

People's wellbeing is promoted because of the range of facilities and equipment provided to meet their particular needs. We saw that the home had a broad range of manual handling and mobility aids to help people to move and transfer as appropriate. We saw from people's care plans that people had updated manual handling plans and associated risk assessments.

We saw that a shower room was used as a storage space for equipment and mattresses. This is a health and safety risk, and trip hazard for the people living in the home. Management stated that they would clear the room, and were awaiting a professional to maintain the shower, and that they would be running the shower regularly thereafter to guard against listeria contamination.

How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

- **Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

- **Focused inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focused inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, [Improving Care and Social Services in Wales](#) or ask us to send you a copy by telephoning your local CSSIW regional office.