



Inspection Report on

Rhosyn Melyn

**Plas Rhosnesni Nursing Home
Cefn Road
Wrexham
LL13 9NH**

Date Inspection Completed

22 May 2023 & 25 May 2023

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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	30 June 2022
Does this service provide the Welsh Language active offer?	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

Rhosyn Melyn is a care home service for adults living with dementia, the service offers nursing care to people who have been assessed as requiring 24-hour nursing care and support. The environment is clean and safe, there are ongoing refurbishment works taking place.

People receive support from care staff who are enthusiastic about providing the best possible service to people living at the home. Staff are happy working at the service and feel well supported by the management team. The service provider has put in place measures to promote meaningful interactions between care staff and people living at the service during mealtimes.

Well-being

People are supported to maintain their independence and have control over their day-to-day life. Personal plans promote independence, encouraging people to make decisions for themselves. People can choose how and where they spend their time.

People are supported to maintain their physical, mental health and emotional well-being. Documentation shows care staff seek medical advice and make referrals in a timely manner. Personal plans are clear on how to provide reassurance to people, should they require emotional support. The service employs activities co-ordinators, who provide regular activities throughout the week. People are encouraged to participate in gardening tasks to help maintain the grounds. Staff are kind and warm in their approach, but more meaningful interactions are required for people who require assistance with their meals.

People are protected from abuse and neglect. The service provider documents any safeguarding incidents, including what action has been taken and the outcomes. Staff receive regular safeguarding training and plans are in place for all staff to be up to date with whistleblowing training.

People are supported to maintain meaningful relationships with family and friends. People receive visitors throughout the day and relatives of people living at the service said they are made very welcome.

The service provider ensures people receive care and support in a safe environment, regular safety checks are carried out, including fire safety equipment. There are ongoing plans to redecorate throughout the premises. People are able to have their own personal belongings on display, to provide a homely and familiar environment.

Care and Support

People can feel confident the service provider has an accurate and up to date plan for how their care is provided, ensuring their needs are being met. The service provider ensures detailed pre-assessments are completed prior to agreeing to providing care and support to people, this means they are confident they can meet the person's needs. Care staff complete the relevant paperwork, such as daily records, repositioning charts and fluid and nutrition intake charts. These evidence the care being provided is in line with people's care plans. The 'My life history' document gives insight into what people like, dislike and their backgrounds, including their career and what is important to them. Care staff work from personal plans and risk assessments which are reflective of people's needs, but some plans need to be more focused on people's individual goals. We found most care plans are reviewed monthly and are updated where there is a change in people's needs. People are supported to access healthcare and other services to maintain their health and well-being. Care staff record correspondence, including visits from health professionals. We found the service liaise with the relevant health professionals in a timely manner. We spoke with a professional who visits the service, they told us people living at the service "*seem they get really good care there*" and "*it's the best one out of all the homes I visit*".

We observed interactions with care staff and people living at the service. We found staff are warm and friendly in their approach and provide reassurance to people when needed, but improvements are needed to provide more meaningful interactions during mealtimes. The service provider has arranged further training to support staff with this. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

The service provider has effective mechanisms in place to safeguard people from abuse and neglect. The provider has systems in place for safeguarding concerns to be recorded and reported, we found the outcomes are also recorded along with any actions taken. Most staff receive regular safeguarding training. Staff told us they know how to access safeguarding policies and procedures and they feel able to approach the management team if they ever have any concerns.

There are effective systems in place for the management of medicines. We observed a member of staff administering medication and we completed a medication count of a sample of medicines. Overall, we found staff follow best practice and medicine is administered safely. Staff maintain accurate Medication Administration Record (MAR) charts, we found the medications aligned with the records. This means care staff administer medication as prescribed. We found staff who administer medication receive regular medication competency assessments, to ensure they are safe to do so. Following the

inspection, the service provider has arranged training to ensure staff are fully up to date with the safe handling of medication.

Environment

People live in an environment that is suitable to meet their needs. The home is warm and welcoming. The home is going through an ongoing upgrade and decoration programme. The areas that have been updated are well decorated. There is a maintenance programme in place, where issues are reported and recorded once complete. People are able to choose where they spend their time, and during the inspection we saw people sat in dining areas, lounges and their own rooms. The outdoor spaces are accessible and used regularly by people. We observed activities taking place outside and people were enjoying the activities on offer. We viewed a selection of bedrooms and saw they were warm, bright, clean and personalised. People and their relatives told us that they are happy living in the home. We saw cleaning taking place throughout the home on both days of our inspection.

Effective arrangements are in place to identify and mitigate risks to people's health and safety. Most of the Personal Emergency Evacuation Plans are up to date. There are good systems in place to audit health and safety in the home. Fire safety and electrical checks are completed regularly. Call bells are used to tell care staff when people need assistance. We saw maintenance records which show audits of the environment are conducted to identify and address any problems. Servicing and testing of equipment is carried out regularly. Environmental issues that we identified at inspection were addressed whilst we were there by the maintenance team.

Leadership and Management

The service provider has governance arrangements in place to support the running of the service. Overall, the reports from the Responsible Individual's regulatory visits and the quality-of-care reports, evidence oversight of the service. The quality-of-care reports reviewed evidence the RI reviewing relevant information, such as the reviewing of safeguarding incidents, complaints received and feedback from external professionals. The manager completes regular audits for the service, any issues identified from the audits are quickly resolved. The provider has systems in place to oversee complaints and compliments. We saw positive feedback is captured from relatives and visiting professionals.

The service provider has oversight of financial arrangements and investment in the service, to ensure it is financially sustainable and supports people to achieve their goals. There are ongoing improvements being made to the environment, plans are in place to improve training for staff and to reduce the use of agency staff. People have access to specialist equipment where required, such as moving and handling equipment. The service has sufficient supplies of PPE (personal protective equipment), cleaning equipment and food.

People are supported by a service which provides appropriate numbers of staff and, where there are shortfalls, the provider arranges agency cover. During the inspection, we found care staff respond promptly to calls for assistance. The majority of staff are up to date with their core training. The service provider has arranged for specialist training for all staff to complete, ensuring staff have the skills and knowledge to provide the right care and support to people.

We reviewed a sample of staff personnel files, these show the service provider ensures the relevant checks are carried out prior to the staff member starting work at the service. We spoke with staff who work at the service, they told us they feel supported in their roles, they have enough training to enable them to fulfil their roles and management are approachable. One staff member told us they *"love working here"*.

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
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21	The service provider has not ensured people consistently receive meaningful interactions when receiving support from care staff.	New
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