

Inspection Report on

Church Manor Care Home

Church Manor Care Home Towyn Road Towyn Abergele LL22 9ER

Date Inspection Completed

24/08/2022



About Church Manor Care Home

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	2SK Care Homes Ltd
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	30/11/2021
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

This was a focussed inspection and, on this occasion, we did not consider the theme of leadership and management in full.

People are supported by attentive and respectful staff who know them well. People are happy living there and feel safe in a home which meets their needs. People have choice in their day to day lives and have seen improvements in their health and well-being because of the good care and support in the home. People are supported to participate in activities inside the home and in the wider community. They also have access to health professional support when they need it. The service provider ensures staff are well trained, and there are policies and governance processes in place to support continuous improvement in the service. Staff enjoy working with people and feel well supported by the manager and RI. The home is warm and welcoming, and staff have developed friendly and caring relationships with people living here.

Well-being

People have choice over their day to day lives. We saw people moving about the home and choosing where to spend their time, throughout our visit. Care staff support people to do what makes them happy including organised activities in a group or as an individual. The social media pages for the home show people enjoy trips out into the local community, and afternoon teas and activities based around fun themes. A member of staff told us people like to choose the design and flavour of their birthday cake, and the kitchen makes it for them to celebrate with everybody. One person told us they like to have a cooked breakfast every day and the kitchen prepare it very well for them. During our visit we saw people enjoying chatting in small groups in the lounge, relaxing quietly reading the paper, and singing and laughing with staff.

People are supported to maintain and promote their physical and mental health and well-being. Records show referrals to GPs, district nurses and specialist support are made in a timely manner and the manager ensures people's best interests are promoted. People's diet and weight are monitored at least monthly, and meals are fortified with full-fat ingredients as required. Advice from specialists and health care professionals is incorporated into care plans and cascaded to care staff appropriately. The home has bilingual signage throughout and celebrates Welsh culture with decorations and pictures in the main communal areas and corridors. We did not hear any Welsh being spoken during our visit. Working towards the "Active Offer" of the Welsh language is a possible area for development.

People can be assured care staff receive the training they need to keep people safe. The service provider has policies and procedures in place which staff follow, and staff feel confident raising any concerns directly with the manager. The manager has an ongoing programme of competency checks she completes with staff to ensure they are confident and capable when using their training in practice. Weekly and monthly audits of care and support and health and safety are done as part of management oversight of the running of the home. This ensures swift action is taken if any issues are identified. The manager completes a weekly walk-round that looks at all aspects of the home including talking to residents about their experiences living in the home and checking the cleanliness and décor in communal areas and individual bedrooms.

Care and Support

People are cared for in a dignified and respectful way by care staff who know them well. There is a warm, welcoming, and friendly atmosphere in the home and people have good relationships with staff in the home. We saw staff singing with people, encouraging them in their achievements, and enjoying jokes and laughing together.

People can be sure care plans are in place to guide staff on people's care and support needs and preferences. Staff know people very well and were able to describe their support needs to us; their descriptions matched with people's individual care plans. Care plans are started prior to admission following thorough assessment of people's needs to ensure the service can support them well. Management use information from people, their relatives and relevant health and social care professionals to develop the care plans, which are reviewed and updated regularly. Any changes are communicated to care staff during shift handovers and via the electronic care recording system.

Staff were able to describe improvements at least two people have experienced in their health and well-being since our last inspection. This was confirmed by seeing those people enjoying socialising with other residents during our visit and through reading their care records and care plans. There are some gaps in recording and inaccurate recording of activity. The manager and RI told us care staff are still getting used to the new electronic care recording system and confirmed they are working with staff to improve consistency and completeness of recording with additional support and training.

People told us they are happy living in the home. Feedback from relatives confirms people feel safe and well cared for in the home. Throughout our visit we saw staff are busy but attentive, kind, and respond to people's calls for help in a timely way. We saw staff have a fun and friendly demeanour and enjoy spending time with people living in the home.

Senior care staff on each shift has responsibility for co-ordinating care and care staff duties for the duration of the shift. Care staff told us they felt well supported by the manager and enjoy the new working structure and responsibilities they have.

Environment

People are living in a home that meets their care and support needs. The service provider continues to invest in maintaining and developing the building and grounds. The dining and lounge areas of the home are nicely decorated and bright and airy, allowing lots of natural light. The layout and organisation of the laundry has greatly improved since the last inspection, and the first phase of the renovation work of the old vicarage is completed to a good standard. A recognised programme has been used to ensure work to enhance the environment meets the needs of people with dementia living in the home. Themed corridors also help people to identify where their rooms are and orientate them to where they are in the building. Some areas of the main building require some refurbishment, and the RI confirmed work has already begun to address this, with a planned schedule in place for refurbishment of bathrooms and the garden over the next year. There are enough bathrooms to meet people's needs.

The home is secure, with health and safety and infection control risk assessments, measures, and policies in place to keep residents safe. Personal Protective Equipment (PPE) is available for use and hand gel is stored in wall mounted dispensers so its accessible without posing a health and safety risk to people. Access to the laundry is restricted using key-coded doors and health and safety risks have been addressed. Specialist equipment is available and maintained and serviced regularly.

Health and safety audits are conducted regularly to ensure people remain safe in the home. The corridors are uncluttered, and people can move freely about the building, with or without support from staff as they require.

Leadership and Management

As this was a focussed inspection, we have not considered this theme in full.

The service provider continues to invest in the development of the service and has governance policies and procedures in place. The RI is in the home most days and is compliant with the regulations regarding the requirements of their role. The service provider has ensured the home continues to be financially viable.

People can be sure that all staff undergo thorough checks to ensure they are fit and suitable to work in care, including references and DBS checks. Records show training is up to date and staff have the skills required to meet peoples care and support needs. New staff undergo the all-Wales induction framework as required. They are fully supported through online and in-house training, and complete shadow shifts until their competency and skills are confirmed by senior staff and the manager. All staff undergo a rolling programme of training updates, including competency checks on specific aspects of their role such as medication administration, manual handling, and personal care skills. All staff receive regular supervision and are confident discussing any concerns they might have with the manager.

People can be sure the manager and RI have good oversight of the day to day running of the service. A system of regular audits of all aspects of the service is in place. Care staff are allocated roles as champions for different aspects of care and support in the home, including responsibility for auditing the quality of that aspect of given care. People can be reassured that timely action is taken on any issues identified through these audits. Senior care staff have responsibility for coordinating care during each shift with the support of the manager. A member of staff told us they felt well supported and enjoy the new working structure and responsibilities they have been given.

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	N/A
	inspection	

Date Published 11/10/2022