



Inspection Report on

Ryecroft

Colwyn Bay

Date Inspection Completed

25 & 29 April 2022.

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About Ryecroft

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Coed Du Hall Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	5 February 2020
Does this service provide the Welsh Language active offer?	The 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 receive their care and support in a comfortable and homely environment from staff who they like and get on with. Support is provided with staying healthy and to do the things people enjoy. People are happy living at the home and are involved in discussions regarding the care and support they receive. People's views are listened to in relation to all aspects of their care. Risk assessments are used to promote people's independence, whilst reducing the risk of harm. Staff enjoy working at the service and feel supported and well trained. Appropriate checks are undertaken before staff start to work at the service. Arrangements are in place by the manager and the provider to monitor the safe running of the service. Overall health and safety checks at the home are very good. However, action is required in relation to the electrical system of the building and the use of window restrictors.

Well-being

People are shown dignity and respect. Care staff provide assistance in a calm and friendly manner. People get on with the care staff and praise the support they receive; *“nothing is too much trouble”*, *“this is my home, I don’t want to be anywhere else”*. Choices are available in relation to decisions such as when people get up, what they have to eat, how they spend their day and when they retire for the evening. This enables people to have a sense of control over their day-to-day lives. People’s views are gathered as part of the monitoring of the service provided and their feedback informs the development of the service.

People are happy because they can do things which they enjoy. Support is provided to enable people to participate in different activities within the community. Discussions are held with people, in groups and one-to-one, to discover what activity they would like to take part in, and this is facilitated. Records are kept of the suggestions made and action plans are created which ensures action is taken to facilitate people’s wishes. People told us they had benefitted greatly from being able to volunteer in their community and this had improved their well-being. Opportunities are also provided to pursue past and new hobbies and interests.

People are protected from harm abuse and neglect. Systems and processes are in place to ensure staff are trained in how to safeguard people from harm and the action to take in response to safeguarding matters. Care staff have access to up to date written information regarding their roles and responsibilities in relation to protecting people from harm.

Arrangements are in place to maintain people's independence and to promote people’s health. Care staff receive training in relation to specific health conditions which enable them to provide people with the right care and support. Support with medication is provided which helps to maintain people’s health and to manage their health conditions. Proactive action is taken in anticipation of changes in people’s health and in response to changes when they occur.

The home is comfortable and supports people to achieve a sense of well-being. People personalise their own rooms, which helps people to feel they belong and settled. The communal areas feel homely and are clean and tidy. Overall, health and safety are protected at the service, and there are arrangements in place to ensure regular checks and servicing of systems are in place. Improvements are required to the electrical system of the building and to ensure window restrictors are in place.

Care and Support

People's individual needs and the outcomes they wish to achieve are considered as part of the pre-admission assessment process. Information regarding the support people require is obtained before a decision is made regarding the suitability of the service as a placement. This ensures the provider is confident they can meet people's needs before the person arrives at the service.

People are involved in discussions regarding their care and support. Professionals in contact with the service told us staff "*listen to*" and "*work in partnership with individuals*", with "*the person in the centre*" of the care delivered. Personal plans are made with people and record what people can do for themselves as well as what they need support with. Risk assessments are in place to record the known risks to people's health and safety and how the risks are managed. Reviews of care documentation take place regularly to ensure staff have access to up to date written information regarding people's needs.

Referrals to health and social care professionals are made appropriately and promptly when changes occur. People receive specialist advice and support when required to maintain their ongoing health and well-being. Records of professional's input are available to guide staff in what action they need to take following changes in people's needs. Arrangements are in place to ensure people receive their medication as prescribed. This helps to manage people's health conditions and supports people to be as well as possible.

People benefit from good hygiene and infection control practices. The manager checked we had undertaken a COVID-19 test before we entered the building and checks are in place for all visitors to the service. Staff wear appropriate PPE (personal protection equipment) to protect people, and themselves, as far as possible from the virus. Additional cleaning also occurs. There is a contingency plan in place regarding how the service would operate in the event of a COVID-19 outbreak.

Processes are in place to protect people from harm and abuse. Staff undertake safeguarding training and demonstrate a good understanding of their responsibilities in relation to protecting people from harm. Staff know who to speak with if they have concerns regarding the people whom they support, and they feel able to do so. A safeguarding policy is in place and staff have access to it.

Environment

Care and support are provided within an environment which promotes people sense of belonging and their well-being. The building and facilities are as described within the statement of purpose. There is a choice of lounges available where people can sit and spend time with others if they want to. People are happy with their own room, and they are personalised with their own items of importance. This helps to create a homely and comfortable feel. There are en-suite facilities provided within each person's own room, which is also at level access in some rooms. This helps to protect people's dignity and promote their independence. Accessible and safe outdoor space is available with seating areas and tables provided. There is a sheltered smoking area available in one part of the garden. There are arrangements in place to monitor the upkeep of the premises to ensure it is kept well-maintained. All areas of the building are clean and tidy.

Overall, health and safety risks are identified and appropriately managed. The kitchen has the highest possible food hygiene rating of five (very good) following the most recent local authority inspection. There are arrangements in place for the safe storage and preparation of food. Fire safety checks are completed, as required. There is work required in relation to the electrical installation system. Window restrictors are not always in place when required. The manager and Responsible Individual (RI) are already aware of these matters and efforts have been made to address the issues. This is an area for improvement, and we expect the provider to take action.

Leadership and Management

People can access information about the service provided. The Statement of Purpose and the Service User Guide documents are up to date and contains all the required information. The Service User Guide is written in an easy to understand format, which helps people to be clear about what they can expect of the service.

Adequate numbers of care staff are available to provide the required levels support, which includes enabling people to take part in their social interests. Care staff are recruited safely and suitable checks are completed before new staff are employed to work at the service. Managerial supervision is provided, and care staff feel supported in their roles. The manager also receives supervision and good support from the RI. Care staff receive appropriate training to enable them to understand the needs of the people who use the service and how to best support people. Regular staff meetings take place where information is shared with staff and their views are sought regarding the running of the service.

Arrangements are in place to support the smooth running of the service and to provide oversight of the quality of the service provided. The manager monitors the quality of all aspects of the service delivered by undertaking regular spot checks and audits. The RI oversees the running of the service and consistently consults with staff and the people using the service as part of their monitoring.

Ongoing quality assurance processes are in place to review the standards of care provided. Quality of care reviews are undertaken every six months and considers how the service can develop in the future. People's views are gathered regularly within resident's meetings, and during one-to-one meetings, for the continued development of the service. Professionals in contact with the service describe the staff and manager as *"approachable", "excellent communication, works in partnership (with the commissioner)"*.

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
57	Not all aspects of the environment within the home were as safe as possible. Ensure all risks to the health and safety of individuals are identified and reduced so far as reasonably practical.	New

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