



Inspection Report on

Plas Newydd

**Plas Newydd
Mill Street
Newport
NP18 1BH**

Date Inspection Completed

26/11/2021

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About Plas Newydd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	National Autistic Society
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

People receive support to do the things they like and to remain as healthy as possible. Care staff are knowledgeable, respectful and caring. Care workers support people to keep occupied in the home and in the community. Activities outside the home and visits from relatives were restricted due to the coronavirus pandemic and official guidance, however people's usual routines have now resumed. Staff feel supported by their colleagues and managers and they show enthusiasm for the work they do. There are systems in place to enable the manager and care staff to plan and deliver the care and support safely. In addition, the service provider has systems to oversee the service and to make improvements.

Well-being

People who live at the home have choices about doing the things they like. Care staff cater for people's preferences and, because they know them well can anticipate their needs. People engage in a range of activities within the home and in the local area. During the inspection visit we observed each person pursuing their own interests. Each person can choose what to do because there are enough care workers on duty to support them and people have access to transport. A relative commented staff support and encourage people to engage with others and to be meaningfully occupied at all times.

People are supported to remain as healthy as possible. Care staff support people to maintain good physical health. This includes supporting people with their medication and ensuring they eat and drink well. Care workers watch out for changes in people's health and alert relevant external professionals when needed. Referrals and appointments with health professionals are arranged when necessary. People have good relationships with each other and with care staff. They also maintain contact with relatives. These relationships and the activities they pursue, promote their emotional well-being.

Measures are in place to protect people from abuse and neglect, as staff know what to look out for and how to raise concerns if they suspect someone's well-being is compromised. Care staff are trained in safeguarding and have policies and procedures to guide them. There are risk management plans in place to keep people as safe and as independent as possible. The home provides people with suitable accommodation which reflects individuals' needs and interests. Infection control measures are in place throughout the home.

Care and Support

People receive the support they require when they need it. We observed carers supporting people inside the home and going out with them. We noted a natural familiarity between them. Care staff are encouraging and reassuring, and demonstrate a clear understanding of people's needs. The feedback from a relative reinforces what we found. They told us care staff really care for people they support and know them well. They explained to us staff had adapted the support they provide when their relative's needs changed. We observed the atmosphere at the home is relaxed, people are settled and appear content. People also access services from external professionals on a regular basis. Records show this includes GP, district nurses, dentist and chiropodist visits.

There is documentation in place for each person. It reflects information gathered from people, their relatives and health professionals. What people like and dislike, and how they may express their emotions when they are unable to do so verbally is recorded. There are personal plans in place for all the areas in which people need care and support. The plans give care staff instructions to follow in order to make sure people receive the same care and support every day. There are detailed daily morning, breakfast and lunchtime routines in place. In addition, there are clear and comprehensive instructions to follow in order to communicate effectively with each person. This includes a list of the objects of reference used by one person to communicate. Where there are risks, these are assessed and steps to mitigate them are listed. Conversations with staff show they are familiar with the plans and the care needs of people.

Staff record the care and support delivered to each person. Daily records and people's plans are then reviewed on a regular basis. We discussed the systems in place to review people's care plans. We could not locate all the reviews in people's paperbased records. However, we were given one person's 'Personal plan (care plan) & Personal outcomes review' which is kept electronically. The document contained comprehensive quarterly reviews and clear review dates.

Care staff keep people safe by following clear policies and procedures and taking swift action when needed. Records show the manager dealt promptly and appropriately with an incident. The manager liaises with relevant agencies to ensure any restrictions placed on a person's liberty are only in their best interests. There are systems in place to ensure medication is stored and administered safely.

Environment

People live in an environment that meets their needs and promotes their well-being. The home is welcoming and clean. There are communal areas including a kitchen, lounge and dining room. Bedrooms reflect people's needs and interests. In addition, they have access to an outdoor covered patio area. We observed them spending time in their own rooms and in the communal areas. We discussed areas which would benefit from a cosmetic upgrade with the manager. They explained there is an ongoing programme of maintenance, redecoration, and improvements in place.

There are systems in place to identify and deal with risks to people's health and safety. The service provider carries out regular health and safety checks. External contractors carry out specialist checks. The home has a food hygiene rating of one which means major improvement was necessary to comply with the law. The provider showed us evidence of the actions they have taken and improvements they have made since the Food Standards Agency awarded that rating. The provider is currently waiting for them to carry out a new inspection.

Infection control arrangements are in place. Staff are following Public Health Wales (PHW) current guidelines, and we observed staff using appropriate personal protective equipment (PPE) during our inspection visit. PPE and hand sanitizer was readily available throughout the home. The standard of cleanliness throughout the home is good. There are notices throughout the home which remind staff of procedures to follow, for example good hand hygiene.

Leadership and Management

The service provider has arrangements in place to support the smooth running of the service. The responsible individual (RI) maintains oversight of the service. They visit the service to speak to individuals who live there, to consult staff and to check the environment. In addition they review the quality audits carried out by the company's quality assurance manager, by the area manager and by the home manager. We noted the audits in place cover all aspects of the service delivery. We saw the RI takes action when necessary to improve the service.

There are arrangements in place to recruit, train and support staff. We examined recruitment records. These show the service provider carries out checks before a person can start working at the home. These include checking their identity, employment history, references and their Disclosure and Barring Service (DBS) Check. We discussed the need to hold a copy of each member of staff's birth certificate. We saw the manager has asked staff to provide a copy when it wasn't already on their personnel file.

Supervision and training records show processes are in place for supporting and developing staff. One care worker told us they get a lot of support, the manager is always on hand and the area manager is not far. Another person spoke to us about staff changes which have occurred in the last year, about the new manager settling in. They commented on the team which they describe as good and dedicated. People also told us they get online training, face-to-face training and support to complete recognised care qualifications. The manager told us they are supported by the RI and senior managers.

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 inspection	N/A

Date Published 25/03/2022