



Inspection Report on

High Pastures Nursing Home

**High Pastures Nursing Home
Pentywyn Road Deganwy
Conwy
LL31 9YT**

Date Inspection Completed

15 June 2023

15/06/2023

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About High Pastures Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	High Pastures Nursing Home limited
Registered places	44
Language of the service	English
Previous Care Inspectorate Wales inspection	12 April 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

High Pastures Nursing Home have a staff team who are familiar with the service and residents and can anticipate people's needs. People's personal plans are centred around their individual needs and reflect their preferences. People have daily choices and there is an activity person working in the home to offer recreational activities which people enjoy.

Medicine practices are good in the home. A member of the Betsi Cadwaladr University Health Board (BCUHB), recently audited medicine practices and storage in the home and found them to be good.

Staff have regular access to training and supervision to support them in their role. The manager/responsible individual (RI) has completed qualifications to enable their registration with Social Care Wales (SCW). Staff spoken with said they are well supported in the home and work well as a team.

Well-being

People can make daily choices such as when to get up, go to bed, and if they want to participate in activities. People spoken with during inspection were complimentary about staff, food, and facilities in the home. We saw people can personalise their rooms with things which are important to them to make them feel at home. There is open visiting in the home, people can go out for the day with their family or friends and remain a part of the local community. There is an activities person working in the home who offers regular activities and organises events such as celebrating the King's coronation with a party and buffet.

The home is clean and tidy and outside spaces are well maintained. There are places for people and families to sit outside if they wish. There are lounges and dining areas available for people to be sociable in if they choose and to engage in activities.

There is a menu for people to choose from daily and drinks and snacks are readily available. People are offered alternative meals if they do not like the choices on offer. People on special diets are catered for. People told us they are happy with the quality of the food offered in the home. Meals offered to people on the day of inspection were well presented and seem appetising.

We observed people and staff have a good rapport and people are treated with dignity and respect. Staff spoken with said they feel well supported and are given regular training and supervision to help them in their daily role. Staff can describe local safeguarding procedures should they be worried about people's care.

Care and Support

People told us they feel well cared for. Personal choice and preferred routines are reflected in people's personal plans. Plans are updated regularly to ensure good outcomes. People are risk assessed to keep them as safe as possible, these assessments are kept up to date. People have access to regular GP reviews and can access other health care appointments such as Optician, Chiropody, and outpatient appointments in hospital. Any updates and directions are recorded in people's personal plans so they can be actioned.

We saw from the care charts that people are checked and repositioned frequently as per their personal plans. People are assisted to eat and drink if they need help. People are given a call bell to ring for assistance, and we saw staff respond to the bells in a timely way. People are assisted with personal hygiene needs and have an oral care plan in place. People's skin is checked regularly to guard against sores, any problems are recorded on a body map and a referral made for professional advice.

People receive their medications as prescribed. We saw administration and storage of medicine is good in the home. The BCUHB pharmacy team recently audited the home and found medicine practices to be good. Staff spoken with said there is a good relationship between the home and chemist and prescriptions are obtained in a timely way.

Staff are trained about safeguarding to keep people safe. Staff are aware of local procedures for referring to the safeguarding team should they have concerns. Staff are also aware of Deprivation of Liberty Safeguards (DoLS) and people are referred for assessment appropriately to ensure their rights and choices are considered.

Environment

The home presents as clean, tidy, and well maintained. People can personalise their rooms to enable them to feel at home. There are lounges for people to eat meals, socialise, and participate in activities if they wish. Outside spaces are well maintained and have areas for people to sit outside if they choose to. There is a ramp from the ground floor lounge for wheelchair users to spend time in the garden. Bathrooms are also accessible for wheelchair users and are compliant to the regulations. Fire escapes are free from clutter and obstacles.

We saw health and safety checks are performed to ensure people live in as safe an environment as possible. Utility checks and servicing are within date as seen from engineer certificates. Water checks and temperature monitoring are also documented and in date. Weekly fire alarm tests and emergency lighting tests are performed to ensure they are in good working order. The home has current liability insurance. People can access equipment needed for their safe care and these are serviced as per manufacturer recommendations. The home employs a maintenance person who keeps records of environmental work completed.

Leadership and Management

There is a good managerial structure in the home to ensure the smooth running of the service. The RI/ Manager is available in the home most days. The service is measured as to its quality and the RI produces a report sharing the resulting findings, actions, and outcomes. RI visits are also documented. Service audits regarding subjects such as medicines and infection control are regularly conducted in the home and the results shared with staff to celebrate things done well and consider any areas which need further work.

Recruitment and retention practices in the home are good. We reviewed a sample of personnel files and found checks are in place to ensure staff are appropriate to work with vulnerable adults. We saw training and supervision are up to date. This is important to provide staff with knowledge and support in their daily role and to ensure good practice. Staff spoken with said they are happy working in the home and feel managers are approachable and supportive. Staff told us they chose to work in the home as it has a good reputation locally.

The RI has not declared any financial difficulty to CIW. We saw recruitment of staff continues and training has been procured. People told us the food provided is fresh and tasty. The home is well maintained. Utilities and equipment are serviced. People have the equipment they require for safe care.

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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N/A	No non-compliance of this type was identified at this inspection	N/A
21	Individuals are not supported to fulfil their potential and do things that matter to them and make them happy. Activities are not always offered to help people develop and maintain hobbies and joining in community activities.	Achieved
58	The provider is not compliant as a medicine trolley is tethered in a warm corridor with no temperature testing to ensure the integrity of the medicines stored. Two staff members are required to count all medicines in and out of the home, and provide two signatures to ensure a robust audit trail.	Achieved
68	The provider is non-compliant as they have not completed the level five qualification in order to register with Social Care Wales.	Achieved

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