



Inspection Report on

Stansty House Nursing and Residential Home

**Stansty House Nursing Home
34 Stansty Road
Wrexham
LL11 2BU**

Date Inspection Completed

23/3/2022

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About Stansty House Nursing and Residential Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Minster Care Management Ltd
Registered places	52
Language of the service	English
Previous Care Inspectorate Wales inspection	8/1/2020
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 who use, or intend to use their service.

Summary

Staff feel supported by the manager and senior management team. A recruitment process is in place and all the necessary checks are carried out. Staff receive the required mandatory and service specific training necessary to be skilled in their roles. Referrals to health professionals are made in a timely manner. People have been kept safe as possible during the Covid-19 pandemic and staff have followed Public Health Wales guidance.

Care staff are dedicated in providing good care and enjoy working in the service and spoke very fondly about the people they care for. Safety equipment and the required checks are in place to ensure people's health and well-being is promoted. People are happy with the care they receive and praise the staff for their good work. There is plenty of opportunities for people to join in with a variety of stimulating activities and the activities person is very enthusiastic and passionate about their role.

Personal plans require improvement to ensure they are person centred. The menu choices are being developed in consultation with the people using the service.

Well-being

People are satisfied with the care and support they receive at the home. Many people benefit from recreational support. People living at the service enjoy nutritious meals and are able to exercise dietary choices within a calm relaxing environment. People's personal plans are up to date however, some areas need to be improved to better reflect the person's needs and any risks. Referrals to professionals such as the dietician and general practitioner are made in a timely manner. People are supported and opportunities made available to them to help achieve their well-being.

People live in a service which protects them and where they feel safe. People and staff we spoke with said they felt able to raise any concerns and these would be acted on. People who had been assessed as vulnerable had restrictions placed on them for their protection and in their best interest. Staff are appropriately trained in respect of the safeguarding of vulnerable adults and there is a safeguarding policy in place. The staff training records show care staff receive mandatory training to ensure people's safety. People said they felt safe and were very happy living at the home.

People are treated with dignity and respect. Some of the staff members have worked at the service for many years and we saw there was good relationships that had developed between care staff and people. People are relaxed in the company of care workers who communicated in a friendly and caring way, interacting on a one to one basis. Discussions with staff show they know the needs of people they support really well. Staff communicate effectively with people and the atmosphere within the service was calm and relaxed.

People live in accommodation that is safe and secure. Maintenance checks are in place to ensure the service is safe such as fire safety checks and all equipment is regularly serviced and maintained to ensure safety. The environment is homely, welcoming and clean. People's rooms are personalised and individual to their own taste. A private outdoor space is available where people can sit or walk around, weather permitting.

Care and Support

People are provided with the care and support they need. Personal plans are in place, however they could be further developed to ensure they are person centred and involve the person themselves. Risk assessments and personal plans are reviewed on a monthly basis or as and when people's needs change. The manager stated an electronic care system will be implemented in the very near future and there are plans to develop personal plans to ensure these are person centred. We saw evidence in individual care files that staff liaise appropriately with health and social care professional's for advice and timely referrals are made with the general practitioner, occupational therapists and dietician. People who are at risk of weight loss and pressure damage are monitored closely by staff and any concerns are reported to the relevant professional.

There are things for people to look forward to. There is a full time activities person who is dedicated and enthusiastic in promoting a variety of activities. For example, dominos, reminisce sessions, Tai Chi, Reiki, crafts, arm chair exercises. Arrangements were in place to celebrate Mothering Sunday with an afternoon tea and cake. Plans are already underway to celebrate the Queen's Platinum Jubilee. People had recently enjoyed making poppy's for remembrance Sunday and these were on display in the corridor. We saw people spending time in their own rooms resting and some people enjoying time in the lounges. We saw an activity planner that described the different activities organised at the home. We reviewed activity plans for individuals and saw these had been reviewed to evaluate people's engagement and enjoyment.

There is a variety of meals and drinks appropriate to people's individual dietary needs. We saw the lunch time period was unhurried, the dining room was laid out pleasantly and people were served their meals in a timely manner. People have a choice of two different hot meals for lunch and a different choice of hot and cold meals during the evening. We saw balanced and appetising meals being provided. Hot drinks with cake or biscuits were provided between meals. We saw one person did not like the meal being offered that day so they were offered a meal of their choice. Feedback regarding the meals was varied, some people were happy others were not. The manager had already identified this area requires improvement and discussions have been made with people and representative and food questioners have already been handed out to people to complete.

There are mechanisms in place to safeguard people. We saw care staff are trained in safeguarding and know what steps to take if a person may be at risk. There are effective systems in place to ensure care staff training is up to date. Individual risk assessments are in place. The provider ensures the service safeguarding policies and procedures are up to date and accessible to all staff.

Environment

People benefit from a clean and comfortable environment, in which the layout enables people to spend time privately or communally. The service is decorated and furnished to a good standard. There is ample amount of space along with a relaxing living room, along with a dining area and a secure rear garden containing outdoor seating and plants. People's bedrooms are spacious and personalised and contained items such as family photographs, furnishing and other personal belongings. Each bedroom door has a picture to help orientate them to their room which had been chosen by the person. We saw daily cleaning tasks were being undertaken and the service held a fresh aroma within all areas. We noted people being supported to use the environment, spending time as they wished, appearing relaxed and comfortable in their surroundings.

We checked a sample of health and safety records relating to fire safety, gas, hoisting equipment, peoples personal emergency evacuation plans (PEEPs) and electrical goods testing and saw they had been completed within the required timescales. A maintenance schedule and audit system is in place which monitored various areas of the service which required improvements. We saw they were being recorded and completed in a timely manner.

Leadership and Management

There are good systems in place to monitor the smooth operation of the service. The Statement of Purpose is regularly reviewed and accurately describes the way the service is delivered. The Responsible Individual visits the service on a weekly basis, however has not produced a three monthly report as required by the regulations. The RI has stated they have a log of all their visits to the service. Quality assurance systems are in place which include auditing and monitoring systems. This also includes areas such as infection control and medication to identify good practice and areas for improvement to ensure staff practices were safe. However, a six monthly quality of care report has not been produced.

There are systems and processes with regard to the learning and development of staff and a robust recruitment process. A training matrix was provided which recorded staff training had been completed and which staff required updated training. We saw there was an ongoing programme in mandatory training, which included safeguarding, first aid, health and safety, manual handling and fire safety. A review of three staff personnel files indicated there was documentary evidence of induction being completed at the home. The staff files consisted of application forms, employment history, reasons for leaving previous employment and references. Enhanced Disclosure Barring Service (DBS) records had been completed.

The manager values the staff team and staff receive regular supervision and an annual appraisal. The staff supervision record showed they received formal support on a three monthly basis and a timely annual appraisal. The manager has an open door policy and is available at all times and staff can discuss any work or personal related concerns at any time. Staff feel supported by the management team and feel that teamwork and staff morale is good. The staff rota showed the service has a consistent number of staff on duty. Staff told us they felt the service was not understaffed and this was confirmed by our observations as we saw a high number of staff on duty. Some staff did comment some days they are short staffed when staff phone in sick last minute, however they all work well as a team to provide good care. Staff's hard work and contribution is celebrated as every month a staff member is awarded 'employee of the month'.

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

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