



## Inspection Report on

**Orme View Care Home**

**Orme View Care Home  
6 Great Ormes Road  
Llandudno  
LL30 2AR**

## **Date Inspection Completed**

22/04/2024

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## About Orme View Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Orme View Care Home Limited
Registered places	15
Language of the service	English
Previous Care Inspectorate Wales inspection	22 May 2022
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies, and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

This is the first inspection of the service under this service provider. People like living in the home and told us they feel safe and well cared for. Feedback from relatives is positive. The roles of manager and Responsible Individual (RI) are held by one person in the home. The manager/RI works with a small but experienced team to ensure people get the care and support they need to achieve their desired outcomes. Personal plans for people's care incorporate proper assessment and mitigation of potential risks to their health and well-being. The plans include good detail about people and clear instruction to care staff about exactly how they want to be supported. People have very good relationships with other residents and with all staff, who know them well.

The home is very well kept and decorated throughout communal areas and the provider has a rolling scheme of redecoration and repair, which includes updating the garden and bedrooms. Feedback from people and staff is valued and acted upon. There are systems in place for reviewing the quality of care delivered. The provider is updating all their policies to reflect recent changes to processes in the home.

## Well-being

People living in the home have control over their day to day lives. There is a varied menu for people to choose from at each meal and if they cannot find anything they like care staff offer people alternatives in line with their preferences. People's rooms are personalised and contain pictures and objects that are important to them. They can make choices about the decoration of their rooms and can also contribute to decision making about how communal areas look. There are regular resident meetings with the manager/RI or deputy manager where people can share their experiences and any changes or developments they would like to see in the service. People are involved in the planning of their care and told us staff do what they ask them to and they can choose to spend time wherever they like in their home.

People are supported to do things that keep them active and healthy and make them happy. The provider ensures a regular programme of activities and events in the home for people to join in with. They work with external entertainers and activity providers, and a nearby Welsh medium junior school to ensure a variety of physical, social, and cultural activities or events are available. People told us they enjoy the activities on offer and this is supported by feedback from relatives. Care staff provide timely care and support and people told us they are well looked after and like living there. People told us "*the staff are lovely and do what you want*". Feedback from relatives supports this, describing care staff as "*wonderful*" and the care provided as "*second to none*".

People living in the home are protected from abuse and neglect by trained care staff who know and understand their responsibilities to protect them. Relatives and residents are encouraged to speak with management or care staff if they have a concern, and staff are confident raising issues with management. People told us they "*feel safe and well cared for*". Feedback from families shows the provider focuses on creating a "*home-from-home feel*" and relatives feel very welcome and able to speak openly about any concerns they might have. One relative described the support offered to them as a family by management as "*warmth, kindness and compassion*".

People live in accommodation which meets their needs. The provider has ensured people have access to the facilities and spaces they need in the home, including specialist equipment. The home is warm and well maintained.

## Care and Support

People living in the home can be assured the manager considers information from a variety of sources before confirming the service can meet a person's needs. The manager combines this information with assessments of potential risks to people's safety, well-being, and health, and writes detailed personalised plans for their care and support. People's preferences for how they receive support are included in the plans along with clear instruction for care staff on what they are able to do for themselves. Information about family life, work life prior to retirement, language preferences, social life and current and past hobbies and interests is gathered from people, their families, and their representatives. This gives care staff as full a picture as possible of each person as an individual.

Care staff are caring, friendly and attentive to people living in the home. People told us they are "*looked after well*". People use a call bell system to alert care staff if they need support and they respond promptly. There is a key worker system in place to ensure people and their families have a named member of staff to speak to if they have any queries or concerns. People receive the care they need in line with their personal plans and care staff know them and their preferences well. There are Welsh speaking care staff in the home and non-fluent Welsh speaking care staff have learnt some simple phrases in Welsh to support people in their preferred language. There are bilingual and pictorial prompt cards and an electronic tablet for staff to use to support people's communication needs. People are supported to keep their independence and engage in positive risk-taking where appropriate. Records show this is done following proper assessment of potential risks and making reasonable adjustments to reduce risk where possible.

The manager ensures staff follow good hygiene procedures in the home. There are staff in the home to clean nearly every day and the care staff complete any cleaning needed on the other days. All staff receive the relevant training in food hygiene and infection control procedures. The home has a level 5 food hygiene rating, which is the highest level awarded. During our inspection we noted the home was clean and tidy throughout and there was Personal Protective Equipment (PPE) available for care staff and visitors to use as needed. There are medication management procedures and policies in place and these are followed by staff to keep people safe.

## Environment

People live in a home that is personalised and has the facilities and equipment they need to achieve their personal outcomes. People told us they like their rooms, which are personalised with objects and pictures that hold meaning for them. They are involved in making decisions about the decoration, window dressings, and other furnishings in their rooms. The manager/RI told us people have changed the layout of their rooms with support. The provider is currently updating all the beds and has installed a sloping floor in place of two steps part way along the upstairs corridor. This new floor has improved access for people to their bedrooms. Improvements have also been made to the bathrooms and bathing equipment in the home; a wet room and separate bathroom with a hi-low bath are now both on the ground floor and accessible to all residents.

People live in an environment that meets their needs. The communal areas of the home have been re-decorated to a high standard, in a modern but homely style. Peoples' bedrooms have been redecorated and all rooms are refreshed as new people come into the home. There is a lounge-dining room with lots of comfortable seating, a television, a piano, and a dining table and chairs for up to four people. A conservatory at the front of the home offers more seating and social space. We saw people enjoying socialising in both rooms during our inspection visit. There is a separate dining room with café style decoration with more dining tables and chairs; the manager told us people like to eat either in the lounge together or in their rooms.

The provider ensures proper measures are taken to identify and mitigate risks to health and safety in the home. Records show all equipment in the home, including the passenger lift, is regularly serviced, and kept in good working order. There are risk assessments in place for the home and all equipment is certified and serviced regularly. Environmental risk assessments are in place and supported by routine audits by the manager and external professionals. The manager ensures routine environmental health and safety checks are completed across the home, including for example, of the fire alarm system and water temperatures.

## Leadership and Management

This is the first inspection since the current service provider took over the home. The provider has policies and procedures in place to guide staff in how to deliver care and these are reviewed annually. The manager/RI is updating policies and procedures to reflect changes in practice implemented since the provider took over the home. Management ensure all staff are kept well informed of current changes in processes and updates to best practice through training, verbal handovers between shifts, and staff meetings.

The manager/RI is in the home almost daily and works very closely with the experienced deputy manager to ensure the smooth running of the service day to day. They keep detailed records of their statutory visits to the home as part of their RI role. Records show regular audits of care and support in the home are completed by the manager and deputy manager and prompt action is taken to address any issues found. There are processes in place to gather feedback from people, staff, and relatives on their experiences of the home, including online questionnaires and resident meetings. The manager/RI has an open door policy and speaks with people and relatives throughout the day to ensure everything is as they would like. As part of their review of the quality of care in the home the manager/RI sends a report to the provider every six months. This report gives their analysis of feedback and the findings of internal and external audits and monitoring of care provided in the home. The provider uses the review findings to guide improvements and developments in the service.

People living in the home can be assured the manager/RI ensures the right number of staff are on shift to support their needs safely and effectively. They have processes in place for proper vetting and induction training of new staff. Records show ongoing monitoring of Disclosure Barring Service (DBS) checks for all staff and registration with professional bodies for care staff. Management closely monitor training compliance and continually review and update the training requirements for staff to ensure the skills and knowledge mix in the home meets people's needs. The manager/RI provides in-house practice development sessions tailored to care staff's needs. Staff receive regular supervision on a one-to-one basis with management and annual performance appraisals. Records show these meetings and staff meetings are used to identify practice development opportunities and to have an open discussion with individual staff about their experiences working in the home.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
36	All staff must meet for one-to-one supervision no less that quarterly.	Achieved
44	The required improvements to the bathing facilities within the service must continue to ensure the service can provide both bathrooms and showering options to people living at the service.	Achieved

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**Date Published** 06/06/2024