



Inspection Report on

Aingarth Rest Home Ltd

**Ain Garth Private Residential Home
50 Brompton Avenue Rhos On Sea
Colwyn Bay
LL28 4TP**

Date Inspection Completed

14 December 2022

Final unpublished report

Final unpublished report

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About Aingarth Rest Home Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	AINGARTH REST HOME LTD
Registered places	19
Language of the service	English
Previous Care Inspectorate Wales inspection	10 January 2019
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the care and support they receive. They are engaged and active around the home, walking around chatting to staff or spending time in the lounges to watch television or socialise. The home is welcoming, homely and comfortable. Staff evidently enjoy their work and show great respect and kindness to people they support. They praise the manager for her eagerness to please the residents and for her future plans to enhance the home for the people's benefit. Visitors and relatives express their satisfaction with the service provided; they are happy their relative is well cared for.

The provider has good oversight of the service with frequent visits to the home. They know what is working well, what improvements have been made and where further improvements may enhance the service.

Well-being

People have choice and control regarding the care and support they receive at the home. They have choice from at least two options each meal and can have something else if they don't like those. People choose where they want to be in the home, walking around the corridors, sitting in any of the three lounges, the foyer or dining room. There is secure space outside for people to sit with their visitors and enjoy the fresh air. They choose from various activities if they want to take part at all.

People's physical, mental, and emotional well-being is looked after by care staff who seek professional advice if required. Personal care plans, daily records and review documents are comprehensive and include detailed and clear instruction on how all aspects of daily living are to be met. Records are kept of people's health outcomes and care plans are reviewed every month to ensure they are up to date. Records show health advice is sought and visits from health professionals take place routinely and when people need them. There is equipment, aids and adaptations to help people retain their mobility skills and independence.

Staff are trained in a variety of areas to ensure safe practices, including safeguarding of vulnerable people and they are guided by associated policies and procedures. Staff praise the manager for being available to them and the office is open so they can discuss issues at any time. Staff see their manager daily and have one-to-one meetings with them every two months. Decisions to restrict a person's liberty in any way are made only in the person's best interest and with full consideration of the family and the local safeguarding authority. People's participation in activities that may pose a risk are assessed so as to minimise any risk of harm.

The layout of the accommodation allows space for a variety of needs. There are ample different lounges for people to choose from and a secure garden with plenty of seats and garden furniture. The home is welcoming and comfortable. The provider invests in the property to make it homely for people living there. New large, reclining armchairs have been purchased, rooms and corridors have been decorated, the garden space has been enhanced and we saw there are written plans for further development.

Care and Support

The service provider ensures each person has an accurate, up to date plan for how care should be provided to them. We saw specific instructions ensure care is provided in a way that builds on people's skills and independence. The 'daily notes' format prompts staff to comment on every element of the care plan; progress and well-being is monitored fully. Review documents follow the same format, ensuring all elements of care are reviewed and individual risk assessments are completed to keep people safe.

Individuals' care needs are identified and agreed through consultation with them and people who know them well. This helps identify interests, hobbies, and preferences unique to the individual. We saw how one person enjoys a beer or wine, another person enjoys therapy baby dolls. We saw one person enjoys walking around the home and it is safe for them to do so. Staff know what worries this person and they comfort and sensitively distract them effectively. People are lively and engaged with their surroundings, sitting where they want to and moving around at will to another room and chair when they wish. We saw staff assisting people at mealtimes with patience and sensitivity, asking, *"Is that potato ok for you now?"* and *"Shall I cut this further?"*. They offer encouragement and reassurance, showing compassion and care. There are two options at mealtimes but, if people do not fancy any of these, the cook makes something else. A staff member told us the manager *"bends over backwards"* to get people what they want. People told us the staff are *"wonderful"*; a visitor said *"staff are lovely, they can't do enough for you. My mother is happy here"*. People are able to converse in their preferred language to some extent. We heard some people speak Welsh and staff spoke some Welsh phrases back to them.

People are supported to access healthcare and any other services necessary to maintain their health and well-being. Records show people have appointments with their GPs, chiropodist, dental practitioners, diabetes nurse and opticians. Nutritional needs are reviewed and weight monitored to ensure people are eating an appropriate amount and are supported in the most effective way to eat and drink. A range of expert advice and equipment is sourced to help keep people safe when mobilising; there are grab rails around the home and lifts to access all floors. People are happy and well. One person has improved so they are now happier to join in with others and socialise more frequently. Previously they had not dined with others and now they engage with people around the table, chatting while they enjoy their meal.

The service has mechanisms in place to safeguard the people they support. Staff have received training in safeguarding and there are policies and procedures to follow should there be a concern of this nature. Records show how any restrictions on people's liberty are made in people's best interests and only following a meeting with everyone concerned, to ensure full agreement.

Environment

The care service is provided in a home that has facilities and equipment to help people achieve their personal outcomes. It is situated on the coast so people can take trips to the sea easily. Outside there is a secure garden with plenty of seats and garden furniture to accommodate whoever wishes to sit outside in warmer weather. The manager told us of plans to make more use of other parts of the grounds. Inside the home, there is a lift and a stairlift to take people to the first and second floor and grab rails around the home to aid mobility. There are three lounges and a conservatory to choose from when moving around to find the ideal space to sit and spend time. The reception area is wide enough to sit in and watch people pass and there is room to walk around. All rooms are homely, comfortable and warm, decorated in seasonal festive decorations for the coming Christmas. During our visit, Christmas music played in the dining room. A large television in one lounge affords good visibility for all and there are quieter spaces for those who want it. Bedrooms are clean and nicely decorated; they are homely, comfortable, and well maintained. The dining room and hall have been recently decorated and refurbished and new armchairs purchased. There are bilingual signs around the home identifying specific rooms to help people with their orientation. We saw the responsible individual has an annual development plan; proposed changes to the home will further enhance the experience for people living here. People are happy, relaxed and comfortable in the home.

The service provider identifies and mitigates risks to health and safety. Records show safety checks are routinely carried out on matters such as water temperatures, legionella, fire equipment and fire safety. An updated electrical safety check is overdue and has been arranged before the end of December 2022. There are six-monthly fire drills and staff have received fire safety training. The home has achieved a Food Standards Agency rating of 5 in 2019, which is the best it can be.

Leadership and Management

The provider has governance arrangements in place to support the smooth operation of the service and help ensure the service is safe and effective. The individual responsible for overseeing the service (Responsible Individual/RI) visits more frequently than the required three months to keep themselves up to date with how the service is operating. Their report following a quality-of-care review, shows time is spent asking for the views of people and their relatives and we saw cards and letters of praise for the service provided in Aingarth. Minutes of staff meetings show staff views are sought on aspects of the service and information is shared. An annual development plan outlines areas for improvement identified by the RI; this will further enhance the experience for people living in the home.

People are supported by appropriate numbers of staff who have been vetted to ensure they are suitable for the role. Training is provided and there is always a senior care worker on duty with the required knowledge and expertise. Some staff are trained in safe practices including first aid, medication administration, food hygiene, moving and handling, health and safety and also dementia care and mental capacity. The manager has arrangements in place to ensure all current staff will have the same training and new staff will have a full induction. We observed staff supporting people safely and treating them with patience and respect.

Staff told us they feel supported. They work well as a team and there is evident mutual respect between each other. One staff was introduced to the home via an agency but decided to stay at the home full time as they respected the work ethos and the management. Another staff told CIW the manager "*nothing is too much trouble and they (the manager) bends over backwards*" to do whatever is necessary to make the residents happy regarding menu options. Another staff member enthusiastically told us about development plans that will enhance people's experience, particularly in the grounds of the home. Staff have an opportunity to meet with the manager on a one-to-one basis every two months to discuss their work, their well-being and share ideas.

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
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