

Findings of CIW visit on 12th and 20th February 2019

What have CIW told us?	What have we said we will do?
<p>There was an area of non-compliance as there were insufficient staff to meet the needs of residents living at the home.</p>	<ul style="list-style-type: none">• Resident dependencies have been and will be reviewed on a regular basis.• Staffing levels were reviewed and will continue to be monitored.• Additional staff have been deployed as necessary.• Staffing deployment has been reviewed together with appropriate allocation.• Staffing will continue to be recruited through a robust process.• Agency staffing reliance will be limited through effective recruitment.

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Recommendations for Improvement

The Registered person should ensure that:-

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| <ul style="list-style-type: none"> • The timings of the lunch and evening meals are reviewed to enable people to have choice and control about when they prefer their mealtimes and the menu choice. • All hazardous substances are safely and securely stored. • There are sufficient numbers of staff on duty at peak periods to meet the needs of people in a timely manner. • Personal care planning documentation is revisited to prevent duplication of documents resulting in personal plans being difficult to navigate due to amount of duplication within the files. • Documentation is revised following incidents or falls. • A programme of activities is available which meets an individual's needs (with specific reference to cognitive impairment). • Appropriate auditing and monitoring systems are in place regarding Falls Management. | <ul style="list-style-type: none"> • A resident's survey has been undertaken to determine the preferred timing of the main meal. This has overwhelmingly indicated that the evening is the option residents want. • The lock which was faulty was repaired immediately. • All staff have been reminded to report any maintenance issues promptly. • As above • All care plan documentation is to have an easy to follow index which will aid visiting professionals who may not be familiar with our records. • Further care plan training will be provided to our staff team. • The policy and procedure for the management post falls is being revisited with all nursing staff. • An activities survey is being undertaken to enable a review of the activities programme. • Feedback for resident will continue to be sort to help determine the success of activities offered. • A system to record and review all incidents is in place and will continue to be reviewed by the senior team. |
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| <ul style="list-style-type: none">• The medication room is locked at all times.• Incontinence products are removed from bathroom areas to promote a more conducive environment for bathing and to minimise the risk of spread of infection.• Flooring and stair grips throughout the stairwells are made safe to prevent potential trips.• Staff request the Identification as necessary of people visiting the premises prior to entry and the signing of the visitor's book.• Yellow hazardous bags are emptied to prevent over filling, malodour and to minimise the risk of spread of infection in the bathroom areas.• All staff receive appropriate training pertinent to their role with specific regard to Dementia care training.• Consider the Welsh Government's 'More Than Just Words' follow on strategic guidance for Welsh language in social care | <ul style="list-style-type: none">• This one off oversight was discussed with the staff involved and all staff have been reminded of the importance of safe storage.• Random spot checks will be made.• Storage has been reviewed and spots checks put into place.• All repairs have been completed.• All staff have been reminded that visitors are greeted and identity confirmed as necessary.• The nurses will monitor this on each shift and all staff reminded to promptly remove such items.• Our Dementia Lead Specialist will be visiting the home to review any need for further training which can then be cascaded to staff as necessary.• Any request for key documents in Welsh will be facilitated as required. |
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