



Inspection Report on

Ty Pentwyn Care Home

**Ty Pentwyn Nursing Home
Pentwyn Road
Treorchy
CF42 6HD**

Date Inspection Completed

19/05/2023

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About Ty Pentwyn Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Quality Care (Surrey) Ltd
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	12 May 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

People living at Ty Pentwyn, and their relatives, told us they feel happy about the care and support they receive at the home. Care staff and nurses are friendly and interact with people in a calm and unhurried way. Personal plans and risk assessments contain detailed and relevant information and are reviewed appropriately. Health professionals are consulted when necessary. The environment supports people's wellbeing, with communal and individual areas for people to choose from. The activities co-ordinator is attentive, engaging and knows people's preferences very well.

Care staff are safely recruited, trained, and supported in their roles. They report a positive view of the manager and communication between members of the team appears good. The Responsible Individual (RI) has good oversight of the home and is supportive of the manager. They complete their quality assurance duties as required and are responsive to any identified improvements.

Well-being

People are treated with dignity and respect and have control over their day-to-day choices. We saw care staff talk with people in a warm and friendly way and were unhurried in their interactions and supporting them with tasks. People could choose to use the communal lounge, go in the quieter breakfast room to watch TV programmes, spend time in their own bedrooms, or access the outside space. There are a variety of food choices for all meals, and we observed people asking for, and receiving, their preferences, even if it was not related to the planned meals.

The activities co-ordinator clearly knows people very well. We observed them moving from person to person to engage with them individually about things that were visibly important to them. People are supported to be stimulated and interact in a very calm and purposeful way. Visitors are made welcome and gave us positive feedback about their experiences of the home.

People are supported to be as healthy as they can be. We saw evidence of timely and consistent referrals and liaison with external health professionals such as speech and language therapists and specialist dementia team, as well as GPs and advanced nurse practitioners. The information gathered and advice given from these professions is included in care files and implemented by nurses and care staff. Medication is stored safely and administered as prescribed. Medication practices are completed in line with the medication policy at the service.

The service employs measures to keep people safe. There are a range of policies and procedures promoting safe practice. Care staff are recruited safely and receive safeguarding training. Care staff know the procedure for reporting concerns. Risks to people's health and safety are assessed and managed and the home is protected from unauthorised access.

Care and Support

Feedback from people, and their relatives, about the care and support they receive in Ty Pentwyn is consistently good. They told us: *“It’s such an amazing place”, “the staff are so caring and reassuring”, “they manage the dynamics between people so well”*. We observed all care staff speaking to people in a warm and friendly way, taking their time to complete tasks with them.

Care staff have access to all the relevant information they need to give people the right care for them, at the right time. Personal plans are person centred and include people’s preferences. Life story work has been completed with a couple of people, with the aim of everyone living at Ty Pentwyn having a life story book. Risk assessments identify when and how care staff may need to intervene and appear appropriately managed. At the time of the last inspection, personal plan reviews were basic and lacked meaningful analysis of any relevant events. However, at this inspection, reviews we sampled included more information about people’s changing needs. Monitoring tools such as repositioning charts, personal care charts and food and fluid charts are used to keep track of people’s health and well-being and highlight any concerns. People’s skin is checked by carers regularly, and any concerns passed on to nurses for closer monitoring.

There are sufficient infection control practices in place. We observed personal protective equipment (PPE) being used appropriately. Masks are available for those who would like to use them. The visiting policy needs updating to reflect more flexible arrangements since COVID restrictions have lapsed. Domestic and laundry staff complete daily cleaning tasks and during our visit we observed the home to be clean.

Environment

The environment is comfortable, clean, and decorated to a good standard. The home is set over two floors with lift access to the upper floor for people who have mobility problems. There are communal areas where people can interact with each other and take part in activities. We observed people in communal areas, they appeared comfortable and relaxed which suggests they are happy with the environment. There are sufficient toilet and bathroom facilities throughout the service and there is specialist equipment such as hoists available for those who need it. People's rooms are sufficient in size and are personalised with their belongings. There are domestic and laundry staff at the service daily to ensure standards of hygiene and cleanliness are maintained.

The home is maintained to a good standard. A maintenance worker is employed at the property to complete regular monitoring checks and small maintenance jobs. External companies are also contracted when necessary. We saw up to date safety certification for utilities, equipment, and fire safety features are present. People have personal evacuation plans in place, so care staff know the level of support needed in an evacuation situation. At the last inspection, we found the sluice and laundry rooms were unlocked and contained substances that were potentially hazardous to health, however these areas are now secure, along with the office and medication room.

Leadership and Management

Nurses and care staff enjoy working at the service and feel supported by their manager. They demonstrate clear knowledge of the people they support, such as telling us about non-verbal communication signals people show, and people's preferred places to sit. They reported the manager has an 'open door' policy, and feel their questions or queries are listened and responded to. At the time of the last inspection, the nurses working at the service had not been receiving regular supervision. During this visit we saw evidence that both nurses and care staff receive regular one to one supervision sessions to discuss their professional development and any personal issues.

There is a safe recruitment process and care staff are trained to meet the needs of the people they support. We sampled some staff personnel files and found they contained the required recruitment information and that all staff were working with a current disclosure and barring (DBS) check. The manager holds a training matrix which enables them to see what training has been completed and when refreshers are due. Staff complete a mix of online and face to face learning in both mandatory subjects and subjects relevant to the care needs of the people they support.

There are quality assurance processes in place to promote ongoing development and improvement of the home. The RI and manager have a good relationship, and both have good oversight of the day-to-day events that occur in the home. The RI supports the manager and staff, and this was noted in feedback we received during our visit. They complete their required quarterly monitoring visits, and biannual quality of care reports, identifying what is working well in the home and what actions are required to improve the things that are not working as well. We sampled a range of policies and procedures that underpin good practice at the home and found that they are reviewed regularly and contain relevant information. Minor adjustments are required to a couple of the policies, which we discussed with the provider.

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
16	Care plan and risk assessment reviews need to contain meaningful analysis of a person's progress towards their outcomes.	Achieved
36	Nurses must receive formal, individual supervision sessions in line with the service's supervision policy to ensure they are supported and have opportunity for professional development.	Achieved
57	Areas of the home that could potentially pose a health and safety risk to people should be kept secure to minimise that risk.	Achieved

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Date Published 20/06/2023