



Inspection Report on

Ty Camlas

**101 Gorof Road
Swansea
SA9 1BL**

Date Inspection Completed

02/08/2021

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About Ty Camlas

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	05 September 2019
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

This was an unannounced inspection as part of our programme of scheduled inspections. People and their relatives are happy and content with the care and support they receive. There is information available for staff to understand how to best meet people's care and support needs.

Staff are available in sufficient numbers and mix of skills to adequately provide support to people. Safety equipment is in place and health referrals are made in order to promote peoples' health and well-being. The service provider has developed systems to enable them to capture people's views and systems to develop more person centred information. The newly established management team have put checks and processes in place to keep service delivery under constant review.

Improvements are planned to enhance the environment such as developing the outside garden area and the kitchen water damaged wall. The manager is in the process of being registered with Social Care Wales (SCW).

Well-being

People have control over day-to-day life. People told us they have a good relationship with staff and commented, *“they’re a good bunch”, “they understand me” and “they are kind to me”*. Records show people are offered choices to make everyday decisions. The Responsible Individual (RI) told us they regularly speak with people who live at the service and their families about what matters to them and how to best support them. Staff on the whole, commented they feel supported by the management team. Relatives told us the manager and RI are accessible and *“I can’t fault them” and “they keep me updated with all that’s going on”*.

People get the right care and support. Records reflect referrals are made to a variety of healthcare professionals such as psychiatry and district nursing. This is confirmed by a visiting healthcare professional. Relatives told us their family member is encouraged to stay active and to do as much as they can for themselves. This is reflected in people’s records and is a focus of the service.

People can do the things that matter to them when they want to do them. We saw that there are a range of activities available which are meaningful to the people who live there. We observed activities taking place during our visit and healthcare professionals told us *“people are happy in their environment” and “people participate in the consent, capacity and best interest process”*.

People are safe and protected from abuse and neglect. The service provider has safeguarding policies and procedures, which are aligned to current legislation and national guidance. Staff demonstrate a sufficient understanding of their role and responsibilities. People living at the home told us they feel safe and secure.

People live in suitable accommodation, which overall supports and encourages their well-being. Their rooms contain personalised items of their choice and are suitably furnished. They have facilities, which encourage their independence and enables them to have private time. The manager undertakes a daily walk-through to identify any potential risks and minimise these at the earliest opportunity.

Care and Support

People are provided with the quality of care and support they need to achieve their personal outcomes. Policies and procedures in place include care planning, recovery star and safeguarding that are in line with current legislation and national guidance. The manager considers a range of information about prospective residents prior to coming to live at Ty Camlas. The personal plans we saw were appropriate and reviewed regularly. These contain information about people who live in the service, their relatives and healthcare professionals. The service uses a person centred approach to care planning, which informs carers how the person likes to be supported. Information demonstrates people are enabled to undertake activities of their choice and risk management plans are in place. Healthcare professionals told us care and support provided at this home is good.

Policy, procedure and application of hygienic practices and risk of infection are in place. Staff demonstrated an understanding of infection control and the use of personal protective equipment (PPE). Visitors are required to complete a short COVID-19 questionnaire but this was forgotten by the staff when we arrived but was picked up by the manager who promptly asked us to complete one. Staff wear appropriate PPE and follow correct procedures. The home is clean and tidy. Staff maintain appropriate standards of hygiene and cleaning schedules are in place with oversight from the manager. Oversight and auditing of infection control measures are in place. The home has sufficient stock of PPE.

The service has safe systems for medication management. There is an appropriate medication policy and procedure in place with regular audits completed by senior staff. Medication administration records are accurate and the audit process identifies mistakes with appropriate action taken. As and when required medication (PRN) was appropriately administered in line with instructions. The medication room temperature is consistently completed on a daily basis to ensure medication is stored at the correct room temperature.

The service takes all reasonable steps to identify and prevent the possibility of abuse. Care workers recognise their personal responsibilities in keeping people safe and told us they would report any issues of concern. They are aware of the whistleblowing procedure, and said they felt confident approaching the manager if they needed to. Care workers told us they had undertaken training in safeguarding and there is a current safeguarding policy for all staff to follow.

Environment

The home is safe and secure. Visiting professionals are requested to undertake a lateral flow test and sign into a visitors' book on arrival, ensuring people's safety is maintained. Visitors are also required to follow the home's infection control procedures in relation to COVID-19. Visitors can meet privately with people in the small lounge towards the front of the property. This is clean and well organised. Information is stored securely electronically and on paper in a locked office. Care documentation is treated sensitively ensuring people's privacy is upheld.

The service provider ensures measures are in place to manage risks to people's health and safety. Maintenance records show that checks are carried out to identify and address any problems. We saw these checks were up to date. Products that have the potential to cause harm are stored securely. We advised the service manager to keep the risk assessments and data sheets for products used within easy reach of this area. Checks on window restrictors are in place to ensure people's safety.

The laundry room is small, well organised and based on an independent living model of support with residents encouraged to do their own laundry or with support from staff if needed. Appropriate systems are in place and all laundry equipment is in working order. There is a dedicated storage area for household waste and clinical waste bins when in use.

The manager ensures the environment supports people to achieve their personal outcomes. The home is informal and relaxed and we saw people sitting in the lounge area and in the dining room on the ground floor, sitting in the comfort of their bedrooms relaxing. The accommodation is clean and comfortable and benefits from good quality decor and furnishings.

There is an outdoor space to the front of the property with parking spaces and a pathway with planting in pots and steps to the front door. There is a small courtyard next to the kitchen with a small smoking shed, which is in need of development. At the rear of the property, there is an elevated paved garden area, which has a table and seating and would benefit from development such as sufficient seating to enable individuals to rest /enjoy being outdoors. The outside space would benefit from recreational equipment and therapeutic and sensory areas. We discussed this with the manager.

Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service. Arrangements for the oversight of the service are in place, such as systems for assessment, care planning, monitoring and review to enable people to achieve their personal outcomes. The service is provided in line with the objectives of the Statement of Purpose, which was regularly reviewed. We saw policies and procedures are in place and updated.

Records seen by us relating to how the service is delivered were sufficient. Care files contain person centred information, personal plans, risk assessments and are well organised. Arrangements are in place for the oversight of the service, through ongoing quality assurance processes that review standards of care including feedback from people who live at the home. Quality of care reviews and visits to the service by the RI are completed consistently and in a timely manner. However, quality of care reviews were compiled by service managers, which is in line with regulations but need to be written by the RI. We discussed this with the present RI who agreed to address this immediately. Audits of care practices are in place and regularly completed.

There are sufficient numbers of staff on duty to safely support and care for people. Records show there are a mixture of experienced and new staff available and this was seen during our visit. We saw there are sufficient numbers of staff available when needed. People living at the home told us "*there are usually enough staff around when I need them*". A relative commented "*I can't fault them, they know what they are doing*". Records show the service provider use their own dependency tool to determine the numbers of staff required on each shift.

The service provider has oversight of the financial arrangements and investment in the service. The RI assured us the service is financially sustainable in order to support people to be safe and achieve their personal outcomes. The manager told she held a budget for the home and told us of plans for investment at the home such as further developing the garden with vertical planting and repairs to the kitchen wall by the window.

Areas for improvement and action at, or since, the previous inspection. Achieved

Areas for improvement and action at, or since, the previous inspection. Not Achieved

None	
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Areas where priority action is required

None	
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Areas where improvement is required

None	
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