



Inspection Report on

Erwhir Care Home

Erwhir Residential Home

29-30

Longacre Road

Carmarthen

SA31 1HL

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

28/01/2022

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About Erwhir Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Towy Haven Care Homes Ltd
Registered places	15
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes. 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

Erwhir has a warm and homely feel; the rooms are appropriately decorated and well lit. People have access to two lounges, one being a quiet lounge to choose to spend time in. A few parts of the home are in need of minor redecoration or repair.

Care workers are managed and led by a manager who wants to ensure people receive good quality care. The manager takes action to address concerns raised. The staff team value the job they do by caring for people in a friendly and person centred way.

The care records and daily recordings are kept on an electronic records system. The majority of care records are up to date, but improvement is needed in the daily notes records.

There are some effective governance arrangements in place to monitor quality but greater rigor is needed to ensure compliance with RISCA Regulations.

Well-being

People have choice and control over their day-to-day lives. We saw choice provided regarding where people wanted to spend their time, what they wanted to do and meal choices. Care workers treat people with respect and their views are important. We observed care workers supporting people in a caring and person centred way e.g. using the persons preferred language. Care workers have a good knowledge of people, including what is important to them, their likes and their dislikes.

The home supports people to have visits from family and friends; there is a designated area in the home for visits. Care workers also support people to use various video call networks as well as telephone calls to and from loved ones. The home purchased mobile phones so that people could call in or out with greater ease, supporting people to have private conversations.

As there have been restrictions on activities and trips out during the pandemic, care workers adapted their support to meet Public Health Wales guidelines, with many indoor and individualised activities arranged throughout the period. This means people still do the things that make them happy and are as busy as they wish to be.

There are effective infection control measures in place with all of the care workers wearing appropriate PPE. Visitors are required to provide evidence of a negative lateral flow or PCR test and have their temperature taken. Hand sanitiser is available throughout the home. However, improvement is needed in the personal protective equipment (PPE) stations around the home.

Care workers have good knowledge of safeguarding and the importance of reporting any incidents or concerns. They have a clear understanding of their role in protecting people from the risk of harm and abuse. We saw that appropriate infection control measures are in place and staff are clear about their role and responsibilities around infection control.

Care and Support

Personal plans are reviewed and updated regularly but, the daily records information needs improvement; there is little or no detail in some records of what people have done/eaten/drunk during their day. Personal plans are reviewed in line with the regulations and as and when the persons needs change. Assessments are completed for each person's physical and mental health and up-to-date risk assessments that support people to be as independent as possible. This includes where the person is at risk of falls due to a reduced awareness of their surroundings.

Staff understand the importance of good nutrition and hydration to meet people's nutritional needs. Where necessary meals are fortified using cream and butter and special diets are provided. Meals are prepared using fresh ingredients, with little reliance on processed food. People are wholly complimentary about the meals with comments such as *"the food is delicious"* and *"The food is great I have eaten things here that I wouldn't have dreamed of having before, like today I am having faggots peas mash and gravy. I wouldn't touch it before but this is the third time I have picked to have this and it's lovely"*.

Most care workers have completed an induction and training program covering the mandatory training needed to carry out their duties. Care workers have a clear understanding of the needs of people they support, and showed respect and patience when interacting with people. There was a very happy and fun atmosphere with people joking with staff and having general everyday conversations that were not task lead. The home provides an 'active offer' of the Welsh language. This means being proactive in providing a service in Welsh, without people having to ask for it.

The provider has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers may refer to infection management policies when necessary. All measures are in constant use to ensure people are safe from Covid-19 infections, including the monitoring and testing of all visitors to the home and regular use of PPE by all care workers.

Management regularly assess the staffing levels to ensure that as people's needs change the level of care provided in the home is maintained.

Environment

People live in an environment that supports their health, safety, security and wellbeing.

We saw that the home is clean, homely and in the main well maintained. Cleaning routines in the home have changed, to take into account extra cleaning measures because of Covid 19. We discussed this with the RI/manager. We saw records of maintenance checks, including PAT testing and fire safety tests; all completed within the required timescales.

The service promotes good hygiene practices with visitors to the home having to show proof of a negative lateral flow or PCR test and having their temperature taken. Hand sanitisers are available and there is a good supply of gloves and masks.

People's bedrooms are personalised with their own furniture (if they want) ornaments and photos. There are some repairs needed in some rooms where there is damage to walls, the Responsible Individual (RI) has assured us that these will be repaired.

We found infection control practices in the home to be very good and we saw that hand-sanitising facilities are in place throughout the home. The PPE that is available throughout the home needs to be stored correctly in suitable PPE stations. The RI has assured us that this will be addressed.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front door bell before gaining entry and record their visits in the visitor's book when entering and leaving. Care records are kept securely and only available to authorised care workers.

Leadership and Management

The RI has arrangements in place that help to ensure oversight of the service as well as continuous development but this needs improvement. The RI is also the manager of the service so is present nearly every day. We have seen no evidence of an official RI visit or quality of care report since June 2021. This was at the height of the pandemic and virtual visits were the safest way to maintain oversight, however, as the RI is also the manager and based at the service we have no evidence of the RI completing their regulatory duties since June 2021. This was discussed with the RI and they have assured us that they will commence with the RI visits and quality of care reports. This is an area for improvement and we expect the RI to take action to address this. We will follow this up at the next inspection.

“It’s rewarding”, “helping people to live a fulfilling life and improving overall quality”, “Job satisfaction from ensuring the levels of care are met to a good standard”. In conversations with care workers they said *“The RI/manager are always available no matter what, even when they are not physically in the home they are contactable by phone”.*

Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach the manager, but would contact external agencies such as the local safeguarding office if they thought they needed to.

Care workers have received induction training that will enable them to provide the care and support needed by the people living in the home. The training matrix seen at the inspection shows large gaps in training. This included mandatory training such as safeguarding and infection control. This is an area for improvement and we expect the RI to take action to address this. We will follow this up at the next inspection

The staff supervision matrix provided to CIW showed only the planned /coming up supervision dates. We saw no evidence of all staff receiving quarterly one to one supervision therefore, staff training and development needs cannot be evidenced as monitored to ensure care staff have the skills and knowledge to provide the care needed. This is an area for improvement and we expect the RI to take action to address this. We will follow this up at the next inspection.

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
36	Staff are not receiving quarterly supervisions and	New

	there are large gaps in staff training	
73	We found no evidence that since June 2021 the RI has not completed a regulation 73 visit	New
80	The RI has not completed a quality of care review since June 2021.	New

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