



Inspection Report on

Ty Draw Lodge

**Ty Draw Lodge Residential Home
36-37 Tydraw Road
Cardiff
CF23 5HB**

Date Inspection Completed

26/09/2023

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About Ty Draw Lodge

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ty Draw & Wentworth Lodge Limited
Registered places	32
Language of the service	English
Previous Care Inspectorate Wales inspection	19 June 2023
Does this service promote Welsh language and culture?	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

This inspection was carried out to review areas where the service was not fully meeting legal requirements in June 2023. We found that the service has made positive changes and improvements in these areas to meet legal requirements.

People and their relatives spoke highly of the care and support provided. Personal plans of care are thorough and clearly outline people's needs and how they should be met. There are effective systems in place to keep information accurate. Care records show that people receive support they need in a timely way. People receive the right medication and have good access to health care services. People engage in activities of their choice and do the things that matter to them.

Since the last inspection the provider has invested in updates to both the internal and external environment. There is a homely and welcoming feel and the environment is clean, safe and maintained.

Care staff told us they receive a good level of consistent support from the management team and the Responsible Individual (RI) who they value and respect. Records show that seniors and care staff are well trained in their role and understands the needs of people they support. Since the last inspection some areas of training have been revisited. There is good oversight from the RI and management team of the quality and safety of the service provided.

Well-being

The service is working towards providing an 'Active Offer' of the Welsh language. None of the people living at the service currently require care to be delivered through the Welsh language. There is one care staff who can provide care in the medium of Welsh. Some key documents can be made available in Welsh, if required. There is some bilingual signage in the home and key phrases displayed for staff.

People have the care they need. The care staff are knowledgeable, well trained and care about the people living in the service. They have a good understanding of people's needs and how best to meet these. Since the last inspection some areas of training have been revisited. Care records are detailed about the requirements and preferences of people. We saw people get the right care without delay. People access health and social care professionals to make sure people remain as healthy as possible.

People live in an environment which supports them to achieve their well-being. The home is clean and furnished to a good standard with systems in place to address the maintenance of the property. People are encouraged to personalise their space with items that matter that gives them a sense of belonging. We saw family members enjoy visiting, they told us they are made to feel welcome. Since the last inspection, the RI has invested in the home to further enhance the environment and experience for people. Infection prevention and control procedures are good. They speak highly of the manager and deputy, describing them as supportive and approachable.

People benefit from good leadership and management. There are effective quality assurance arrangements in place to keep the RI well informed and evaluate the performance of the service. The care staff told us that the manager and deputy are "visible" in the home and always "supportive". Relatives told us, they are "Kept well informed" and "We are confident to raise concerns and feel this would be acted upon".

Care and Support

Care staff provide kind and caring support in a respectful way. We saw care staff positively engaging with people and know their interests. Individuals and representatives describe the care staff are *“good and responsive”*. Staff are knowledgeable about the people in their care and are empathic and patient in their approach. People and their relatives told us they feel the care and support provided is consistently good. A relative complimented the service stating, *“Staff genuinely care about people”* and *“We are so impressed with the real kindness and compassion that is shown by the staff”*.

People are encouraged to do things which matter to them and try new activities. People choose where and how they wish to spend their time. We saw there is a range of meaningful activities and planned events. There was photographic evidence and written documentation. Activities include participating in local community activities, events in the home, board games and gardening etc. The home has recently purchased sensory and therapeutic items which people enjoy. People told us they like taking part in activities. A relative stated *“My father enjoys the table tennis nights, singalong nights, playing games, there is always something going on in the home”*. Visitors told us they are always made welcome and invited to some events. A relative complimented the service describing the staff *“Caring, helpful and polite, they not only care for people but make sure the visitors are cared for while there”*.

There are person centred plans in place and daily care records confirm that the support people receive is tailored to their preferences and outcomes. Care information is reviewed regularly to ensure they remain accurate. Accident and incidents are promptly reported and we noted that care staff take appropriate action to safeguard the person. Care records showed that people receive consistent support with personal care, continence, fluid and nutrition etc. People are supported to maintain a healthy weight and diets are reviewed when required. Drinks and snacks are readily available for people throughout the day. Appropriate referrals are made to health and social care professionals when required. The General Practitioner regularly visits the home to monitor the health and well-being of people. Relatives we spoke with told us they are confident to raise concerns and felt this would be acted upon.

People receive medication at the right time. Care staff are trained to administer medication safely in accordance with their medication policy. Each person has a personal profile which informs care staff how they like to take their medication. Medication administration records show that people receive medication when required. There are good arrangements for the storage of medication but room temperatures must be formally monitored. There are regular medication audits in place to ensure safe practices are followed.

Environment

People are cared for in a homely and suitable environment. We found bedrooms to be clean, warm, and spacious and personalised. There are sufficient bathing and toilet facilities for people to enjoy. There has been significant investment in the home to further enhance people's experience. People told us how much they enjoy spending time in the new socialising bar area with family and friends. A relative complimented the service "*what a great initiative*". The home plans to organise regular events in the bar for people to enjoy. Since the last inspection, the front and rear gardens have been relandscaped with colourful flowers/shrubs and pleasant garden furniture, inviting people to use. The designed garden offers people the opportunity to enjoy the surroundings safely whilst exploring points of interest and a water feature. We saw people walking around the garden and sitting enjoying a chat and having refreshments. All carpets on all stairs and corridors have been replaced and some areas have been recently redecorated which promotes a 'homely' feel.

People live in a safe environment. There are servicing arrangements in place to ensure facilities and equipment are fit for purpose. There is improved management of health and safety within the home, by introducing a daily check to keep the home free from any hazards that would pose a risk. There are personal emergency evacuation plans (PEEPS) in place which is important to inform care staff of the assistance people require in an emergency. Since the last inspection, the internal stairs have been assessed and deemed appropriate for the current needs of people living in the home, this is kept under review. Also, we saw care staff presence in all communal areas, positively engaging with people and able to respond when needed. The maintenance team undertakes routine checks on most equipment. However, the routine checks on fire equipment must be appropriately recorded, including emergency lighting, fire doors and fire evacuations. The manager assured us this would be dealt with immediately. We observed people actively walking around the home to enjoy spending time with others or on their own if they choose. The home has a visitor book in accordance with fire safety arrangements. Staff understands the importance as they have completed health and safety training.

There are good infection control arrangements in place. We found the home clean and free from any unpleasant odours. There is a cleaning schedule in place which staff follow to maintain the standard in the home. Rotas show that housekeeping staff are regularly allocated to work. There are effective clinical waste arrangements in place to control the spread of infection. There are good supplies of PPE and stations for care staff to remove and dispose of them safely throughout the home. Staff understands the importance as they have completed infection control training.

Leadership and Management

People benefit from effective governance and oversight at the service. The RI regularly visits to actively seek people's views to inform the future shaping of the service. The feedback is very complimentary describing the service as *"The staff are excellent"* and *"Mum has blossomed since living here."* The quality assurance report evaluates the quality of care and safety of the service that keeps the RI well informed. There are internal audits regularly monitor for example, accident/incidents, concerns, medication etc. This is good practice as it enables the provider to monitor referrals for themes, trends, and patterns of abuse for prompt action to be taken. The care staff told us that the manager and deputy manager are visible in the service. They describe the manager and deputy as *"approachable"*, *"supportive"* and *"always encouraging which makes us want to do more"*. The service is actively delivering the outcomes described in the Statement of Purpose.

People are cared for and supported by well trained and managed care staff. They receive regular opportunities for support and training to understand the needs of people they support, which they value. Since the last inspection, care staff received specific retraining in the procedure to follow in the event of a person falling and the use of the lifting equipment, which enables care staff to respond effectively in an emergency.

People benefit from care staff that know people well. Generally, there is good retainment of staff which promotes continuity of care for people. Recruitment is ongoing to ensure that agency staff is not used, where possible. Staff working rotas confirm that senior staff are always available and the care staff numbers allocated are consistently provided. Throughout our inspection, we saw staff presence maintained in all high-risk communal areas of the home to promptly respond when needed. The care staff told us that seniors are always helpful and supportive. The care staff we spoke with were knowledgeable of people they support and they built good relationships.

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
21	The provider has failed to ensure care and support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.	Achieved

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
N/A	No non-compliance of this type was identified at this inspection	N/A
44	The provider has failed to ensure the premises are free from hazards and properly maintained to the health and safety of individuals	Achieved
6	The provider must ensure sufficient governance and oversight of the service to be assured people are protected from harm.	Achieved

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