



# Inspection Report on

**Towy Castle Care Home**

**Towy Castle Residential Home  
Uplands  
Carmarthen  
SA32 8DY**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

05/07/2022

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## About Towy Castle Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Carmarthen Care Limited
Registered places	60
Language of the service	Both
Previous Care Inspectorate Wales inspection	20/02/2019
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

We found that people living in Towy Castle Care Home receive consistent care and support delivered by a team of experienced and knowledgeable staff. Personal plans and risk assessments are detailed and provide care staff with the required information to provide good quality care and support. Life histories show care staff what is important to people. Care staff know people well and interact in a kind and caring manner.

The Responsible Individual (RI) has good oversight of service delivery and supports the registered manager in providing clear direction and ensures the staff team are well supported. Care staff feel supported by managers and have regular individual supervision sessions. The RI and managers make themselves readily available to staff, people and their representatives and welcome any feedback on the service provided.

The environment is well maintained, clean and has excellent hygiene standards. Regular checks, servicing and maintenance ensures the home and its facilities are safe.

### Well-being

People are cared for in an environment that supports their well-being and are encouraged to have choice and control over their day to day lives. We noted that certain documents such as the menu and activity timetable are produced in pictorial format; this makes it easier for people living with dementia to make choices.

People's opinions and views are important and people are listened to. Management and the RI ensure that wishes are taken into account and acted upon where possible. We saw changes made to the menu following a request by people living at the service.

Records evidence that the Activities Coordinator regularly meets with people to plan and evaluate all activities. We saw people being empowered to participate in a singing session.

We saw staff interacting with people naturally and showing genuine warmth and kindness. One family member told us *"Staff really care, they paint my mum's nails and know what matters to her. On a recent trip to the beach staff who were not on shift volunteered to go and help out, it shows they care"*.

There is a low staff turnover and this ensures continuity of care for people. Another family member said, *"I am delighted with everything"*.

The service strives to ensure people are protected from harm and abuse. Staff spoken with have a clear understanding of their responsibilities in relation to safeguarding vulnerable people. Risks to people's health and safety are assessed and effectively managed.

We saw Personal Protective Equipment being used to minimise the risk of infection. All visitors are required to show a negative Covid test result before being allowed into the building.

## Care and Support

People are cared for by staff who are experienced and trained to undertake their role. Care plans are detailed and person centred and are clearly set out enabling staff to access the information they need. One staff member told us, *“They (Care plans) tell a story are easy to read and follow, they are well set out now”*. A ‘This is me’ leaflet is kept on individual files providing staff with personal details on individuals including their life history. This helps care staff to build positive relationships with people and a deeper understanding of their needs and desired outcomes and how best to achieve these.

People and their representatives spoken with told us they are happy with the care and support provided, they said *“The girls are great, if you want anything you just ask. I wake at six and press the buzzer and my tea is there. I don’t have to wait for anything, they’re on the ball.”* A family member told us *“Anything I ask of them (staff) it’s done, there isn’t anything they wouldn’t do for my mum or anyone else, they really care”*.

Care plans and risk assessments are regularly reviewed by care staff and management to ensure people are receiving the most appropriate care and support. Daily records are mostly detailed but would benefit from more consistency from care staff.

We saw evidence in people’s care records of Health and Social Care professionals being involved in care planning and reviewing, including GP, District Nurse, Social worker, Physiotherapy, Optician and Podiatrist.

Measures are in place to ensure people keep safe from Covid-19 infections as far as possible: this includes the monitoring of all visitors and the appropriate use of personal protective equipment (PPE) by all staff.

## Environment

The home is spacious and well maintained and people enjoy a very high standard of cleanliness throughout the home. The communal bathrooms were exceptionally clean and well maintained with specialist moving and handling equipment for those who require additional support.

The owner and RI continue to develop and make improvements to the home and have recently completed an extension to include a sitting area that provides beautiful views over the Towy estuary and a coffee shop to be enjoyed by visitors and people living at the home. A wood cabin has also been purchased to enable people to visit during the pandemic and this now adds an additional space where people can enjoy spending time outside.

During the pandemic it has been difficult to arrange for work to be undertaken however now that restrictions are eased decorating and upgrading within the home is continuing throughout. The Day rooms have been redecorated and new flooring has recently been laid in nine bedrooms. The redecorating is continuing through the corridors and there are plans to extend the laundry.

People are encouraged to personalise their rooms by using favourite pieces of furniture from their previous home that have sentimental value and items such as ornaments and photos. We saw one person had their own outside patio area with garden furniture and bird feeders that were visible through the bedroom window. One person told us, "*I love my room, I've got all I need, I was able to bring in my own sheets, it makes a difference*". There is a hair salon on site and the hairdresser visits regularly.

There are measures in place to ensure environmental safety. We saw safety certificates for utilities such as gas, water and electricity are in place. We saw records to show that specialist moving and handling equipment is regularly checked. The Fire service has recently undertaken an evaluation of fire safety provided at the home and has identified some areas that require attention. The RI has assured the Fire Service and CIW that this will be addressed as soon as possible and this will be checked at the next inspection.

Hazardous and cleaning materials are stored securely, in line with the COSHH (Control of Substances Hazardous to Health) Regulations 2002. Locked cupboards have keypads enabling access only to those who require it.

## Leadership and Management

The Responsible Individual regularly visits and has a good oversight of the day to day running and management of the service. There are clear systems in place to monitor the quality of support people receive. We saw evidence to show that staff, people and their representatives are consulted regarding their wishes and opinions. Online surveys, staff and residents' meetings and informal discussions with the managers, RI and proprietor provide opportunities to do this. This information is used to form part of the quality of care review which the RI completes on a six monthly basis. The most recent report clearly sets out the strengths of the service and any areas where it can improve.

Staff records show us that they receive regular supervision sessions and a staff member told us, "*Supervision is every three months but the door is always open and I go straight to the manager if I have a problem, I don't wait*". Another staff member said, "*Managers are approachable, the RI deals with things straight away.*" We saw staff, people and visitors having impromptu conversations with managers throughout the day with an open-door policy.

People are protected by a safe recruitment process. Care workers are recruited in line with legislation. We examined a number of personnel files and could see the necessary pre-employment checks have been completed. These include Disclosure and Barring Service (DBS) checks and references from previous employers. We would like to see more detail in employment history checks. This has been discussed with managers who agreed to ensure these details are placed in the files.

New employees are required to complete a structured induction on commencement of employment and full training is provided thereafter. The training manager is currently changing to another training provider and therefore a large part of the training will be undertaken by staff over the next few months to ensure all mandatory training is up to date. The pandemic has also made it challenging for staff to undertake all required training. At the next inspection we would expect to see that all staff have undertaken the necessary training. A member of staff told us "*Staff Training is good; the RI agrees this is not just a job it's a career especially for younger people just starting in care.*"

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
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**Date Published 18/08/2022**