



Inspection Report on

Ty Llandaff Care Home

**Conway Road
Cardiff
CF11 9NT**

Date Inspection Completed

20/11/2023

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About Ty Llandaff Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Ty Llandaff Care Home Ltd
Registered places	70
Language of the service	Both
Previous Care Inspectorate Wales inspection	06 and 09 September 2022
Does this service promote Welsh language and culture?	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

Since the last inspection the service has appointed a suitably skilled and qualified manager. The care staff described the manager and office manager as being very supportive and approachable. The Responsible Individual (RI) and manager has a good leadership and oversight of the service. There are robust assurance arrangements in place to evaluate the quality and safety of the service.

People are happy and content living at Ty Llandaff. We saw positive interactions and relationships between people and care staff. People described the staff as caring and respectful. Family and friends are welcome to visit their loved one and we saw group events planned, which people enjoy.

Personal plans and associated care documentation are person centred and are very detailed. There are regular reviews taking place to ensure any changes are reflected. People's views are valued and there are regular opportunities to share their opinions and ideas, which influence future service improvements.

The environment is well maintained and presented. People's space is personalised to their taste with items of importance. There are excellent facilities and equipment available to cater for changes in people's needs.

Well-being

The service aligns with the 'active offer' in relation to the promotion of the Welsh language in service provision.

People have control over their day-to-day life. People's individual needs inform a personal plan and support is adapted to suit their circumstances. The service asks people and their representatives about their wishes in the planning of their care to support meaningful outcomes. People are able to voice their opinions at resident meetings and reviews. People told us they can choose where to spend their time, in communal areas or their own personal room. Generally, people have a good menu choice and stated they enjoyed the food offered. We saw care staff respect people's choices of leaving their door open or closed when spending time in the bedroom to respect their dignity and safety. People told us they are able to make their own decisions about how they spend their day. Regular activities are available to accommodate people's preferences, interests, and hobbies. People have key workers, which means they are cared for by the same care staff. We observed a positive and respectful approach by care staff. People told us that their concerns are always acted upon.

People live in a safe and very high standard of internal and external environment. The provider continues to promote investment in further beneficial environmental changes. People are happy with their rooms. Bedrooms are personalised and have been adapted to enhance people's independence and reflect individuality. There is an ongoing plan for refurbishment at the service. There are servicing arrangements in place to ensure equipment and facilities are regularly serviced to keep people safe from harm. A good standard of hygiene and infection control is being maintained to reduce risk of cross infection.

There are very robust oversight and governance arrangements within the service. The RI and the management team are accessible and supportive. The RI regularly visits the service to keep well informed and evaluates the quality of care. The manager feels well supported in their role. There are good processes in place for assessing, monitoring, and reviewing the care and support needs of people. All nurses and care staff receive regular support and training to understand the needs and conditions of people. The manager intends to schedule appraisals of work for all staff. Staff recruitment has been challenging but they have successfully appointed all outstanding positions which will help in the provision of continuity of care for people.

Care and Support

There is information available which accurately describes what people can expect from the service to make an informed decision if they would like to live at Ty Llandaff. People told us that they know how to raise a concern and are confident that this will be acted upon. Information about the service is available bilingually in the Welsh language. Ty Llandaff is very much part of the local community and promotes the “Active Offer” of the Welsh language and culture. Currently two people and a carer speak Welsh. The Welsh speaking carer wears a lanyard to identify themselves to people and visitors, to effectively communicate in the language of their choice. There is bilingual signage available throughout the home.

People felt comfortable and relaxed with care staff. We observed positive interactions between people and care staff based on trust. People told us, “*Staff are kind, friendly and conscientious*” and “*Staff are lovely and always treated with dignity and respect*”. Some written compliments received described staff as being “*Very attentive and nothing is ever too much trouble*” and “*The quality that comes from the heart*”. Most people spoke highly of the standard of food provided and different dietary needs are catered for. However, they would like additional food items to be included in the menu. The manager is addressing this.

People’s views are important to Ty Llandaff. There are regular meetings with people and their representatives to share their views and ideas. We noted that their feedback influenced improvements in the home which is important to people to be heard. A quarterly newsletter is produced to share information, promote communication, and celebrate their successes. We saw that the service has received a high level of compliments. Some comments include, “*Our thanks are to the highly professional and attentive staff*” and “*We had a luxurious meal made by the chef and it was quite simply delicious*”. People are encouraged to contribute to their review meetings to voice their views and preferences. When the RI visits the service, they actively speak to people, their representatives and care staff to keep well informed.

People or their representatives can express their wishes and explain how they would like their care delivered. This information is used to develop a person-centred care plan that outlines people’s preferences and the associated risks. Care records show that people receive the right care when they need to achieve people’s personal outcomes. Care records are complete and detailed and accessible to visiting professionals. There are regular reviews taking place to ensure any changes are reflected. We found people’s clinical health and well-being is effectively monitored and actioned. Care staff have changed their approaches and ways of working which has proven to be successful in facilitating people to meet their goals and aspirations. We saw care being delivered in a caring and respectful way.

People receive medication at the right time. There is a detailed medication policy for nurses and care staff to follow. All staff are trained to safely administer medication and their

competency is regularly assessed. We found medication is stored securely and within the temperature range. Medication administration records (MARs) confirm that people regularly receive medications they need and changes are noted. The nurses we spoke with were knowledgeable about people needs and requirements, based on their risk. When people need “when required” medication the care staff record the reason and the effectiveness of the medication. Regular audits take place to ensure the safe management of medication and practice is sustained. They are proactive in consulting with appropriate health professionals to seek advice when needed. Care staff accompany people to healthcare appointments where required.

People have access to a range of stimulating and beneficial activities. The service has a dedicated team of activities coordinators who plan both individual and group activities. An activities plan is displayed on the communication board. During our visit we saw people enjoying choir practice, visiting the hairdresser and a coffee morning with friends and relatives. A person told us “*There are lots of varied activities and I choose when I want to join*”. Also, the home celebrates events and special times of the year. We saw that people had made poppies which were displayed in the home for Remembrance Day.

The service has effective mechanisms in place to safeguard the people living at the service. We found incidents are recorded and reported to the relevant agencies when required and in a timely manner. People feel safe at the home and told us they feel able to approach nurses and care staff with any concerns they may have. Staff told us that there are sufficient staff to meet people’s outcomes and records confirm this. The safeguarding policies and procedures are in line with current guidance.

Environment

Since the last inspection many bedrooms, corridors and communal lounges have been redecorated and many carpets have been replaced. There is an ongoing refurbishment plan in place to ensure the environment remains appealing and clean.

The environment promotes people's personal outcomes. The home is fully accessible for people with mobility difficulties which promotes their independence. There is a small accessible front garden with a seating area and raised planting beds. The service provider is currently developing an additional garden area which is secure for people with a memory impairment to enjoy. There is a dedicated reception area which is welcoming and offers people an additional seating area with refreshments available. We saw families and their loved ones thoroughly enjoying their time in this area. There are additional rooms available which we saw being used by relatives for large get together and celebrations, which the home accommodates. People have their personal items around them, and the service makes every effort to accommodate people's wishes to have their own furniture. Fabrics and furniture throughout the home are of excellent quality and homely. We saw people socialising with others in the lounge areas which are spacious and provides sufficient seating. There is a variety of aids and equipment available to enhance people's mobility and ensure their comfort when there are changes. The service promotes a friendly and relaxed environment both for people and staff.

People can be confident that health and safety is monitored to keep people safe from harm. There is a dedicated maintenance team available to respond when needed. We found the home free from clutter and hazards are well managed. There are regular and routine arrangements in place to service equipment and facilities to ensure they are well maintained and safe for use. There are auditing processes in place to ensure routine checks are completed and documented. People have a 'Personal Emergency Evacuation Plan' (PEEPs) in place that inform care staff of the assistance people need in the event of an emergency. Visitors are asked to record their visiting times to ensure they are authorised and for fire purposes.

The service is committed to having a good standard of cleanliness. There are robust cleaning regimes in place for housekeeping staff to follow to minimise the spread of infection and keep the home clean. Cleaning materials that pose a risk to people is kept secure at all times. There is a sufficient supply of personal protective equipment (PPE) throughout the home. We observed staff regularly using PPE and disposing appropriately. There are arrangements in place for the disposal of clinical waste. All staff are trained in infection control.

Leadership and Management

There is consistently strong leadership and oversight at the home. Since the last inspection, a manager has been appointed that is suitably skilled and qualified for the role. The staff team describe the manager as “*visible and supportive*” which is having a positive effect on overall morale within the home. Nurses and care staff told us that they receive consistent support from the RI and manager which they respect and value. The manager described the RI as “*Exceptional*” and they are very supportive and always accessible. The manager is also given the opportunity to receive peer feedback and support. There is a dedicated management team whose aim is to provide the best possible care and outcomes for people.

People benefit from effective governance arrangement to support the smooth running of the service and quality of care. We found the RI undertakes their duties with due diligence. The RI regularly visits the service to seek people’s views, which informs the future shaping of the service. The RI demonstrates good knowledge of the service as there is a high level of monitoring of the service to evaluate the quality of care and safety for people. The manager has a programme of routine audits in place to monitor the performance of the home. We noted actions are taken to ensure improvements are made. The statement of purpose document informs people about what they can expect which we conclude is an accurate reflection of the service provided.

People receive care and support from care staff that are well trained and supported. All staff employed at the home are recruited safely with pre-employment checks and relevant documents stored within personnel files. Nurses are suitably qualified and care staff have achieved or working towards their relevant qualification. The staff team are encouraged to register with Social Care Wales, the workforce regulator, with a high percentage having done so. Records show all staff are well trained and we observed them applying their knowledge through good practice. Competencies are checked by management. Most staff receive the opportunity for supervision which is important to seek support and reflect on their professional development. However, the manager assured us that regular supervisions will be provided to all staff and appraisals are to be scheduled. Policies and procedures are regularly reviewed and provides clear guidance for care staff to understand their role and follow when needed.

The service understands the importance of continuity of care and support for people. Staff recruitment has been a challenge but the service provider has done everything possible to recruit suitable, skilled, and quality staff. People and their representatives told us there has been a lot of staff changes and would like stability. At the time of inspection, we found that there has been a successful recruitment drive which has secured consistent nurses and care staff. In the interim, we are assured that there will be experience staff working

alongside new staff with increased oversight by the management team. Working staff rotas showed that there are sufficient staffing levels allocated to meet the needs of people. We observed care staff being attentive and responsive. Call bell records also confirm that mostly all people receive care in a timely manner. People we spoke with told us that receive support when they need.

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
44	To replace carpets and redecorate areas to ensure that the home is suitably maintained for the people who live there.	Achieved
16	Ensure that people and representatives are included in the three monthly review of the care and support plan.	Achieved

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Date Published 12/12/2023