



Inspection Report on

WAM Care Homes Ltd.

**Ty Mair Care Home
12 Pen Y Gaer Cottages
Llanelli
SA14 8AG**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

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About WAM Care Homes Ltd.

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	WAM Care Homes Ltd
Registered places	74
Language of the service	Both
Previous Care Inspectorate Wales inspection	06/02/2020
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

Ty Mair (WAM Care Homes Ltd) is a happy home. Care workers and nurses are enthusiastic, treat people with dignity and respect and say they feel well supported by senior staff. All employees attend training relevant to their roles and say it helps them to support people appropriately. The Responsible Individual (RI) regularly makes herself available to people, relatives, and staff members. Prompt referrals are made to healthcare professionals where necessary.

People can choose where to spend their time, be it in their own rooms or with others in a range of communal areas. During the pandemic, people have maintained contact with family members when they were not able to visit by the use of online video calls. Relatives say the home is “*exceptional*”, “*welcoming*” and “*wonderful*.”

Well-being

The staff team listen to people's opinions about their care and support and are aware of the importance of each person's well-being. People's personal plans contain information about individual preferences, family and friends who are important to the person, together with a pen picture of their life. Some relatives say they are consulted about their family member's support arrangements and are invited to take part in reviewing their care plans. One person told us, *"They do ask but I trust them to keep on top of things."* However, we noted that care records do not evidence that people and/or their representatives are involved in the process. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The manager gives people a copy of the service user guide when they arrive at the home; this provides details of the complaints process should they need to use it. People and relatives say they are confident to raise anything they want to discuss with the manager and feel confident they would listen to them if they did. One relative said, *"We talk to the manager when we need to, and she always listens to us."* Another relative said, *"Nothing to complain about, it's all absolutely wonderful here. All the staff are so welcoming."*

Care workers encourage people to make choices and decisions about how they spend their time: there are two activity co-ordinators, who plan and lead a range of activities each week. One person told us, *"Oh, we do all sorts here. Never a dull moment."* This means people do the things that make them happy. There is a varied menu available, and people say they like the food on offer each day and say there are always alternatives if they change their minds. One person said, *"Meals are very nice. I think the cook is very good."*

The manager provides the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it – there are people in the home who are Welsh speakers and half of the large staff team also speak Welsh. The manager told us that documentation is available in Welsh if required.

The manager considers a range of information to ensure they can meet people's needs before admission to the home. This includes obtaining information from external healthcare professionals such as social workers, previous placements and hospital discharge documents. From this, senior staff develop care records to describe people's support requirements, including clear risk assessments to maintain people's independence as much as possible. Care records are detailed, with all relevant nursing and support monitoring and assessment documents in place – this includes pressure area prevention charts and Moving and Handling assessments. Risk Assessments for the safe use of bed rails are reviewed monthly to keep people as safe as possible. Care records include guidance for the staff team on all aspects of the person's support needs – including nutrition, communication, pain, oral hygiene, and nutrition and we note that people receive support as described in their care plans. Monitoring charts to ensure people are turned in bed to stay comfortable are filled in promptly. There is good sharing of communication within the team and senior staff make prompt referrals to healthcare professionals when necessary.

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 a range of indoor, individualised activities arranged throughout the period. A relative told us, *"We had good contact with the home throughout. It was easy in the end."*

As far as possible, people are safe and protected from abuse. Care workers have been through the provider's rigorous recruitment process. All employees can access policies and procedures to understand their responsibility to protect vulnerable people. They have regular safeguarding training updates and tell us senior staff members support them well and are always available for advice if necessary.

The home has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers can 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 personal protective equipment (PPE) by all care workers.

Environment

Ty Mair (WAM Care Homes Ltd) is a large building. It is warm and clean, and people say they feel comfortable and happy. Bedrooms are spacious and personalised to reflect the

occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture. Facilities and equipment promote each person's independence as much as possible: the corridors throughout the premises help people with reduced mobility and accommodate the equipment people regularly use, such as hoists and standing aids. New flooring has been laid where needed, together with improved lighting in one area of the home, and the décor has been refreshed throughout and refurbished with new furniture and pictures. Externally, there is a patio area for people to socialise in warm weather.

The environment is safe. Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002 and there are clear instructions displayed in the home on what to do in the event of a fire.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry. Care records, employee personnel records and Deprivation of Liberty Safeguards (DoLS) records are securely stored in a locked office and only available to care workers who are authorised to view them.

Leadership and Management

Overall, the senior management team has a clear vision of the support they provide, and a healthy regard to people receiving support. The manager and deputy have regular contact with peoples' family members and healthcare professionals involved in their care. People

know how to make a complaint if they need to and are confident the RI and manager would listen to them if they did. People and their relatives may complete surveys to ask for their opinions on the quality of support they receive. Employees may discuss any issues they wish to raise in three-monthly confidential supervision meetings. The RI talks to people and relatives and is looking at ways to improve people's lives but this information is not recorded in enough detail in the six-monthly quality of care report. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. The staff team ensure they protect all private and personal information. The home's safeguarding policy and procedure is in line with current legislation and local safeguarding procedures. Senior staff ensure all care records clearly state any risks to people's well-being and detailed risk management plans help to keep people safe and as independent as possible. 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 or RI but would contact external agencies such as the local safeguarding office if they thought they needed to.

The provider ensures there are knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work: these include reference checks and Disclosure and Barring Service (DBS) checks. The staff induction programme links to individual learning outcomes. Care workers undertake training relevant to the people they support, but there is no easy means of evidencing all staff members are up to date. There is good staff retention, so they know people in the home well.

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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16	People and/or their representatives will be invited to be involved in their care plan reviews.	New
80	RI is looking at issues to improve people's lives - talking to people and monitoring the environment etc - but this information is not being recorded in these reports.	New

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