



Inspection Report on

Tyn Y Coed Residential Home

**Big House
Front Street
Milford Haven
SA73 1JT**

Date Inspection Completed

26/10/2023

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About Tyn Y Coed Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Tyn Y Coed Care Limited
Registered places	9
Language of the service	English
Previous Care Inspectorate Wales inspection	[Manual Insert] 19 May 2022
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People and their representatives are happy with the care and support they receive at Ty'n y Coed. Person centred care is provided by caring and friendly staff and people are empowered and enabled to be as independent as possible. Individuals have choice and control over their day to day lives and decisions made are inclusive of people and their representatives.

Staff feel supported by the manager. Effective recruitment systems are in place and staff receive the required training to undertake their role. Supervision is provided regularly, and staff are confident any issues raised will be addressed appropriately.

The Responsible Individual has effective oversight of the service and is visible within the home.

The environment is safe and well maintained. The home is clean and comfortable and there are spacious outdoor areas.

Well-being

People are respected and have control over their day to day lives. They are supported to make decisions about things that affect them. They choose how to spend their time and do things that matter to them as much as possible and in line with their personal plans. There are communal areas, a large outdoor space and people can undertake trips and activities that interest them in the local community. Opportunities are provided for people to undertake training and education which may lead to part time employment. People who are unable to communicate verbally are provided with alternative opportunities to ensure their voices are heard. Care staff know people well and are able to interpret their body language and facial expressions to anticipate their needs and wishes.

People's physical and emotional health is promoted. Personal plans evidence that health and social care professionals are consulted routinely and as required to ensure people's needs are met. Plans are reviewed regularly and as necessary to ensure they remain relevant. People and their representatives are involved in this process to ensure their views are considered. Medication is administered and managed safely by trained staff. Audits are undertaken by senior staff to ensure any gaps in medication records are identified and addressed appropriately and in a timely manner.

The service keeps people safe and protected from harm and abuse. Staff spoken with understand their duties and responsibilities if they have any concerns. They have confidence that managers will take the necessary action as and when required in line with statutory duties. The building and grounds are secure and visitors are required to ring a bell to be allowed access to the grounds. Health and safety records show the building and its contents are regularly checked and serviced to ensure the safety of people visiting, working and living at the service.

Individuals are supported to maintain personal relationships with family and friends and some people are able to stay overnight with their families. Independence is encouraged and people are enabled to do as much as possible for themselves. Bedrooms are decorated to personal taste and preference and people can choose their own furniture and soft furnishings.

Care and Support

People receive person centred care from caring and knowledgeable staff in a relaxed environment. People are respected as individuals and are supported to do what matters to them. We saw natural and positive interactions between people and staff. People's body language and facial expressions showed they were happy and at ease and had developed trusting relationships with staff. One staff member said, *"The guys here are the best bit, I love working with each and every one, they are all characters"*.

Care staff use a variety of communication methods with people who are unable to verbalise their views and wishes such as Talking mats, pictures and objects. A staff member told us, *"You don't have to speak, he'll take your hand and show you what he wants"*. One person can sign and has been helping staff to learn sign language. Formal training for British Sign Language (BSL) is also being arranged. Meaningful activities are organised according to people's interest and preferences and people choose what they want to do. During the inspection a group of people went to visit a pumpkin farm whilst others chose to stay at Ty'n y Coed spending time how they wanted.

Personal plans are detailed, up to date and created in collaboration with individuals, their representatives and health care professionals. An easy read summary section shows the key aspects of support needs that are important for staff to be aware of, including communication and behavioural needs. Individuals' desired outcomes are recorded and regularly reviewed to monitor progress and what support is required to achieve each outcome. Records show reviews of personal plans are undertaken in a timely manner and include the person and their representative. A family member told us, *"They always involve me in decision making"*.

Records are very person centred and demonstrate that people have choice and control over the care and support they receive. We saw photos of individuals enjoying a variety of activities both at Ty'n y Coed and in the community. A professional told us, *"They are supported to do what they're interested in"*.

Well established protocols and risk assessments ensure people are protected and kept as safe as possible whilst their freedom is not restricted unnecessarily.

Environment

The home is clean and the building and grounds are well maintained. The environment enables people to move around freely and safely both indoors and within the garden and outside space. A locked gate at the entrance ensures people are safe and cannot wander onto the road outside whilst allowing the freedom to spend time outside. The outside area has recently been tarmacked. The garden is extensive and there is also a large summerhouse and patio area. People also enjoy visiting the 'tuck shop' to purchase snacks and drinks. During the inspection people were spending time in their rooms, in communal areas, the office and outside.

Inside, communal areas are comfortable and free from clutter, minimising the risk of trips/falls. People are encouraged to decorate and furnish their rooms as they want and one person was keen to show us their new bedroom furniture that they had chosen recently. Care staff encourage and support people to assist in cleaning of their rooms and communal areas. Standards of hygiene at the service are good and Infection Prevention & Control (IPC) policies and procedures are followed.

Regular Health and Safety audits of the property and its contents are completed to ensure people working, living, and visiting the home are kept safe. Any repairs required are reported by staff on the digital system and signed off by a manager when completed. Service certificates for gas, electricity and water testing are up to date. The testing of fire safety equipment is also up-to-date and fire drills are undertaken regularly. Personal Emergency Evacuation Plans are in place for everyone living at the service

Leadership and Management

The RI and manager have good oversight of the service and work closely together with at least one of them always being present at the service. Staff describe the manager as approachable and “*massively supportive*”. The staff team are encouraged to be supportive of each other and one staff member said, “*It’s a great place to work, we all work as a team, it’s getting better*”. The manager is proactive in addressing any issues that are raised by people and staff. Family members and professionals spoken with are complimentary of staff and management and comments included, “*I have nothing negative to say*”, “*The manager is amazing, so caring*”.

There is an open door policy in the office and during the inspection individuals and staff members called in. Some people living at the service enjoy a social visit to the office and regularly spend time there. One person spontaneously offered and made a cuppa for staff during the inspection demonstrating the enabling approach management foster.

There are robust recruitment systems in place and personnel files hold the required information to ensure that staff are of good character and hold the necessary skills and qualifications to undertake their role. Regular one to one supervision provides staff with an opportunity to reflect on their practice and identify any areas for training or development.

Staff receive mandatory and additional specialised training according to the specific needs of the individuals they support such as British Sign Language (BSL) and Buccal training for administering medication to people who have seizures. Records confirm that staff are up to date with the majority of their training.

Key documents and policies we looked at are up to date, reviewed regularly and written in line with current legislation. The RI undertakes the required quarterly visits to the service and the six monthly reports evidence that they effectively audit, monitor and review the quality of the care and support that is provided. Areas to improve are identified and acted upon and areas that are working well are recognised and shared with staff during regular team meetings. One representative told us, “*There is a good management regime in place, extremely good*”.

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
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