



## Inspection Report on

**Awel y Mor Care Centre**

**Awel Y Mor Care Centre  
Brynafon Road Gorseinon  
Swansea  
SA4 4YF**

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

**This report is also available in Welsh**

**Date Inspection Completed**

**15<sup>th</sup> March 2022**

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## About Awel y Mor Care Centre

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Barchester Healthcare Homes Limited
Registered places	56
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes. 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

People living in the service told us they are very well supported, happy and settled. We saw good examples of how the service promotes rehabilitation and inclusion. Relatives we spoke to also spoke highly of the care and support provided. External professionals told us communication is very good both with and from the service. Care workers and nurses told us they receive a high level of consistent support from managers who they value and respect. Care planning processes are thorough and detailed. There are good staffing levels across different disciplines in the service that conforms to the statement of purpose (SOP). There is a competent and well trained workforce in the service. There are robust quality assurance processes for oversight of the service provision. There is a dedicated management team whose aim is to provide the best possible care and outcomes for people. People have access to a wide range of therapeutic and inclusive activities. The service promotes a friendly and relaxed environment both for people and staff. People told us the variety and choice of food is very good.

The accommodation is well maintained and presented to a high standard and further upgrades are planned. People have access to a range of therapeutic communal areas such as a gym, sensory room, dining areas and lounges. There are well-kept grounds that people can safely access. Bedrooms are personalised to the taste of the individual. We have requested the provider takes action to replace the existing gas water boilers to ensure they operate safely. There are robust infection control measures and the building is clean and well-ordered throughout.

### Well-being

Practices and processes in the service support people to maximise their physical and emotional well-being. The whole service has a strong emphasis on rehabilitation and progression. Staff working in the service are committed and motivated to provide good outcomes for people and a high quality of care and support. People and relatives informed us they are extremely happy with the support provided and caring approach of staff. Relatives informed us communication is very good with and from the service. We noted extremely positive interactions between staff and people throughout the inspection. Policies and procedures provide clear guidance for staff to understand their role and how they should provide care and support. The current SOP is consistent with the service provided. We spoke to three visiting professionals all of whom were highly complementary about the care and support provided. One told us *“they provide me with consistent and clear communication and always strive to achieve the best they can for their residents”*. There are good processes in place for assessing, monitoring and reviewing the care and support needs of people. Care workers receive both core and specialist training. Care workers receive regular planned supervision in addition to accessing support and advice when necessary. People have access to a wide range of structured and planned activities in the home. People are consulted about their preferences, choices and support needs.

People are protected from abuse and neglect as care workers, nurses and managers understand their safeguarding responsibilities and are aware of how to raise concerns should they need to. All care workers spoken with showed good knowledge and awareness of safeguarding procedures. All staff are following current Public Health Wales (PHW) guidance and using the correct personal protective equipment (PPE). There are very robust infection control procedures in place to ensure people are as safe as possible.

There are robust oversight and governance arrangements within the service. The management team and responsible individual (RI) are accessible and supportive. There are very robust quality assurance processes including regular external scrutiny by the RI and a regional manager. There are planned staff and resident meetings taking place with clearly documented actions as appropriate. The standard of accommodation is very high with comfortable, clean and personalised en-suite bedrooms. The provider is investing in the service and has plans to complete further refurbishment and works in the service. People have the opportunity to access well maintained and pleasant external grounds. All entrances and exits to the service are safe and secure. People spoke highly of the standard and choice of food provided and different dietary needs are catered for. The service aligns with the ‘Active Offer’ in relation to the Welsh language.

## Care and Support

People are happy, settled and have their dignity and independence respected and promoted. We spoke to people using the service and received feedback from four relatives. A person told us *“would not change anything really happy and settled here”*. A relative stated *“really happy with the standard of care and support provided”* and another *“really high standard of care and support”*. Positive and respectful interactions were observed between care workers and people throughout the inspection. We contacted three external professionals, one of whom told us *“I am pleased to say that I always feel my clients are in a safe pair of hands with the team at Awel Y Mor”*. We received feedback questionnaires from both relatives and staff which are extremely positive and complimentary about the standard of care and support provided.

A knowledgeable and committed staff team meet people's care and support needs extremely well. Staffing levels are consistent with the SOP and include a manager registered with Social Care Wales (SCW), dedicated deputy manager and nurse led teams. The service has worked hard to maintain staffing levels despite a difficult and challenging period due to the pandemic. Care workers and a nurse spoken with show good knowledge of their roles, many working in the service for years. A care worker told us *“we all work well together as a team, every department works so hard to provide quality care”*. Care workers confirm they receive appropriate training, currently mainly online due to the pandemic. Care staff have received specialist training in areas such as skin integrity. People have access to a wide range of stimulating and enjoyable planned activities. There are two dedicated activity coordinators working in the home. Also a sensory activities coordinator and a physiotherapist. The service has a strong emphasis on rehabilitation. We saw people accessing a gym and also preparing meals with staff support.

People's care and support needs are clearly documented in a detailed, thorough and regularly reviewed support plan. Managers, care workers and nurses have good knowledge of people's on-going care needs. A sample of personal plans viewed contain personalised information regarding likes, dislikes and promotion of independence. We viewed a sample of 'getting to know me' booklets, all contained detailed person centred information such as what is important to me etc. There is comprehensive information regarding health care needs such as diabetes and pressure area care and specific risk assessments. There are thorough and robust pre-admission procedures including assessment, transfer and new person's checklists. There are regular resident meetings and the service has appointed a 'resident ambassador' to promote positive communication.

Systems to manage medication safely are robust. There are safe arrangements for storing medication which is accessible only to authorised staff. Temperature of the medication room and fridge are documented on a daily basis. There are clear medication management systems in place including a medication policy and regular audits. All staff administering medication are trained and managers have good oversight of this. Medication Administration Records (MAR) are completed appropriately

## Environment

People are cared for in a clean, homely, and secure environment. There is good accessibility around the home. We saw people participating in a wide variety of areas including a specialist gym, sensory room and communal kitchen areas with adapted facilities. There are wide corridors and large communal areas making it easier for people who use wheelchairs to navigate. However, we noted portable electric radiators were placed in some corridors. We were informed by the manager that this was due to the hot water gas boilers (two) being condemned some months ago. The service was awaiting agreement of quotes to replace both boilers. We were assured there is no impact on people currently due to regular monitoring of building and water temperatures. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

People's bedrooms are nicely decorated, clean and personalised to the taste of the individual. People enjoy living in the home and spoke very positively about their bedrooms. We saw external exit and entry doors to the home are safe and secure. The home is well maintained and decorated. We were informed work has been completed to refurbish three shower rooms on the ground floor. There are future plans to change floor coverings, update a bathroom and extend a lounge area, also office location changes. There are pleasant accessible outside areas and a new automatic door has been fitted to allow easier access to a rear garden area with planned future updates.

The environment is safe and there are robust processes in place to ensure checks are completed and documented. Safety certificates for gas installations, lift operation, fire alarms, hoists and slings, portable appliance tests (PAT) are in place. We saw a detailed comprehensive file containing oversight of all maintenance, accidents, infection control and health & safety in the home. We saw cleaning products are stored safely, appropriately and according to control of substances harmful to health regulations (COSHH). There is a large dedicated laundry room and soiled items are separated from clean observing good infection control. Fire alarm checks are completed regularly and documented accordingly.

There are robust infection control measures in place and we were asked to produce evidence of a negative Covid 19 test on arrival. There is a good supply of PPE and care workers receive regular updates and training regarding Covid 19 and infection control. There are enhanced procedures in relation to deep cleaning in place to help minimise the impact of Covid 19. The service has a system for managing and risk assessing visitors. We viewed the kitchen and food preparation areas and were informed there is a current food hygiene rating of five in place. This means there are high standards in place regarding food storage, handling and cleanliness. The kitchen staff have a good knowledge of people's dietary needs including specialist requirements such as diabetes and swallowing difficulties. All people spoken with informed us they enjoy the variety and choice of meals provided.

## Leadership and Management

There are good levels of competent well trained staff working in the home. Staff records are kept in a locked filing cabinet in an office. Records indicate that new care staff receive a thorough induction aligned with the All Wales Induction Framework (AWIF). Staff files contain the appropriate recruitment information and evidence of checks. We spoke with three care workers and a nurse. They informed us they feel extremely well supported by the management team and receive regular formal and informal supervision. One care worker told us *“top marks really good, managers’ sort out issues immediately and well”* and another *“manager and deputy have been great and really supportive. Really reassuring and we all felt really well supported. They care about the staff”*. We also saw a staff supervision log that documents nearly all care workers and nurses are receiving regular formal supervision. Care workers receive both core and specialist training that aligns with the SOP. Care workers have either completed or are working towards a Qualification and Credit Framework (QCF) in care at the appropriate level. The service provided aligns with expectations regarding the Welsh language as defined by the ‘Active Offer’. Signage around the home is bilingual and there are a number of staff who speak Welsh in addition to regular Welsh language courses. Welsh language speaking staff wear lanyards to identify them. All documentation can also be provided in Welsh.

There is very good oversight and governance of the service by the management team. Policies and procedures are detailed and robust covering areas such as safeguarding, complaints and infection control. All policies viewed are thorough and reviewed regularly. The provider of the service completes regular checks to help ensure people are happy with the quality of care and support. The service has very robust internal and external quality assurance procedures and processes to ensure the service provided is of a high quality and safe. The current SOP accurately describes the service provided. There are regular planned resident and staff meetings taking place in addition to daily handover nurse and management meetings. We saw written reports that confirm this and the manager informed us the RI and regional manager are extremely supportive and in regular contact. We read reports such as quality of care reviews that cover areas such as consultation with people, quality improvement, safeguarding and accommodation with clear related actions.

### 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
44	One boiler was out of service at time of the inspection, and one boiler was in use.	New



**Date Published** 09/05/2022