

# Inspection Report on

Llys y Tywysog Care Home

Llys-y-tywysog Clos Pengelli Grovesend Swansea SA4 4JW

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

22<sup>ND</sup> September 2021



## **About Llys y Tywysog Care Home**

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Barchester Healthcare Homes Limited
Registered places	54
Language of the service	Both
Previous Care Inspectorate Wales inspection	17.07.2019
Does this service provide the Welsh Language active offer?	Yes

#### Summary

People who live in the home and their relatives told us they are very happy with the care and support provided. A visiting professional told us the standard of care provided at the home is high and any health concerns are reported promptly. Care workers told us they receive good support from the management team. Care planning processes are robust and thorough. There are appropriate staffing levels that correspond with the statement of purpose (SOP) and are kept under review. A competent and well trained team of care workers work in the home. There are robust quality assurance processes for oversight of the service provided and a dedicated management team.

The accommodation is well maintained and presented to a high standard and further upgrades are planned. There are well-kept grounds that people can safely access. Bedrooms are personalised to the taste of the individual. There are a wide range of beneficial and rewarding organised activities people can participate in. People told us the variety and choice of food is good.

People are safe and staff understand the importance of safeguarding and reporting any concerns. The building is secure with all entrances and exits locked and alarmed. There are good infection control procedures in place and the home is clean and well-ordered throughout. The service aligns with the 'Active Offer' and the Welsh language.

#### Well-being

Practices and processes in the service support people to maximise their physical and emotional well-being. Staff are dedicated and committed about the work they do. People and relatives informed us they are extremely happy with the support provided and caring approach of staff. Relatives informed us communication is good with and from the service. We noted very 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. A visiting professional told us the standard and quality of care provided is very good and any health concerns are reported quickly. 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.

There are good 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 good; comfortable, clean and bedrooms are personalised. There are plans to refurbish some of the en-suite bathrooms, kitchen and upgrade some internal and external furniture. 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.

People are protected from abuse and neglect as care workers understand their safeguarding responsibilities and are aware of how to raise concerns should they need to. All care workers spoken to 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 good infection control procedures in place to ensure people are as safe as possible.

#### **Care and Support**

People are happy and have their dignity and independence respected and promoted at Llys Y Tywysog. We spoke to three people using the service and received feedback from four relatives. A person told us "love it here...care staff are very kind and lovely". A relative stated "care has consistently been proactive, personal and loving". Positive and respectful interactions were observed between care staff and people throughout the inspection. We spoke to two professionals one of whom told us "no concerns regarding the care provided at the home...all issues are reported promptly". A knowledgeable and committed staff team meet people's care and support needs well. Staffing levels are consistent with the SOP and include a manager registered with Social Care Wales (SCW) and dedicated deputy manager. Care workers spoken with show good knowledge of their roles, many working in the service for a number of years. A care worker told us "good support from manager and deputy... I get regular supervision, open door policy and a good induction". Another "I love it! Good culture here. Nice atmosphere working here". Care workers confirm they receive appropriate training, currently mainly online due to the pandemic. Nearly all care staff have received specialist training in dementia. People have access to a good range of stimulating and enjoyable planned activities. There are two dedicated activity coordinators working in the home.

People's care and support needs are clearly documented in a detailed and regularly reviewed support plan. Managers and care staff have good knowledge of people's ongoing care needs. Personal plans viewed contain personalised information regarding likes, dislikes and promotion of independence when receiving personal care. 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.

Systems to manage medication safely are robust. There are safe arrangements for storing locked medication cabinets in a secure area, 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. People's bedrooms are nicely decorated, clean and personalised to the taste of the individual. People like living in the home and referred positively to 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 there is a programme of refurbishment planned for some of the en-suite bathrooms and kitchen. Also replacement of some furniture and change of use of an existing lounge to a cinema room is planned following feedback from people. We saw people enjoying a communal lounge area with access to an external garden.

There are good infection control measures in place and we were asked to produce evidence of a negative Covid 19 test on arrival. Care workers informed us there is a good supply of PPE and they receive regular updates and training regarding Covid 19 and infection control. The service has a system for managing and risk assessing both internal and external visits. 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 inform us they enjoy the variety and choice of meals. We viewed the well maintained grounds. We were informed people are involved in activities outside such as gardening and growing vegetables. There are plans to provide a new external shelter and garden furniture.

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 that cleaning products are stored safely, appropriately and according to control of substances harmful to health regulations (COSHH). There is a dedicated laundry room and soiled items are separated from clean observing good infection control. Fire alarm checks are completed regularly and documented accordingly.

### **Leadership and Management**

There is 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 service 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.

There are good levels of competent well trained staff working in the home. This includes care staff, domestic staff, activities coordinators and kitchen staff. Care staff levels will need to be kept under review as the occupancy increases. 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 four care workers. They informed us they feel well supported by the management team and receive regular formal and informal supervision. One care worker told us "there is good management support and I feel listened to". We also saw an overall supervision log that documents most care workers 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. All documentation can also be provided in Welsh.

Areas for improvement and action at, or since, the previous i	inspection. Not Achieved
None	
Annon the management of the continue of	
Areas where priority action is required	
None	
Areas where improvement is required	

None

Areas for improvement and action at, or since, the previous inspection. Achieved

#### **Date Published** 05/11/2021