



# Inspection Report on

**Ty Gurnos Newydd Residential Home**

**Gurnos Road  
Merthyr Tydfil  
CF47 9PT**

**Date Inspection Completed**

24/01/2024

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## About Ty Gurnos Newydd Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Merthyr Tydfil County Borough Council Adults and Children's Services
Registered places	16
Language of the service	English
Previous Care Inspectorate Wales inspection	19 January 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People receive very good care and support and are treated with kindness and respect. They get the right care at the right time to help them stay as healthy as possible. Ty Gurnos Newydd is in an extremely well-presented environment which supports people's well-being. Systems are in place to help protect people from abuse and neglect. Detailed care documentation is in place to support staff to meet people's needs. The service offers a balanced diet and varied menu. Infection control measures help reduce the risk of transmission of potential sources of infection. Systems are in place to promote the safe management and storage of medication. The service has a strong management team. The recruitment and training of staff is safe and effective, with an experienced and stable team in place. The service provides good information to the public.

## Well-being

People are treated with kindness and respect at Ty Gurnos Newydd. Care staff are patient and caring in their approach. People and their families praise staff and tell us their views and wishes are listened to and respected. Care and support is very person-centred, with people encouraged to take part in activities and identify social opportunities they would like to access. The service arranges an activity coordinator, who engage people in a range of activities. This is a very positive resource which enhances and promotes people's well-being and is to be commended. The service has very good relationships with relatives, who keep them informed, updated, and involved in their relatives' care. Friends and relatives can visit when they wish.

People get the right care at the right time to help them stay as healthy as possible. Any health issues are appropriately referred to the relevant professionals, and subsequent guidance is acted upon. Personal plans are detailed, person-centred, and reviewed regularly. Meal options are balanced, and portions appear of a suitable quantity. People receive their prescribed medication as directed. There are sufficient infection control measures in place which are in line with the infection control policy.

People live in an extremely well-presented environment which supports their well-being. Ty Gurnos Newydd is a purpose-built home for older people and their associated needs, including people experiencing dementia. Bedrooms are comfortable and personalised, with sufficient communal areas and access to an outdoor area. The home is clean, spacious, and well-maintained. Suitable mobility aids are in place to help people where needed. The home is close to local facilities and amenities, which people use.

Systems are in place to help protect people from abuse and neglect. Policies and procedures support good practice and can assist staff to report a safeguarding concern. Care staff feel confident if they raised an issue with the manager, it would be responded to appropriately. Care staff understand their responsibilities and how they should respond to potential safeguarding issues. Pre-recruitment checks are in place and regular supervision and training supports continued development. Incidents and accidents are logged, with appropriate actions taken by the service in response. Risks to people are assessed and management plans for these are in place.

## Care and Support

People receive very good care and support. Interactions between care staff and people are patient and kind. People appear well cared for and well-settled in their environment. People told us *“I love living here”* and *“I feel I’m very well looked after”*. People’s families told us *“everyone’s so friendly”*, *“the service are brilliant”*, and *“the best thing we did was to move them here”*.

People have detailed care documentation to support staff to meet their needs. Personal plans are very person centred and appropriately detailed, with relevant up-to-date risk assessments in place. Plans are reviewed regularly and involve people or their representatives. This is an improvement acted upon since the last inspection. Daily recordings and supplementary monitoring charts are completed, giving important information about people’s progress, and identifying changes in care needs. The new format of recording form allows key information to be located quickly. Appropriate and timely referrals to health professionals are made, with recommendations and direction acted upon by the service and incorporated into personal plans. Deprivation of Liberty Safeguard (DoLS) applications are made where people lack mental capacity to make decisions about their care and accommodation and need to be deprived of their liberty to keep them safe.

The service offers a balanced diet and varied menu. A variety of options are on the menu, with people offered alternatives if needed. People compliment the quality of the food. People have drinks to help keep them hydrated throughout the day and are supported at mealtimes when required. Dietary needs and preferences are understood and available to kitchen staff, who told us about some people’s specific needs. This information corresponded with information in people’s personal plans. Kitchen staff take robust measures to ensure they manage food allergies.

Infection control measures used by the service help reduce the risk of transmission of potential sources of infection. Staff have access to a supply of appropriate PPE, which are used appropriately. An infection control policy is in place which staff are aware of and understand their responsibilities around this. Domestic staff complete daily cleaning schedules. Laundry routines help reduce the risk of infection.

Systems are in place to promote the safe management and storage of medication. Medication is stored securely and can only be accessed by authorised care staff. Trained care staff accurately administer medication in line with the prescriber’s directions. The service has an up-to-date medication policy. Medication is audited regularly.

## Environment

People's wellbeing is enhanced by living in an exceptionally well-presented and pleasant environment which is safe and suitable for their needs. Ty Gurnos Newydd is a purpose-built home, located in the Gurnos area of Merthyr Tydfil. The home is clean, tidy, and free from malodours. The home is secure from unauthorised access, with visitors required to sign before entry and upon leaving. Bedrooms are very spacious and have ensuite facilities. Rooms are individualised to people's tastes and contain photos, decorations, and keepsakes, which make them as homely as possible. There is a large lounge, a dining room, and a room to undertake activities, which also contains games and a small bar area. An adjoining unit is not currently in use nor accessible to people. Sufficient toilet and bathing facilities are available. Communal areas are tidy and uncluttered. Significant refurbishments have been made to many of the communal areas. Considerable thought, care and attention has gone into this. People's views and wishes have been sought when undertaking refurbishments. The décor and refurbishments significantly enhance the home and give people an outstanding environment to live in. The kitchen facilities are appropriate for the home and achieved a Food Hygiene Rating of 4, which means 'good'. A garden area is at the rear of the service with seating available for people to use. The manager told us of plans to relandscape the garden.

The environment is safe. Substances hazardous to health are locked in cupboards, in line with Control of Substances Hazardous to Health (COSHH) regulations. There are window restrictors in all bedrooms and bathrooms viewed. Fire exits are clear of clutter and obstructions, with no obvious trip hazards more generally. Daily cleaning and laundry duties are being maintained, with the home appearing clean in all areas viewed. There is a maintenance person in place. Maintenance records confirm the routine testing of utilities. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal emergency evacuation plans are in place, with key information about people's needs easily accessible in the event of an emergency.

## Leadership and Management

The service has a strong management team. A strengths-based, person-centred culture of support is promoted at the service. Managers aim for the service to be an active part of its local community. Governance, auditing, and quality assurance arrangements are in place to support the running of the service. These help to self-evaluate and identify where improvements are needed. Where issues are identified, action is taken to address these. The Responsible Individual (RI) has good oversight of the service. The RI undertakes the legally required three-monthly service visits and six-monthly quality of care reviews, and works well with the manager more generally. The service is open and transparent, making the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences at the service. Policies and procedures, such as for complaints, medication, whistleblowing, and safeguarding, are in place. They give guidance to care staff, for example telling them what to do if they think someone is at risk of harm. The service takes very good measures to gather the views of people and care staff, for example through meetings or questionnaires. Procedures are in place to deal with complaints.

The recruitment and training of staff is safe and effective. Staff files show the correct recruitment arrangements are in place and contain all legally required information, such as up-to-date Disclosure and Barring Service checks and proof of identity. Care staff start work once pre-employment checks are completed. New care staff complete an induction programme. Care staff are registered with the workforce regulator, Social Care Wales. Training records show care staff have up to date training in core areas of care. Staff told us they feel well trained and can perform their duties safely and effectively.

An experienced and stable staff team is in place. Many care staff have been in post for some considerable time with low staff turnover, which helps promote continuity of care. Care staff have regular supervision to reflect on their performance and professional development, identify support they might require, and discuss any issues. The manager told us staffing levels are worked out based on people's level of need and the number of people living at the service. The rota showed target staffing levels are being met and was reflective of staffing on the day. The manager and care staff told us they feel there are enough staff working at the service. We saw the service appeared well-staffed.

The service provides good information to the public. The Statement of Purpose sets out the service's aims, values, and support provided. An informative and well-presented written guide contains practical information about the home, the care provided, and how to make a complaint.

### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
21	Risk assessments have not been completed in accordance with personal plans.	Achieved
16	Reviews of personal plans do not include a review of the extent to which the individual has been able to achieve their personal outcomes.	Achieved
16	There is not any evidence of the service provider involving the individual or representatives in reviews of personal plans.	Achieved
57	Doors to secure areas are not always locked, and toiletries for people are not stored separately.	Achieved

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