



Inspection Report on

Ty Waunarlwydd

**Ty Waunarlwydd Home For The Elderly
Swansea Road
Waunarlwydd
Swansea
SA5 4SN**

Date Inspection Completed

11/03/2022 & 21/04/2022

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About Ty Waunarlwydd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	City and County of Swansea Adults and Children's Services
Registered places	40
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

Ty Waunarlwydd is a care service in the village of Waunarlwydd on the outskirts of Swansea. They provide residential care to people predominantly living with dementia. They are assisting the Local Health Board in providing short-term care to people discharged from hospital awaiting to go home or to more suitable accommodation.

People benefit from receiving consistently good care and support from a highly committed experienced and professional team of staff. The service is well managed and supported by good governance arrangements. Communication is strong and care workers are well supported by senior staff. Supervision and appraisal arrangements need improving. Staff recruitment, good training and access to clear up to date corporate policies supports safe practice. This also ensures staff are well-equipped to carry out their roles and responsibilities.

People receive support and encouragement to maintain and regain independence and make daily choices. Staff treat people with dignity and kindness and relatives feel assured care provided is of a good standard. People are happy living in an environment suitable to their individual circumstances. The service maintains very good communication with professionals, people and relatives. Improvements are needed in the management of medication to ensure people remain safe. Personal plans provide clear information and direct care workers on how best to provide support to individuals.

Well-being

People are very happy living in a service that actively supports their well-being. The environment caters well for people living with dementia. The building is nicely decorated, homely and well-maintained. The service promotes a community feel with smaller individual units. This makes it easier for people to get to know each other. Communal and private areas are very clean and free from clutter. People have good communal and outdoor space which promotes their independence and their re-enablement back into the community. People enjoy spending time in the internal communal areas, personalised bedrooms and the pleasant secure outside gardens.

Stringent measures help protect people from harm and abuse. The service is secure and only authorised individuals are allowed into the building. The service undertakes appropriate security and fire safety checks to make sure people remain as safe as possible. Good systems of recruitment ensure staff working at the service are suitably skilled and of good character. Clear policies and procedures supported by training ensure staff maintain good practice. Staff are fully aware of their safeguarding responsibilities and how to report any concerns. Maintenance routines and detailed risk assessments ensure the service is safe and any care or activities undertaken are as safe as they can be. Any incidents, accidents or concerns are notified to the relevant bodies and the appropriate action taken. Infection control measures follow current Welsh Government guidelines.

People's physical and emotional health is actively promoted in the service. Care planning documentation is detailed and up to date. Personal plans are of a high quality and centre on the needs of the person. They also provide good guidance to staff. The service maintains good communication with external health and social care professionals in ensuring timely interventions. Improvements are needed in the management of medication to ensure people remain safe. Care workers work well with people ensuring they are involved, stimulated and participating in a range of activities. Daily routines place a focus on healthy lifestyles and diets. Regular contact with relatives and key individuals is actively encouraged and visits are well managed. Language needs are considered and the service promotes the Welsh active offer.

Governance arrangements are strong to ensure people receive a consistently good service. Staff have daily communication and very good support from senior members of the team. Although improvements are needed to ensure staff have regular supervision and an annual appraisal. Staff feel well trained and supported, and evidence supports this. There are good quality assurance processes in place. The Responsible Individual (RI) maintains regular communication with the service and extensive monitoring arrangements are in place.

Care and Support

People are treated with dignity and respect by staff who know them well. There are a high number of staff having worked at the service for a significant period of time. They are very familiar with people's needs and understand their likes and dislikes. This is supported by well documented care planning information, such as one page profiles and life story information. This information is shared with new or agency staff through the induction or handover processes. Care workers naturally engage well with people through conversation and daily activities. We could see stimulation and occupying people's time was a priority. People living with dementia benefit from staff knowledge of their interests and hobbies. One person was seen enjoying playing board games whilst another enjoyed looking through photographs of the local area. Care workers are able to distract or reduce anxieties through sensitive techniques gained through knowing people well. Comments from people include *"I love the staff, they are so kind and considerate"* and *"they really care about us"*. A relative told us how the service had made a huge difference to the life of their family member. Their confidence had increased and their anxiety reduced through more social interaction.

Care planning documentation gives a real sense of the person and reflect the needs of the individual. Initial assessments and personal plans includes input from specialist health and social care professionals, people, and their representatives. There is a clear focus on supporting people to achieve their goals. The service recognises the importance of maximising people's strengths and achieving positive outcomes. Overall, any identified risks have plans in place to minimise risks to self or others. People under Deprivation of Liberty Safeguards (DoLs) have the appropriate and proportionate safeguards in place as agreed by the relevant professionals. We saw the service addresses any health changes in a timely manner. Overall, there are clear protocols around areas such as fluid intake, nutrition and skin integrity. Although we discussed the introduction of a more stringent checklist (Skin Bundle) for people at high risk of developing pressure areas.

Systems for the management of medication need improving. We viewed the medication administration records (MAR's) for five people living at the service. Overall medication records are accurate, although there were some gaps for one individual. In addition, some staff signatures were placed in boxes below where the signature was required thus making records difficult to audit. We also found the reasons for administering "as required" (PRN) medication was not always recorded. There is no evidence of any negative impact on people's wellbeing. The managers will be introducing a more stringent internal auditing systems. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

Environment

The environment promotes people's independence whilst ensuring they are safe and secure. The service is separated into five smaller units that can accommodate eight people who are predominantly living with dementia. All units have good communal and bedroom space for people to use. Each has a kitchen and dining area where people are encouraged to maintain/ regain their independence in preparing meals and drinks. Corridors are wide, airy and nicely decorated to enable people living with dementia and/ or mobility issues to move safely around the service. There is good communal indoor and outdoor space providing areas of both tranquillity and stimulation. Bedrooms are individualised including pictures and personal items to remind people of their friends and family. Some people are living in the service on a short-term basis awaiting for care packages to be arranged. They are assessed and supported in areas such as the kitchen environment to enable them to safely return home.

Health and safety arrangements are good in a service that is being well maintained. There is an electronic door key-pad system throughout to keep people safe. Visiting is actively encouraged and feedback was very positive from visiting relatives. Feedback includes *"it's an excellent service, staff are so kind"* and *"x is a different person, they are so much happier now"*. There are stringent Covid-19 risk assessments in place following Welsh Government guidelines. Care workers are using appropriate personal protective equipment (PPE). There are consistently good maintenance arrangements in place. This includes routine testing of water temperatures, mobility equipment, emergency lighting and fire safety equipment. Utilities such as gas and electricity have the relevant safety certificates in place.

People have personal emergency evacuation plans (PEEP's) in the event of the need to evacuate. Fire drills are undertaken routinely and staff have on-going fire safety training. Cleaning substances hazardous to health are stored appropriately with the relevant risk assessment documentation in place. Regular health and safety audits are carried out by senior staff in the service, the responsible individual as well as the corporate quality assurance team.

Leadership and Management

The service maintains strong governance and quality monitoring arrangements. There is a well-established senior team managing an experienced team of care workers. There is minimal staff turnover, although we were told due to Covid-19 outbreaks maintaining staffing levels has been difficult at times. All staff have worked extremely hard in supporting each other through such times. Senior staff continue to assist care workers in providing direct care and support to people living at the service, this continues. The service has access to in-house agency staff to cover any shortfalls. There are clear corporate policies and procedures to assist staff in their roles. Care workers demonstrate a good understanding of these, including key areas such as safeguarding and whistleblowing. People have access to an up to date statement of purpose and guide to service. These documents are available in both English and Welsh.

The RI completes three monthly visits and six monthly quality of care reviews. They are supported by an internal quality assurance officer. Audits undertaken evidence effective monitoring is ongoing and timely action is taken to address any practice issues. The service addresses any complaints and concerns in a timely manner notifying the relevant authorities or professionals.

There are consistently good recruitment processes in place and the service ensures the professional practice and knowledge of staff is maintained. Recruitment files are in good order and contain the necessary information. Training has continued during the pandemic predominantly through e-learning, in-house training and competency checks. More classroom based training is in the process of being re-introduced. Overall, mandatory training is up to date with arrangements in place to address any shortfalls. There are experienced staff providing expertise, support and training in areas such as manual handling. We saw and staff told us they had the right skills and knowledge to assist people. Comments from staff include *"I feel confident, training and support is very good"* and *"it's a fab place to work, team are very supportive"*.

Care workers are well-supported although processes to ensure regular supervision need to improve. There are daily handover meetings facilitated by senior staff and evidence of team meetings. Staff communication is very good focussing on the needs of people living at the service. The service has been through an extremely difficult period of time due to the impact of Covid-19. Staff are tired but morale is very high, staff said *"we work really hard"* and *"we will get through this"*. Staff have access to wellbeing support at any time via a dedicated support service. Staff supervision and annual appraisals have been affected due to circumstances, but plans are in place to address these shortfalls. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

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
36	Not all staff members received a 3-monthly supervision and an annual appraisal. Ensure all staff receive regular supervision and annual appraisals.	New

58	There were some gaps in Medication Administration Records (MAR) for one individual, reasons for administering PRN (as required) medication were not being consistently recorded on the back of MAR charts for x4 individuals. Management audit systems need to improve in order to identify these shortfalls and ensure staff follow safe systems of work.	New
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