



## Inspection Report on

**Ty Mawr Ltd**

**Ty Mawr Nursing Home  
Caehopkin Abercrave  
Swansea  
SA9 1TP**

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

**This report is also available in Welsh**

## **Date Inspection Completed**

07/02/2023

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## About Ty Mawr Ltd

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	TY Mawr LTD
Registered places	54
Language of the service	Both
Previous Care Inspectorate Wales inspection	<a href="#">[Manual Insert]</a> 13.12.2021
Does this service provide the Welsh Language active offer?	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 Mawr provides care and support with nursing for up to 46 people. Care workers, and staff, know people well, and interactions are relaxed and friendly. Care workers and nurses understand what matters to people and are committed to ensuring they have the best possible experiences. They support people to be as healthy and active as possible. People have opportunities to take part in a range of activities, delivered by two activity coordinators. The home's equipment and facilities are clean and appropriately maintained. There is a strong sense of teamwork amongst staff, who are led by a pro-active, well-respected manager. Care staff receive core and specialist training. Staff meetings and supervision sessions give staff the opportunity to keep up to date with developments in the service. The service needs to keep policies updated and relevant. Pre-employment checks ensure staff are suitable to work with vulnerable people. Staff report feeling happy in their roles. The responsible individual (RI) is actively involved in the home's day-to-day running and has a good oversight to ensure practice remains of a good standard. However, a six-monthly quality assurance report must be completed.

## Well-being

People can express their opinions and know they will be listened to. Personal plans evidence people are involved on an ongoing basis in decisions that affect them and their care. Care and support needs are reviewed on a regular basis and people told us they feel fully involved in their care. The RI speaks with people and their representatives on a regular basis. People told us the food is very good and they can make requests, one person said, *“they got me kippers”*. A relative said that a recent resident/relative meeting had been really positive, and it was *“very informative and we were able to make suggestions”*.

Care documentation within the service is informative and up to date. Care plans are person centred, detailed and clear to follow. Regular reviews are undertaken and there is evidence they are undertaken in consultation with people. Care workers have a very good knowledge of people and are therefore able to notice any changes quickly and respond promptly. People remain as healthy as they can be due to timely referrals to healthcare professionals and effective administration of medication.

The service helps protect people from harm and abuse. If required, extra staff are recruited in advance of new people moving in. This ensures enough staff are available to deliver timely care and support. People are cared for by a safe, skilled workforce as the service recruits and trains staff appropriately. The home’s equipment and facilities are routinely serviced and inspected to ensure they remain safe for use. Policies and procedures promote safe practice. However, some including the safeguarding policy need reviewing to ensure they contain the most up-to-date guidance. Records confirm that staff have completed training in relation to safeguarding vulnerable adults. A relative told us *“I can go to bed at night and not worry about him because he’s fine here”*.

The physical environment supports people’s well-being. The service is a pleasant place to live; bedrooms are nicely decorated and reflect personal tastes. The environment offers people access to a range of communal areas as well as the privacy of their own bedrooms. Some areas of the home are quite dated but there is an ongoing programme of improvement in place to maintain good environmental standards.

## Care and Support

People receive good care and support as and when they require it. We observed care workers to be attentive and supportive to people. The care needs and preferences of each person are clearly documented, and care staff access this information to inform their daily routines. Files contain a social history of each person so care staff can get to know them and their lives before coming to the home. Plans are regularly reviewed to ensure they are up to date and reflect people's current needs.

Overall, there are consistent and appropriate staffing levels in place to meet the care and support needs of people living at the service. There are sufficient staffing levels for each shift, with some staff having worked at the service for a significant period. Care workers respond quickly to any requests of help. The staff are supportive of each other and complimentary of the support the management provide. When talking about the manager a relative said "*she is exceptional, always got time for us*".

There is a varied and regular programme of activities. Daily notes show that people living in the home are given the opportunity to join in meaningful activities both in groups or individually. Life history and social preferences are sought from people or family members so activities can be tailored to the individual. Pictures around the home evidence activities people have taken part in both individually or as a group. People told us "*every few weeks they take me shopping*", "*we have a good variety*" and "*they are introducing new things*".

People experience warmth and kindness. We saw care staff treat people as individuals. They are very attentive and respond to people's different needs with appropriate levels of prompting and support. People look relaxed and comfortable in the presence of staff. Staff speak in a friendly, caring and respectful way and people respond positively. Relatives told us "*they are really good here, can't fault them*" and "*brilliant, such loving caring people*". People living in the home told us "*They do as much as they possibly can for you*", "*I get on well with them, we have a laugh*" and "*they go above and beyond*". We witnessed positive interactions during the inspection and saw care staff supporting people in a dignified manner.

Secure arrangements are in place for storing, ordering, and administering medication which is stored securely. Medication administration record (MAR) charts contain all required information and are completed correctly with signatures when medication has been administered. The service told us it has a good relationship with health professionals and pharmacists. We saw evidence staff receive training on the administration of medication to ensure they remain sufficiently skilled. The completion of routine medication audits ensures practice remains safe and effective.

## Environment

The general environment is warm, welcoming and odour free. People can personalise their room with photos, furnishings and keepsakes, which promotes a feeling of being at home. All areas of the home appear functional and clean, as well as comfortable and homely. The standard of cleanliness and hygiene appears to be good. The kitchen and laundry facilities are suitable for the size of the home. The kitchen has been awarded a 5\* rating which is 'very good' from the Food Standards Agency. Some aspects of the home are quite tired, for example, carpets in some areas. The manager told us there is an ongoing programme of refurbishment. A person living in the home told us "*It's comfortable here*". There is a dedicated maintenance person who addresses issues as they arise.

People benefit from the service's commitment to ensuring safe practice. Substances hazardous to health are stored safely. The maintenance files show that utilities, equipment and fire safety features have regular and up-to-date checks and servicing. Care files and medications are locked away to ensure confidentiality and safety. Every person living at the home has a personal emergency evacuation plan specific to their support needs and staff undertake routine fire drills.

## Leadership and Management

People can access information to help them understand the care, support and opportunities available to them. The statement of purpose and service user guide accurately describe the current arrangements in place. This includes the service's accommodation, referral and admission process, the type of care and support available and ways in which it provides a Welsh language service provision.

The provider supports staff to raise concerns about the service through whistleblowing procedures. A policy is in place and staff are able to access this. There are accessible safeguarding policies and procedures, and the service keeps records of any actions and outcomes. However, the policies viewed require updating to be more individualised to the service. We discussed this with the RI and explained this is an area for improvement and we would expect action to be taken by the next time we inspect. Compliments and thank you cards are evident at the service.

The RI is present at the service on a regular basis and has a good awareness of the ongoing practices and needs of the service. They also complete detailed quarterly records based on the support provided as well as the wider running of the home. However, they have not prepared the six monthly quality care report which was due in December 2022, to assess and review the quality and safety of the service. This is an area for improvement and we expect action to be taken by the next time we inspect.

Appropriately recruited, trained and supported staff care for people living in Ty Mawr. The records we examined show the provider carries out the necessary checks when recruiting staff. Enhanced staff recruitment checks are up to date. A number of staff have worked at the home for several years, which provides continuity of care for people. Care workers receive training to meet the needs of the people they support. New care staff receive an induction in line with Social Care Wales's requirements. Overall, staff say they feel valued and supported and find the management approachable. The manager is well respected by people living and working in the service as well as visitors, with one relative saying "*the manager is brilliant, lovely caring woman*". Staff we spoke with told us "*I do enjoy my job, this is my passion*", "*I enjoy it here*" and "*I wouldn't do anything else*".

### 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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80	The provider has not completed the six monthly quality assurance report as required	New
12	The provider must ensure all policies and procedures are in place, reviewed and relevant.	New



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