



## **Inspection Report on**

**Towyn Capel Residential Home**

**Towyn Capel Retirement Home  
Lon Towyn Capel Trearddur Bay  
Holyhead  
LL65 2TY**

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

**This report is also available in Welsh**

**Date Inspection Completed**

**26 September 2022**

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## About Towyn Capel Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Towyn Capel Residential Home
Registered places	30
Language of the service	Both
Previous Care Inspectorate Wales inspection	[Manual Insert] 15 August 2019
Does this service provide the Welsh Language active offer?	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 living in Towyn Capel Residential Home are cared for by familiar staff who know their needs well. We saw people and staff conversing together in a natural, friendly way. Where staff numbers available to care for people were reduced due to sickness levels, this has now been addressed, and staffing numbers available have increased.

People told us they enjoy living in the home and feel well cared for. People can personalise their rooms and influence their environment. People have personal choices, such as when to get up and go to bed and can have a choice at mealtimes.

The home is tidy and previous recommendations from the Fire Officer have been actualised. The kitchen is clean and tidy, with plentiful stocks of fresh foods. Upgrades are being made to the kitchen to ensure food safety standards, and health and safety standards are maintained.

Staff members told us they are happy in their work and feel well supported by the manager and provider. The Responsible Individual (RI) visits the service regularly and monitors the quality of service given to people.

## Well-being

People are cared for by a stable staff group who know their needs well. People have personal choices regarding how to spend their day and which meals they prefer. We observed people are treated with dignity and respect by staff members. A person living in the home, told us in Welsh, they chose the home themselves and they are happy, "*fi ddewisodd y fan yma, dwi yn hapus iawn yma.*" They said staff are very caring, and kitchen staff are also very considerate of their needs. Another person said they are happy in the home and like the meals, they like the freedom to go on days out with their family. Other people told us they like their rooms and the sea view. Some staff members can converse with people in Welsh and provide an active offer of the language.

People can personalise their rooms and have familiar objects around them. People have their own TV, radios and phones in their rooms and can access books and hobby materials. People can go on days out and continue to be part of the local community. People can celebrate holidays and other special events with others in the home if they so wish.

The provider has complied to food safety and fire safety recommendations to ensure as safe an environment as possible for people. People live in a home which is maintained and tidy and provides for their needs.

Staff numbers have improved to ensure safe care for people. Staff told us they are aware of safeguarding measures to keep people safe and know which procedures to follow according to their training, should they be concerned about people.

## Care and Support

People's personal plans are centred around their individual needs. People's plans are regularly reviewed, and are updated to reflect any changes. People can access health care appointments and GP reviews. Instructions from health care professionals are carefully documented. Staff have a hand over system to pass information and instructions onwards from one work shift to another. We saw evidence that the GP is called in a timely manner if people are unwell.

Medicines administration and storage is satisfactory. We saw keys to the medicines room and trolley are kept safely and appropriately. People can access their prescriptions in a timely, organised way. Medicines are stored, and disposed of in a safe way, these processes are audited to ensure they are correct.

We observed there are enough staff available to give care to people in an unhurried way. Staff respond to call bells as quickly as possible. People told us there are sufficient staff available to meet their needs. We saw from work rotas, that sickness levels have improved, and there are more staff available to cover shifts and provide people with care. The manager said staffing levels have improved as sickness levels have been addressed.

The provider monitors the health and safety indicators in the home, such as falls rates, to ensure people are not neglected. Staff are trained regarding safeguarding issues to ensure they can advocate for people's safety. Daily and nightly care giving documentation is monitored to ensure people receive the care they need.

## Environment

The environment is clean and tidy. People said they are happy with the environment and their rooms. The food hygiene rating for the kitchen is five, the highest possible. Food is appropriately stored, and there is plenty of stock for people. Recommendations from the environmental agency have been acted upon to ensure people's continued safety. Previous recommendations from the Fire Officer have also been addressed. The leak in the basement ceiling has been mended and made good. There is a concrete floor and sprinkler system in the ceiling to improve fire safety around the laundry area. Alternate storage for furniture and goods kept in the basement is being considered.

We saw regular fire alarm and safety checks are conducted in the home. People have a Personal Emergency Evacuation Plan (PEEP), consideration is being given to further personalisation of these documents for each person. Cleaning materials and chemicals are kept in a designated cupboard for safety. Utilities such as electrics and equipment and water temperatures and tanks are regularly checked and serviced.

People can access the equipment they need for their care. Equipment is serviced as advised by manufacturers and broken equipment is withdrawn from use. Staff are trained regarding health and safety and safe moving and handling of people.

## Leadership and Management

The RI visits the home regularly and monitors the quality of care given to people. The manager said they feel well supported by the RI. Where policies and the Statement of Purpose are due for review, the RI has assured us this is being addressed.

Staff records and employment checks are satisfactory. Staff checks to ensure they are appropriate to work with vulnerable adults are in place and within date. Staff receive mandatory training to ensure they are knowledgeable in their daily role. Staff have regular supervision to support them in their work. Staff told us they are happy working in the home, and they feel supported by management. Staff said the managers are approachable and are proactive should there be any problems.

The provider has not declared any financial difficulties to Care Inspectorate Wales (CIW).

### 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
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**Date Published 16/12/2022**