



# Inspection Report on

**Llantrisant Care Home**

**Llantrisant  
Pontyclun  
CF72 8LQ**

**Date Inspection Completed**

14/07/2023

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## About Llantrisant Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Abraham Nursing Homes Limited
Registered places	38
Language of the service	English
Previous Care Inspectorate Wales inspection	13 July 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 and their families are happy with the care and support provided at Llantrisant Care Home. People like living there, are complimentary about the staff and quality of food, and people are at ease in their environment. Care and support is warm and respectful. People have detailed and outcome-focused personal plans which are reviewed regularly. Improvements are needed around recording information in people's monitoring charts. Medication management is safe. The service gets the right support for people at the right time. Policies and procedures are in place to help protect people from harm or abuse. The service has auditing systems and meets the legal requirements in relation to Responsible Individual (RI) visits and quality of care reviews. The environment is clean, well-maintained, and well-presented. Infection control measures are of a good standard. Care staff are recruited following robust recruitment checks, receive regular supervision and training, and feel supported in their work.

## Well-being

People are treated with dignity and respect. People are settled in their environment and receive warm and attentive support. People are generally happy with the support they receive and can lead lives of their choosing. The service has good relationships and lines of communication with relatives, who keep them informed and updated. Friends and relatives can visit when they wish.

People are supported to be as healthy as they can by getting the right care at the right time. The home liaises with external health professionals to refer any concerns and follows appropriate guidance. Personal plans are sufficiently detailed and reviewed regularly. Meal options are balanced and portions appear appropriate. People receive their prescribed medication as directed. The home has a sufficient supply of personal protective equipment (PPE), with infection control measures in place and in line with its policy. People are supported to keep appropriately active, being encouraged to take part in activities where they can. The home employs an activities coordinator who arranges, runs, and facilitates a variety of activities.

People live in an environment which supports them to meet their needs. Llantrisant Care Home is a purpose-built service for older people with residential care needs, or who have nursing care needs. Bedrooms are comfortable and personalised, with sufficient communal areas available. Suitable mobility aids are in place to help people. The home is clean, well-maintained, and well-presented.

There are systems in place to help protect people from abuse and harm. The home is secure. 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. Care staff understand their responsibilities and how they should respond to potential safeguarding issues. Pre-recruitment checks are robust and regular supervision and training supports continued development. Incidents and accidents are logged, with appropriate actions taken by the service in response.

While the service does not routinely offer a service in Welsh, they have several Welsh speaking staff and could look at making efforts to facilitate support to people in Welsh if needed.

## Care and Support

Care and support is warm and positive at Llantrisant Care Home. Interactions from care staff are kind and compassionate. People appear well cared for and appropriately dressed. People told us the home is “*lovely*”, “*my family have peace of mind that I live here*”, staff are “*fantastic*” and “*most are good*”, and the food is “*perfect*” and “*like a top hotel*”.

People have detailed care documentation in place to support staff to meet their needs and achieve their outcomes. Personal plans are detailed, outcome focused, and include assessments of risk. Plans are reviewed regularly with people and their representatives. Appropriate and timely referrals are made to health professionals, with recommendations and direction acted upon by the service. End of life care plans are in place where needed to support people’s choices and wishes. Deprivation of Liberty Safeguard (DoLS) applications have been 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. Daily recordings and supplementary monitoring charts are in place. These are not always completed in accordance with people’s plans, nor is information always recorded accurately. This means it is difficult to have an accurate picture of a person’s progress, and people are not always receiving timely care and support. We advised these are areas for improvement, and we expect the service to take action to address these.

People benefit from a balanced diet and varied menu. There are a variety of options on the menu, with people offered alternatives if needed. People have drinks to help keep them hydrated and are supported at mealtimes when needed. Dietary needs and preferences are understood and available to kitchen staff, who told us about some people’s specific needs.

There are infection control measures in place to help reduce the risk of transmission of potential sources of infection. Staff have access to a supply of appropriate PPE. There is an infection control policy in place which staff are aware of and understand their responsibilities. Domestic staff have daily cleaning schedules.,. The laundry routines used help reduce the risk of infection.

Medication is stored securely in people’s rooms and can only be accessed by authorised staff. Records show nurses and trained care staff administer medication in line with the prescriber’s directions. The service has an up-to-date medication policy in place. Medication is audited to ensure the correct numbers of medication are in place.

## Environment

People's wellbeing is enhanced by living in an environment which is clean, safe, and suitable for their needs. Llantrisant Care Home is a purpose built two-storey home, located in a quiet and picturesque part of the countryside. The ground floor provides support for older adults who have residential care needs, with the first floor supporting older adults who have nursing care needs. The home is clean, tidy, and free from malodours. A lift is in place for access between levels. Entry to the home is secure, with visitors required to sign before entry. Rooms are individualised to people's tastes and contain photos, decorations, and keepsakes, which promote a feeling of belonging. Each floor has a lounge area, where people can choose to spend their time. There are sufficient toilet and bathing facilities available on each floor, with all bedrooms having ensuite toilets. Communal areas are tidy and uncluttered. Several areas of the home have been redecorated to a very high standard in recent years. The designs and décor have been chosen based on the views of the people living in the service. For example, the downstairs dining area is decorated in the style of a 1950s American diner. We discussed with the manager and RI how the areas yet to be refurbished would, when completed, further enhance the environment and benefit people's well-being. They told us plans are being developed to refurbish other areas of the home, such as the downstairs shower room. The kitchen facilities are appropriate for the home and achieved a Food Hygiene Rating of 5, meaning it is 'very good'. There is a large, accessible outdoor space with seating for people to use.

The home 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. 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 enable staff to understand the level of support people require in the event of an emergency and are easily accessible.

## Leadership and Management

People are supported by a team of care staff who are recruited safely. 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. The manager immediately addressed a discrepancy we noted with a member of care staff's application to join the Social Care Wales register. Training records show care staff have up to date training in core areas of care, with nursing staff receiving specialist training. Staff told us they feel well trained and receive regular training. Manual handling training took place during the inspection visit.

Care staff generally feel supported in their role. They told us the staff team is *"like a family"* and *"everyone helps out"*, *"I love the residents"*, and the manager is *"approachable"* and *"I feel listened to by her"*. Many care staff have worked for the service for several years, helping facilitate continuity of care. Care staff have regular supervision and yearly appraisals to reflect on their performance, 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. The rota showed target staffing levels are being met and was reflective of staffing on the day.

Good governance, auditing, and quality assurance arrangements are in place to support the running of the service. These systems help the service to self-evaluate and identify where improvements are required. The RI has very good oversight of the service. The RI undertakes the legally required three-monthly service visits, in the form of extremely detailed reports. The RI also undertakes six-monthly quality of care reviews, which are similarly detailed. The service is open and transparent, identifying and acting to resolve issues and making the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences at the service.

Policies and procedures, such as for complaints, infection control, medication, and safeguarding, are in place. They give guidance to care staff, for example telling them what to do if they thought someone was at risk of harm.

The service provides good information to the public. The Statement of Purpose sets out the service's aims, values, and support provided. A written guide contains practical information about the home and the care provided.

### 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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59	Monitoring charts are not accurate.	New
21	Care and support has not been delivered in accordance with people's personal plans.	Not Achieved
16	Personal plans have not been reviewed at least every 3 months.	Achieved
60	CIW have not been notified of DOLS applications.	Achieved

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