



Inspection Report on

Ty Llwynderw

**Bridgend Road
Maesteg
CF34 0BA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

9th March 2022

09/03/2022

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About Ty Llwynderw

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| Type of care provided | Care Home Service Adults Without Nursing |
| Registered Provider | Bridgend County Borough Council Adults and Children's Services |
| Registered places | 10 |
| Language of the service | Both |
| Previous Care Inspectorate Wales inspection | |
| Does this service provide the Welsh Language active offer? | Working towards: The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture. |

Summary

Ty Llwynderw provides a warm and friendly environment, promoting a sense of community and togetherness. People living at Ty Llwynderw enjoy each other's company, facilitated by a staff team who know them well and make them feel comfortable and happy. Personal plans and risk assessments are in place and are reviewed. The home environment is clean, well maintained and has good facilities for people to use. Care staff are appropriately recruited and vetted, and have regular supervision sessions to discuss any professional issues or development needs. Care staff need to complete overdue mandatory training to ensure they have the knowledge to provide the best possible care. Information is shared between management and staff during detailed daily handovers. The manager and deputy manager have good oversight of events in the home. The nominated responsible individual (RI) completes required monitoring visits, and gathers information and feedback, to analyse the quality of service being provided and any improvements that may be required. One person currently living at the service is a first language Welsh speaker, who also speaks English. There are some staff who speak fluent Welsh and they find time to chat with them; the other staff use incidental Welsh when they can. Documents are available bilingually on request.

Well-being

People are treated as individuals and are supported to make choices throughout their day. Personal plans contain information about people's likes and dislikes and care staff showed their knowledge and familiarity about the people they were supporting throughout our visit. Care staff facilitated dancing, singing, and activities, asking people what they liked and wanted. One person left the communal area for time on their own in their room, and were supported to do so. There is a suggestion box in the home for feedback, and a complaints process is in place for people or their relatives/representatives to use if needed.

People are supported to be as healthy as they can be by receiving holistic care from a variety of health and social care professionals. We saw evidence of regular input from GP and community nurses, as well as dentist, optician and chiropodist. We received positive feedback from a visiting health professional who said that care staff were proactive in referring issues to them, and were responsive in implementing the ongoing advice or treatment that is given. Care staff are knowledgeable around medication people living at Ty Llwynderw are prescribed and are able to administer it accordingly.

There are systems in place to protect people from harm or abuse. Risks to individual health and safety are included in care plans and risk assessments. These are reviewed, but updates should be more clearly recorded on the risk assessment itself. There are appropriate policies in place including safeguarding and whistleblowing, which had been noted as recently reviewed. Some care staff need to complete refreshers in safeguarding training to ensure they have correct, up-to-date knowledge.

Care and Support

The service encourages people to interact with each other and stay stimulated and as active as possible throughout the day. We observed continuous warm interactions between care staff and people living at the service. One person said of the staff: *“they show you friendship and you show them friendship”*. A visiting professional told us *“this is a good service, they are well looked after here”*. Care staff keep momentum going throughout the day, offering people choice of activities and opportunities to spend time together, or on their own if they wish.

Care staff have appropriate information to be able to provide people with the right care at the right time. Personal plans contain information on people’s needs and the support that is required to assist them with each aspect of their daily living. These are regularly reviewed and updated when people’s needs change. Supplementary charts are completed, for example, recording food and fluid intake.. Referrals are made to external health professionals and advice and guidance implemented. Management and care staff share information regarding significant events, or changes in people’s needs, in detailed handovers at the end of each shift. On the day we visited, the nominated care worker for medication was able to give us a thorough explanation of how medication is safely stored, as well as the specifics of administering each individual’s medication. We observed part of a medication round that indicated care staff were competent in administration. People have choice over their meals, and the kitchen staff seem familiar with them and their dietary needs and preferences.

There are systems in place to promote infection control and good hygiene. All staff complete regular COVID 19 testing, and we saw personal protective equipment (PPE) being used appropriately by staff throughout the day. Visitors also complete lateral flow tests and complete screening questions prior to entering the service. The home environment appears clean, with domestic staff completing a thorough cleaning schedule, and care staff use appropriate hand hygiene and spot cleaning.

Environment

Care and support is provided in an environment with well-maintained equipment and facilities that promote achievement of people's outcomes. Feedback about the environment included: *"I'm living in the lap of luxury here"* and *"they have everything so lovely here, it's great"*. The home has a spa room, as well as spacious communal areas, bedrooms and en suite bathrooms. Ty Llwynderw is part of a wider complex owned by Linc Cymru. People living in Ty Llwynderw have access to a salon and restaurant in the complex, and a safe and secure outdoor area. The home is secure from unauthorised visitors and sluice, and laundry and medication rooms are locked to minimise risk to people's individual safety. Most people spend their time in the communal areas, but have space to be alone should they wish.

We saw the schedule of maintenance of equipment is up to date, so equipment is fit for purpose and safe to use. Linc Cymru provide domestic and laundry services and the home appeared clean when we visited. Fire equipment and alarms are checked regularly, and people's evacuation plans are stored by the fire box in case of emergency. Maintenance issues are referred to Linc Cymru and contractors sent to repair and replace.

Leadership and Management

There are arrangements in place for oversight of the care and support being delivered in the home. There is a clear management structure and management and care staff seem to share information between them freely. Feedback from staff included; *“I think team morale is very good”*, *“we’re all like a family”* and *“I love it here, it’s not even like work”*. The RI undertakes monitoring visits to the home every three months to gather information and feedback on the quality of care being provided.

People receive care from a consistent staff team who are familiar with their needs. The care staff team is small, and most have worked at Ty Llwynderw since it opened. Agency staff are used when needed due to staff sickness. Care staff told us that staffing levels are enough to allow them to support people in a calm and unhurried way, and we observed that staff were able to spend time with people talking and doing things together. Care staff are recruited via the Local Authority human resources department, with the manager authorising the references given and being notified when security checks have been completed and the staff member can start in their role.

Staff members have opportunities for support and development, however must ensure refreshers in core training are completed. One to one supervision sessions are held regularly with individual staff members, to allow them the opportunity to discuss any personal or professional issues they have. We saw evidence of gaps in completed training for core areas such as manual handling, safeguarding, fire training and medication administration. All training is provided by the Local Authority and as such opportunity for training has been affected by the pandemic. Care staff we spoke to told us they felt confident in all aspects of their job role. However, without up to date knowledge in these core areas, care staff may not be able to provide people with the best possible care. This is an area of improvement that we will follow up on at our next inspection. There are relevant policies and procedures on site for care staff to use as guidance when needed. These have been noted as recently reviewed. An updated medication policy is being drafted in collaboration with the local health board and should be available to the service soon.

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 | Care staff need to be up to date in mandatory training in order to provide the best possible care. | New |
| 15 | Regulation 15(1) - Personal plans are required to be more person centred and contain language | Achieved |

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| | preference, personal histories and evidence service user or advocate involvement in care planning and review | |
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Date Published 19/04/2022