



# Inspection Report on

**Ty Victoria Nursing Homes**

**97 Victoria Road  
Wunarlwydd  
Swansea  
SA5 4TB**

**Date Inspection Completed**

19/03/2024

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## About Ty Victoria Nursing Homes

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Aura Care Homes Limited
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	18 September 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

People and their relatives are happy with the care and support provided at the service. They live in a comfortable, welcoming and homely environment which is warm, clean and suitable to meet their needs. There is good information available for staff to understand how to best meet people's care and support needs. People have personal plans in place which are reviewed regularly. There is a Responsible Individual (RI) in place and a manager registered with Social Care Wales.

Staff are available in sufficient numbers and have a mix of skills to adequately provide care and support to people. Care workers are knowledgeable, respectful and caring. Safety equipment is in place and health referrals are made when necessary to promote people's health and well-being. There are opportunities for people to take part in activities at home and in the local community.

The service provider has developed systems to enable them to capture people's views and put checks and processes in place to keep service delivery under constant review. This feedback from people is then utilised for improvements in the service. Improvements have been made to the environment, staff recruitment, supporting and developing staff with supervision, and appraisal.

## Well-being

People and their relatives are very happy with the care and support provided. There is good information available for staff to understand how to best meet people's care and support needs. People told us they get on well with staff and commented, *"they (staff) are good people."* A relative commented *"They are great, nothing is too much trouble, there's always someone around when you need someone."* Records show people are offered choices to make everyday decisions. The RI regularly speaks with people who live at the service and their families about what is important and how to best support them and this was supported by documentation seen by us.

People are protected from abuse and harm. The service has an appropriate safeguarding policy in place and staff receive training in the safeguarding of adults. The Service Manager has a good understanding of the safeguarding requirements and understands when a safeguarding referral needs to be made to the Local Authority. Ty Victoria is a welcoming and very well-maintained service and there are checks in place to ensure it remains safe, clean and homely.

People get the right care and support. Records show that timely provider assessments are completed and referrals are made to a variety of healthcare professionals such as psychiatrists and physiotherapists. This is confirmed by comments from visiting professionals who told us they are satisfied with the care at the service. They commented, *"There appears to be a very open and transparent approach by the Manager. She always appears to take on board any advice or recommendations."*

People can do the things that matter to them when they want to do them. There are a range of activities available which are meaningful to people. Throughout our visit we observed some activities taking place facilitated by care workers. People told us they enjoy taking part in a variety of activities such as going to the local community centre and attending local facilities. Relatives told us their family member is encouraged to stay active and to do as much as they can for themselves. A relative commented *"Nothing is too much trouble. She has a good relationship with staff. We are told you can come when you want."*

People live in suitable accommodation, which supports and encourages their well-being. People's bedrooms contain personalised items of their choice and are suitably furnished. They have facilities which encourage independence. The building is well-maintained and safety checks are completed when required. The RI told us of plans to upgrade the environment and implement a new electronic record keeping system.

## Care and Support

People are supported well with personal plans and risk assessments that reflect their needs. A sample of personal plans viewed contain detailed information regarding personal interests, likes and dislikes. We saw personal plans are developed following discussions with people and their family. Personal plans and risk assessments are regularly reviewed in consultation with people wherever possible. We saw care monitoring does not always sufficiently record the amount of fluid provided by staff and discussed this with the manager who agreed to introduce a 'sign off' of monitoring documentation from each care shift twice a day. The manager told us about the forthcoming implementation of a new electronic care recording system due to be implemented shortly. We discussed the need to ensure there is a robust implementation plan in place to support this.

People enjoy a positive dining experience. We observed people during a lunchtime meal and saw the care workers assist people in a relaxed and dignified way. People ate their meals at dining tables which had tablecloths, placemats, cutlery and condiments in place in readiness for the meal being served. Some people ate their meal at cantilever tables. Staff assist residents in a respectful and dignified way and are aware the people's dietary requirements. There was a menu for people to choose what to eat but were also verbally told what was on the menu and where people do not like what is on the menu, an alternative is offered. People told us that the food was "*plentiful and delicious.*" Where people wish to dine alone or eat in their rooms this is respected and facilitated by the staff.

The service has safe systems for medicines management. There is an appropriate medication policy and procedure in place for medicines management which is reviewed annually. Medication is stored appropriately in a secure locked room. As and when required medication (PRN) is administered appropriately in accordance with PRN guidelines. Medication room temperature is checked daily to ensure medication is stored at the correct temperature.

Policy, procedure and application of hygienic practices are in place to reduce risks of infection. Staff demonstrate an understanding of infection control and the use of personal protective equipment (PPE). Staff wear appropriate PPE and follow correct procedures when needed. The home is clean and uncluttered. Staff maintain appropriate standards of hygiene and cleaning schedules are in place with supervision from the manager. Oversight and auditing of infection control measures are in place. The home has sufficient stocks of PPE.

## Environment

The accommodation is welcoming and homely and benefits from good quality decor and furnishings. There are two communal lounge/dining room areas on the ground floor and first floor. Improved flooring and carpet on the stairs leading to the first floor has taken place and the first-floor bathroom has been updated. Lifts are well lit with clear unobstructed and clean uncluttered flooring around the home. There are photographs and pictures on display. We saw people sitting in the dining room and lounge on the ground floor and first-floor and sitting in the comfort of their bedrooms. We saw bedrooms are homely and mostly personalised with relevant adaptations and equipment where necessary to meet people's needs. At the time of our inspections, the outside decking area had water coming from banking to the side which was causing a hazard and needs to be diverted. This was running onto the footpath and across decking. The manager agreed to address this immediately.

There is a system of monitoring and auditing, which supports a planned maintenance schedule and renewal programme for the fabric and decoration of the premises. This is managed by the staff at the home under the guidance of the manager and RI. The sample of bedrooms we viewed have facilities and equipment which are suitable for the individual. Records show equipment is regularly serviced to make sure people remain safe. People's personal records are held securely and access to the home is monitored by staff.

The service provider has procedures in place to identify and mitigate risks to health and safety. The oversight of health and safety is in place with regular audits of the environment. The maintenance person and other staff conduct daily checks within the service to maintain the safety of people. Fire safety records were in place. We discussed with the manager that fire drills should be completed at least one per year (annually) or as determined by the service's fire risk assessment. If for example you have a high turnover of staff, you may need to carry out more often.

Laundry is managed appropriately and is well organised. All laundry equipment is in working order. There is an area with shelving for linen storage and ironing facilities. There is an organised storage area for household waste and clinical waste bins. The storage of substances which have the potential to cause harm was safe because we found that materials used for cleaning were stored in an appropriate locked cupboard.

## Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service. Measures for the oversight of the service are in place, such as systems for care planning, monitoring, and review to enable people to achieve their personal outcomes. The service is provided in line with the objectives of the Statement of Purpose, which is regularly reviewed. We saw Policies and procedures are in place and reviewed regularly.

People can be assured the service provider and the management team monitor the quality of the service they provide to a high standard. The RI visits the home regularly and meets with people and staff. The latest quality monitoring report showed people's feedback. Recommendations for improvements are included and implemented effectively. The RI has good oversight of the service and the manager conducts quality assurance monitoring to ensure a high standard of quality care is delivered.

The service provider has extensive oversight of the financial arrangements and investment in the service. The RI assured us the service is financially sustainable to support people to be safe and achieve their personal outcomes. The RI told us of investment such as *“Developing health and wellness programs at Ty Victoria. For e.g. fitness classes, stress management workshops, and mental health counselling services for our colleagues working in the care home. Digital care planning and record keeping. Investment in home improvement and maintenance. For e.g., internal decoration, repair, maintenance and replacement of equipment and machinery etc.”*

There are enough staff on duty to safely support and care for people. Records show there is a stable and consistent team in place with a mixture of experienced and new staff available, and this was seen during our inspection. People living at the home told us *“Staff are like our friends, they're kind to us”* and a relative commented *“We're very pleased with the service.”* Supporting and developing staff with supervision, appraisal and training has improved and is now sufficient. The manager informed us that training is being continually updated to ensure all staff have completed the appropriate training required.

### 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
36	The staff training matrix showed gaps in training for several staff.	Achieved
36	Staff supervision did not meet the required frequency of every 3 months to comply with regulations.	Achieved

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
N/A	No non-compliance of this type was identified at this inspection	N/A
44	The carpet on the stairs and flooring in the first floor bathroom are dirty and need repair or replacing. Ensure the carpet on the stairs is replaced and the flooring in the bathroom repaired or replaced.	Achieved
35	Provider records showed that not all staff members had full employment histories or records of the qualifications. Ensure staff files contain up to date full documentation such as employment histories and evidence of qualifications.	Achieved

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