



Inspection Report on

Trenewydd Residential Care Home

**Trenewydd Care Home
Ger Y Tarrell
Brecon
LD3 8DE**

Date Inspection Completed

23 August 2022

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About Treenwydd Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Shaw healthcare (Group) Limited
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	
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 are happy with the care and support they receive. Staff treat people with respect, kindness and genuinely want to help people achieve their personal outcomes. Staff are well trained and knowledgeable about people's personal preferences. People have opportunities to do things they are interested in.

Improvements have been made to the environment including new flooring and furnishings. People enjoy having their personal possessions in their bedrooms. Improvements to the bathrooms would further enhance the environment.

Quality assurance processes in place mean any issues can be identified and addressed in a timely way to ensure positive outcomes for people.

Well-being

People have control of their day-to-day life. They have a copy of the guide to the service so they know what to expect and how to raise any concerns should they want to. The statement of purpose (SOP) states in the future, the SOP will be made available to people in Welsh along with other documentation to support people whose first language is Welsh. People have choices including where they spend their time, what activities they want to do and other decisions that may affect them. Care staff know people well and anticipate their needs and wishes. They seek people's views and preferences regularly.

People are supported to manage their physical and emotional well-being. Care staff arrange health appointments when needed. The key worker system means staff get to know people well which helps to support people with their emotional wellbeing. A varied activities programme and positive caring relationships with the staff contribute to this.

People are as far as possible protected from neglect. Staff know what to look out for and how to raise concerns. Opportunities to attend training allows staff to be skilled and knowledgeable to meet people's care and support needs. Policies and procedures are in place to guide staff.

The care home is clean and comfortable. Signage is bilingual. Bedrooms are personalised with things important to people. Improvements have been made including new flooring and some new furniture. There is a programme of maintenance and redecoration in place. Work is needed on the bathrooms to address potential infection prevention and control and privacy issues.

Care and Support

People living in Trenewydd speak highly of the care they receive and of the staff who support them. Comments include “*Staff are fantastic, very caring, attentive, respectful and polite.*”

Consultation arrangements are in place to ensure people can express their views. People tell us they attend resident meetings and like to participate in these. People are assigned staff members to act as key workers. Staff tell us they are committed to this role and have formed good relationships with people as a result. They spend purposeful time with people making sure they are always familiar with people's wishes and preferences. People have choices about activities, menu options and daily routines. We saw people enjoying lunch in a relaxed environment. People who need it have the right level of support to enjoy their meal experience. The activity coordinator confirms choices of activities are made from consultation with residents individually or in meetings, staff meetings and from the information within people's care files where they have shared their interests and hobbies. We observed people positively engaged in various activities during our visit and clearly enjoying what they are doing.

The manager considers a wide range of information about a person before they move into the home to make sure they can meet their needs. People we spoke with tell us they were involved in this process. Assessments are completed on admission, but these are not updated when people's needs change. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

At the last inspection in January 2020, we notified the provider that personal plans needed improvement, so they contain a clear guide for staff to follow to support people to meet their personal outcomes. At this inspection, we found personal plans are detailed and up to date including people's likes and preferences, so staff know how to support the person. We saw some evidence that people and if appropriate their representative, are involved in reviewing the extent to which they have been able to achieve their personal outcomes. However, it was not clear this took place at least once every three months. An assurance was given reviews will be completed within these timescales.

Care staff keep people as safe as they can by following policies and procedures in the home. Staff spoken with know their responsibilities and the process to follow if they feel a person's well-being is compromised. Measures are in place to make sure restrictions are only placed on a person's liberty when it is in their best interest. However, the management should make sure the conditions of the restrictions are followed. There was no evidence of this on one record we viewed. However, this was rectified following our visit.

Medication practices in the home are managed well. Staff spoke favourably about the new electronic system in place which helps to make sure people receive their medication as prescribed.

Infection control processes in the home promote hygienic practices and helps reduce the risk of infection. Regular infection control audits take place and staff have training. Visiting

is resuming, families can visit when they like, and use areas of the home including people's bedrooms. Staff are careful to follow government guidelines in relation to Covid guidelines.

Environment

People tell us they are happy in their surroundings. We saw people enjoying time in the communal areas or the privacy of their bedrooms. The foyer has places to sit and has games and magazines which we saw people enjoying. There is informative information about the service, photographs of staff and pictures of the local area, past and present which is a good talking point for people and helps those with a poor memory. Communal areas are nicely decorated with plenty of seating (different types to meet individual need) and space to allow for use of manual handling equipment. On the day of visit there were decorators on site and Wi-Fi was being installed across the setting in preparation for the electronic care records system.

People's rooms are very personalised with photos, paintings, personal items, furniture and soft furnishings. People we spoke with all tell us they have everything they need in their bedrooms and are comfortable. Bedroom doors have the name of the key worker and an image of significance to the person which we found instigated conversation.

There is an ongoing programme for maintenance and decoration. This is discussed in team meetings. Work undertaken includes redecoration of parts of the home, some flooring replaced, new wardrobes, lockable cabinets and foot stools for the lounge. Bilingual signage is around the home.

However, we found bathrooms and toilets need some refurbishment. Issues identified could potentially impact of people's well-being. This includes floor edging coming away from walls, some flooring not fitting against the toilets meaning this could be an infection prevention and control issue. Walls are stained from where the soap/sanitiser had run down the walls and areas of pipework are exposed posing a potential health and safety issue. Windows are frosted but had no blinds in place, when lights are on this creates a visible form from the other side of the window and poses a dignity and privacy issue. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People tell us they enjoy using the outside space. The gardens have raised beds and people are encouraged to tend to the garden with staff support, it is an inviting space with a vast range of flowers.

Arrangements are in place to ensure risks to people's health and safety are identified and dealt with. Regular audits of the environment take place. Maintenance records show equipment is regularly serviced to make sure people remain safe. Fire risk assessments are carried out regularly.

Leadership and Management

Measures are in place to make sure people are happy with the quality of the care and support. Records show the responsible individual (RI), visits the home regularly and meets with people who live there and staff. Quality of care reports show any actions needed following the review and how these are addressed. Ongoing quality assurance measures in place include regular care staff meetings, handovers between each shift and regular audits of all processes.

People have information about what they can expect from the service including how they can raise any concerns they may have. People told us staff respond quickly to any issues they may have and do their best to address them.

People are supported by care staff who are appropriately recruited and receive support in their role. Records show recruitment processes ensure all checks are completed before the staff member starts work. A staff member told us they were very impressed with the induction and training when they started in their role. Regular staff meetings are held where people can give their views and information about is shared with staff including areas to improve the service for people. This includes for example, changes made to the reporting process relating to skin care to make sure support is available in a timelier way. Staff tell us they feel supported in their role and have training needed to help people achieve their personal outcomes. Training records seen confirm this. They say staffing levels have improved which means there is less pressure on them, and they can spend more time with people. Records show staff have regular supervision but not all have had an annual appraisal, but the manager assured us this is being addressed.

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
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18	Assessments are not kept under review and revised as necessary.	New
44	Bathroom and toilets are not maintained to a standard to ensure the ongoing wellbeing of people and to maintain their privacy and dignity	New

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