



Inspection Report on

Llys Y Seren

**Llys Y Seren
Moor Road
Port Talbot
SA12 7BJ**

Date Inspection Completed

09 & 10 December 2021

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About Llys Y Seren

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pobl Care and Support Limited
Registered places	60
Language of the service	English
Previous Care Inspectorate Wales inspection	09 & 10/10/2019
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

People benefit from receiving consistently good support from a knowledgeable and experienced care team. Llys y Seren is a very well managed service supported by good governance arrangements. Communication is strong and care workers are well supported by their manager and receive regular supervision. Staff recruitment supports safe practice and staff have good access to training to ensure they are sufficiently skilled to undertake their roles.

People receive support and encouragement to lead active lives and make daily choices. Staff treat people with dignity and kindness and relatives feel assured care provided is of a good standard. Personal plans provide clear information and direct care workers on how best to support to individuals. The management of medication is effective and health needs are addressed in a timely manner. The service maintains positive lines of communication with professionals, people and relatives. People benefit from living in an environment suited to their individual circumstances.

Well-being

The environment where people live supports their well-being. Individuals live in a service designed to meet the needs of people who live with dementia. The building is well decorated, homely and maintained to a high standard. Communal and private areas are very clean and free from clutter. It has a real community spirit, and the service prides itself on being part of the wider community. People have access to adequate space and can spend their day in internal communal areas, secure gardens or in their own rooms if they prefer.

Measures are in place to protect people from harm and abuse. The building is secure and only authorised individuals can enter. The service undertakes appropriate security checks and fire safety measures to make sure people remain as safe as possible.

Up to date policies support the service to maintain good practice. Recruitment checks ensure staff working at the service are suitably skilled and of good character. Staff are fully aware of their safeguarding responsibilities and how to report any concerns. Risk assessments ensure any care provided or activities undertaken are as safe as they can be. The service promptly notifies relevant bodies of incidents or concerns. Care workers have a good supply of personal protective equipment (PPE) and COVID testing kits and are confident in using these tools.

The service promotes people's physical and emotional wellbeing. Personal plans are detailed and contain information on current care needs. Reviews consider changes in care. Although more evidence of the involvement of people and/ or their representatives needs to be considered. Timely referrals to healthcare professionals and good medication management support people to remain as healthy as they can be. Daily routines place a focus on healthy lifestyles and diets. Care workers ensure people occupy their day by participating in a range of activities they enjoy. People receive support to maintain contact with relatives and key individuals as often as they would like. Language needs are considered and the home is working towards a Welsh active offer.

There are very strong governance arrangements in place to ensure people receive a consistently good service. Staff have good communication and support from senior members of the team when required. There are consistent arrangements in place to support staff through regular formal and informal supervision. Staff feel well trained and supported, and evidence supports this. There are extensive quality assurance processes in place. The Responsible Individual (RI) maintains regular communication with the home and has high quality monitoring arrangements in place.

Care and Support

Overall personal plans give a real sense of the person and reflect individual needs. Initial

assessments and personal plans includes input from professionals, people, and/or their representatives. Although, more focus should be placed on evidencing people's or their representative's involvement at review meetings. The service will be introducing new personal planning documentation in early 2022. These have been developed across the organisation and place greater emphasis on capturing people's outcomes/ goals. The service recognises the importance of maximising people's strengths and achieving positive outcomes. Any identified hazards have plans in place to minimise risks to self or others. We saw evidence of input from specialist health and social care professionals. The service addresses any health changes in a timely manner. There are clear protocols in place around areas such as fluid intake, nutrition and skin integrity.

People benefit from a high standard of service from care workers who know them well. There are a number of staff having worked at the service for a significant period of time. They are familiar with people's needs and understand their likes and dislikes. They are also able to share their knowledge with new staff as part of the induction process. We saw people have access to a wide programme of both group and individual activities. The service benefits from additional support from a dedicated activities coordinator. An ongoing programme of daily activities enable people to do things they enjoy. People living with dementia benefit from staff knowledge of their interests and hobbies. This is also recorded within personal plans and profiles.

We saw a person who lives with dementia being supported to walk the home's dog. The individual had limited communication but their facial expression on their return was one of enjoyment. Another person was reminiscing with a care worker through looking at old photographs of the local area. Both the individual and care worker said this was a regular activity and one they both enjoyed. We saw all interactions were genuine and friendly with activities being part of everyday life. There was also a communal Christmas singalong on the afternoon of the inspection, with many staff and people seen enjoying themselves. Comments from relatives include *"staff are excellent"* and *"x is so happy living here"*. A visiting health care professional said *"there is so much going on, it's a lovely home"*.

We found good systems in place for assisting people with their medication. The service operates an electronic medication management system. We viewed a sample of peoples medication administration records (MAR's) and found them informative and accurate. Care workers are professional, well trained and knowledgeable on what medication people have and why. Secure arrangements are in place for medication storage. The service holds correct authorisations for those people who lack understanding around their medication needs. Staff competency checks and medication audits ensure people receive the correct medication and practice remains safe.

Environment

The home environment is safe and secure. Visiting arrangements are good with clear risk assessments in place in accordance with Welsh Government guidelines. All visitors are required to sign in via a visitor's book and show proof of a negative Lateral Flow Test (LFT). Alternatively they can complete a test on arrival. Care workers were seen using appropriate personal protective equipment (PPE). People are safe from unauthorised visitors entering the building through an electronic door key-pad system. There are consistently good maintenance arrangements in place. This includes routine testing of water temperatures, mobility equipment, emergency lighting & fire safety equipment. Utilities such as gas and electricity have the relevant safety certificates in place.

People have personal emergency evacuation plans (PEEP's) in the event of the need to evacuate. Fire drills are undertaken routinely and staff have on-going fire safety training. Cleaning substances hazardous to health are stored appropriately with the relevant risk assessment documentation in place. Regular health and safety audits are carried out by senior staff in the service, the responsible individual as well as the corporate quality assurance team.

People benefit living in an environment suited to their individual circumstances. The service is purpose-built and benefits from six suites accommodating ten people in each. Although only five suites were being used at the time of inspection due to the reduced number of people living at the service. People benefit from smaller group living and the consistency of the staff team. Although at times staffing has been affected through Covid protocols. Comments from people include *"it's a lovely place to live, I really enjoy living here"* and *"it's so nice here, staff are lovely"*. A visiting relative said *"it really is the best care home I have been too, staff care so much"*. Each suite has its own communal/ dining areas as well as having access to outdoor space. All bed-rooms are well furnished, individualised, clean and have en-suite facilities.

Llys y Seren caters very well for people with a wide range of conditions, especially for those living with dementia. Two suites are specifically for people living with more advanced dementia, and under Deprivation of Liberty safeguards (DoLS). There is also a male only suite which we were told has been a significant success. The furnishings and decor throughout the service is dementia friendly, providing areas of both tranquillity and stimulation. The service is actively working towards becoming a dementia specialist service.

Leadership and Management

Governance and quality monitoring arrangements are very strong. The service has a range of corporate policies and procedures which are clear and fit for purpose. Staff have a clear understanding of these policies. People have access to an up to date statement of purpose and guide to service. These can be made available in Welsh on request. The

Responsible Individual (RI) completes three monthly visits and six monthly quality of care reviews. They are additionally supported by an internal quality assurance team. Audits undertaken evidence monitoring is ongoing and timely action is taken to address any practice issues to ensure people receive good quality care. The service notifies the relevant professionals of incidents and significant events.

The recruitment of staff is effective and care workers receive support to maintain their professional practice and knowledge. Recruitment files are in good order and contain the necessary information. Care workers attend frequent training ensuring they remain up to date with all training requirements. There are in-house experienced staff providing expertise, support and training in areas such as manual handling. Staff told us they had the right skills and knowledge to assist people.

Care workers feel supported and receive ongoing supervision. We saw evidence of regular team meetings and supervision to support professional development and discuss any changes to the service. There are daily handover meetings facilitated by senior staff. These focus on the needs of people living at the service. The service has been through an extremely difficult period of time due to the impact of Covid-19. This has affected staff morale, with care workers telling us they were *"tired"* and have felt *"overwhelmed"* at times. However, all care workers were keen to stress the team *"worked well together"* and are confident things are improving. They also feel well supported by the managers and the wider organisation. This was evident throughout the inspection. On the day of inspection staff had access to a wellbeing officer. This we were told is an ongoing arrangement. Additionally, staff have access to wellbeing support at any time via a dedicated support service.

We saw sufficient staffing levels are being maintained. Although, this we can see has been difficult at times due to Covid-19 protocols. Care workers have worked a high number of hours during the pandemic to ensure people receive the support they need. The service has had to access agency staff to cover any shortfalls. This situation is improving. Care workers told us they enjoyed their work; they have clear roles and responsibilities and understand what is expected of them.

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
N/A	No non-compliance of this type was identified at this	N/A

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Date Published 19/01/2022