

Inspection Report on

Llys Y Seren

Llys Y Seren Moor Road Port Talbot SA12 7BJ

Date Inspection Completed

10/08/2023



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 | |
| 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

Llys y Seren is a warm, homely, and excellently presented service in Baglan Moors within the industrial town of Port talbot. Personal plans are developed with people or their families from the assessment stage of admission and where possible they are consulted on all aspects of their care. Peoples' well-being is enhanced through the multiple opportunities to engage in a wide range of activities in the service as well as in the community.

As the service is purpose built, the layout has been very cleverly designed. With ample indoor and outdoor secure communal areas, people have choices of where to spend their time. The service is very well maintained.

There is a well-established fully committed management team in the service who are held in high regard by people and the care team. Care staff feel valued and supported in their roles. The Responsible individual (RI) and other directors visit the service routinely to undertake quality assurance checks. RI visits involve them becoming a resident for the day and experiencing life in the service, whilst obtaining valuable feedback from people and staff to drive improvements. Reports of these visits and required regulatory reports are completed promptly.

Well-being

People have an integral voice in the service and are consulted with all aspects of their care wherever possible. Prior to moving in, service assessments are carried out with people and/ or their representatives to ensure the service can fully meet their needs. The key things that are important to people are considered when writing personal plans with them. Regular reviews take place and relatives are updated with any changes. People participate in important decisions within the service like menu planning and are actively involved in recruitment of new staff. Numerous choices are available for people to make daily, whether that's what to wear, what to do, what to eat and more. The RI embraces life in the service for the day when visiting to experience life in the home first hand and gain feedback from people and staff to inform any improvements needed in the service.

People are protected from harm and neglect. Almost all care staff are up to date in safeguarding training and those spoken with are aware of their responsibilities to report any concerns they have about people they support. The provider has policies and procedures in place to ensure the safe running of the service. The service is very well maintained and secure whilst still enabling freedom of movement between indoor and outdoor areas. The service is clean and clutter free. Visitors are fully welcomed and have access to kitchen and bathroom facilities and the large communal lounge and garden; these facilities enable visits to continue at times of outbreaks in the service by minimising footfall into the living suites.

People have consistently active social lives in Llys y Seren and have built wonderful friendships with others in the service. The service is considered integral in the heart of the local community. Numerous activities take place in the service daily and people can choose how to spend their time. The service has developed highly successful relationships with local nurseries, school, supermarket, and numerous others to enjoy activities outside the home as well as a very busy activity schedule within the service. People consider others in the home as their extended family and have made lovely friends with people. The service holds large events to raise funds for activities, where families and the local community come together to celebrate the service.

People live in a service that has been purpose built to an exceptional standard to meet their needs. The facilities in Llys y Seren are excellent, people can spend time in communal areas on each unit or in the secure outdoor areas that are all inviting with seating areas and shade. The design and layout of each unit has been very-well thought out, especially for people living with dementia. People are fully involved in decisions about the décor of the service and their artwork and memorabilia is on display.

Care and Support

The service ensures that care planning documentation in place is reviewed routinely to ensure it consistently reflects the needs of people. We looked at six care files and saw personal plans are written from the person's perspective and fully reflect their current support needs. Regular reviews of personal plans take place. Relatives confirmed the service communicate with them often and any changes on personal plans are discussed to reflect current circumstances. The manager told us that care files are soon to be audited to ensure they are all similar in layout and easier for care staff to navigate. We saw good monitoring of people's weight and food/ fluid intake logs with timely referrals and intervention from other professionals (e.g., dietician) in place. Comments from relatives included: "they always consult with me about X's care needs, likes or dislikes, communication is excellent, any issues at all, and I'll get phone calls off them".

There are good systems in place to manage medication at the service. There are locked, air-conditioned medication rooms which are monitored for the continuous safe storage of medication. Each unit has its own locked trolley and laptop for ease of medication administration. The provider has electronic systems in place for the management of medication. However, there are technical issues with the system at present. The manager explained that ongoing daily counts of all medications take place to minimise the risk of errors. Weekly and detailed monthly audits are also in place. The provider is actively looking at more effective alternatives at present. Feedback from professionals around medication management was very positive and included "the service has some of the most detailed and appropriate documentation I have seen. This is beneficial to the resident as it allows a more efficient assessment of prescribing".

People have fantastic opportunities to do things that matter to them. There is a dedicated activities coordinator in post and care workers who assist with facilitating activities for people to enjoy. We saw a busy activities diary and observed many activities during the inspection. A large group of people were clearly enjoying 'laughing yoga', others took part in quizzes and pamper sessions. People were reading magazines and newspapers as well as making themselves cups of tea and chatting with their friends. Some people were enjoying the sunshine outside and admiring the flowers and many relatives visited. There is a very busy and active feel in the service and people told us they enjoy living in the home. Visitors said: "They clearly are very happy here", "there is always something going on and Z is having a good life here,", "I'm very, very happy with it there" and "I wouldn't just recommend it to others, I would go there myself".

There are good systems in place to protect people from harm and neglect. People who do not have the capacity to make their own decisions about aspects of their care and support and accommodation have appropriate up to date Deprivation of Liberty Safeguards (DoLS) in place. Safeguarding training is mandatory for all care staff in the service and those spoken with demonstrate good knowledge of the safeguarding procedures and awareness of their responsibilities to report any concerns. There have been issues with the quality of food in the service in recent months, however the provider and service manager have already been proactive in addressing this and action has already been taken. Some

improvements have already been made and new chef is also in the process of being recruited.

Environment

People are supported in an excellent environment that meets their needs very well. The location of the service is close to large retail park and is a short drive to the sea front. People told us they often visited the local superstore for a coffee and the seafront for an ice cream. There are good security features in the building to keep people safe. There is a sign in book to complete for all visitors on arrival and leaving, and doors are secure with electronically activated pass cards. There is a large car park to the front of the building with lots of spaces available for visitors and staff. Interactive touch screens are in place for people to enjoy games, listen to music etc. The building is dementia friendly, and this is evident throughout. Access to the suites is through wide corridors which are decorated with memorabilia and trinkets for people to explore. There is a well-equipped salon where people can visit the in-house hairdresser. All six suites in the service contain ten ensuite bedrooms, laid out in a square so that people can walk around safely and securely with each one having its own open plan lounge, kitchen, and dining area with access to safe outdoor space. Upstairs suites have balconies which overlook the ground floor gardens. There is a separate staff only area within the building which houses the laundry room, kitchen, and staff facilities.

There are robust procedures in place to identify and mitigate risks to health and safety. There are consistently good maintenance checks in place in the service. We looked at the maintenance file and saw weekly and monthly checks are in place to ensure the service remains safe for people. These included: manual handling equipment, buzzer system and fire door checks. Certificates were seen for utility servicing such as gas and electricity and all of these are in date. Cleaning equipment and chemicals are stored securely. The last inspection carried out by environmental health in November 2022 scored the main kitchen at 5, 'Very Good' in the food hygiene ratings.

Leadership and Management

There are consistent, highly effective oversight arrangements in place to oversee the service. There is a very well respected and dedicated manager in post who is highly regarded by the whole staff team in the service. They are supported by a team of passionate and committed care staff who want to do their best for people. The management team carry out audits of systems within the service routinely and further audits are carried out by the provider's external audit team which includes health and safety. Regular visits are carried out by the RI who, when visiting becomes a resident for the day to experience first-hand the life of people in the service, as well as obtaining valuable feedback from them and their care staff to drive improvements. Reports following these visits were seen and further detail was included in the bi-annual quality of care reviews. These reports are of a very high quality with photos and celebrations of achievements of the service as well as improvements identified.

The provider has a dedicated human resources department to ensure care staff are recruited safely and appropriately. We looked at six electronic personnel files and found the required documentation in place for safe recruitment, including up to date Disclosure and Barring Service (DBS) checks. Care staff receive regular and routine supervision and told us they feel supported in their roles. Comments include "I must be honest they are very supportive" and "management are great and are very supportive. I feel I can go to them with any problem". We saw the training matrix and most staff are up to date with the providers mandatory training which includes moving and assisting people, infection control and food safety. We spoke with many care staff during the inspection and received feedback surveys electronically. Almost all staff told us they feel valued and happy in their work. Feedback about working in the service overall was excellent, with every response saying that they would recommend working in the service. The manager told us that access to support from the provider was very straightforward and they are supported very well by the RI.

There is very good oversight of financial arrangements and investment in the service. The provider actively seeks ways to continuously improve the service. At the time of the inspection plans were in place to build an outdoor play area in the service so that visiting children could enjoy the outdoors with their loved ones. Staffing levels appear to be good in the service. And the management team have managed to recruit numerous new staff in recent months to minimise the use of agency staff. Whilst agency staff are still being used as needed for a few shifts per week, the staff attending the service are now regular and know the people they support well. The manager has a good relationship with the agency manager who also strives to provide a very good and reliable service to all its customers. Everybody spoken with during the inspection said they would recommend the service to people looking for a residential home.

| 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 |
|-----|---|-----|
| | inspection | |

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