

Inspection Report on

Ty Anwen

Ty Anwen
The Bryn Trethomas
Caerphilly
CF83 8GL

Date Inspection Completed

07/02/2024



About Ty Anwen

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Pobl Care and Support Limited
Registered places	16
Language of the service	English
Previous Care Inspectorate Wales inspection	05 December 2022
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

Ty Anwen is a specialist mental health service, which provides care and support for up to 16 adults. The service has a focus on supporting people with their rehabilitation from mental ill health to prepare them to live more independently when they are ready to do so. People are involved in their own care planning and are supported to achieve positive outcomes.

People told us they feel safe and well supported. Personal plans focus on the strengths the person and what they want to achieve. We saw some plans were not up to date or contained some conflicting information. Care staff record clear, detailed notes to evidence how people are supported on a day-to-day basis. The service has a medication management policy, but we found some areas of this had not been followed recently.

The Responsible Individual (RI) visits the service regularly and is supported by a senior management team to have an effective oversight of the running of the service. The service has been impacted by recruitment difficulties, which is a sector wide issue. Regular relief workers are used as much as possible, and the provider has taken positive action to address the recruitment difficulties.

Well-being

People have control over their day-to-day lives as much as possible. We saw people socialising with each other and engaging positively with care workers. People choose where to spend their time. We saw some people spending time in their flats, others being supported with daily chores and going out to visit relatives.

People are supported to achieve positive outcomes. We saw evidence of people gaining increased independence in a number of areas. These include people moving on to less supported environments, learning new skills and following new interests, like photography, baking, and looking after pets. The service employs an enablement and engagement coordinator who organises group trips and activities as well as consulting with individuals about how they would best like to spend their time. One person told us they were looking forward to enrolling on a new college course.

Residents have chosen to change the current communal pamper room into a sensory room, which the provider plans to complete. The outdoor space includes a chicken coup, which residents have named 'Cluckingham Palace,' raised beds for planting vegetables, and a sensory garden area is being designed using ideas from the residents and staff team. People are encouraged and supported as required to complete their own food shopping and cooking, with a communal meal provided on Sundays.

People feel their views are listened to and acted on. Regular house meetings are held to gain feedback on the running of the home and specific topics, like upcoming events, or proposed changes to the environment. One person told us they had raised an issue which was quickly dealt with by the manager. People we spoke to were very complimentary about the service. One person told us "The staff are really good here. They encourage and support me a lot. I have made a lot of progress and am starting to look at moving on to my own place, which would be great." Another person said "It's all good here, I have learned a lot of new skills and can look after myself much better now. The staff are always around if I need anything or just feel like a chat."

The service helps to protect people from abuse and neglect. Care workers complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the current guidance and is kept under regular review.

Care and Support

The service considers a wide range of information about new residents before they come to live at the home. This ensures the service is confident it can meet the persons needs and preferences, and that the person is compatible with others. People receive care and support as and when they require it. We observed care workers to be attentive and supportive to people. The care needs and preferences of each person are clearly documented. Plans contain a detailed social history of each person so care staff can get to know them and their lives before coming to the home.

Plans are reviewed with people but not always as frequently as required. We found some conflicting information in different documents within people's care records. An example of this related to someone's level of independence in managing their medication. We also saw identified areas of risk for one person without the corresponding current risk assessments easily available. While no immediate action is required, we expect the provider to take action and will review this at our next inspection.

Care staff make frequent and detailed records of the care and support they have provided to people. Each person has an allocated key worker, who is the main point of contact for them. They discuss the person's progress with them and any difficulties they are experiencing, before agreeing on the course of action they would like to take and how they would like to be supported to achieve their current goals. Referrals are made to health and social care professionals as and when required. People are registered with a local General Practitioner (GP). Records are kept of all appointments and outcomes for review as required within the daily notes. The service works closely with each person's external care team.

People are encouraged to manage their own medication as much as possible when it is assessed they are safe to do so, with support provided as required. Systems are in place for the safe management of medication within the service. We found the service has not always followed these systems. There are gaps in medication records, and the home did not have an accurate record of all medication held. While no immediate action is required, we expect the provider to take action and will review this at our next inspection.

Environment

People benefit from a safe environment; the front door is kept locked. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency. The home has a five-star rating from the food standards agency which means that hygiene standards are very good.

The standard of cleanliness is good in the home, and it is maintained to a good standard. The environment is light, bright, and homely throughout. Each person has their own studio flat which is personalised to their tastes and contains kitchen and bathroom facilities. Risk assessments are completed and reviewed to identify which facilities are most suitable for each person to have available. People told us they like having their own space and staff support them to clean their flats if required.

The home benefits from a large communal lounge downstairs, with comfortable furniture and a large screen TV. There is a separate lounge upstairs, which is not currently in use and is planned to be refurbished. The communal dining room allows for people to have a social meal experience if they choose to do so. A separate activities room is well equipped, with a pool table, piano, and arts and crafts supplies. There are quiet rooms on each floor to allow people to meet with their keyworkers in privacy if they choose not to use their own flats for this purpose.

The outdoor space includes a central courtyard area which has some raised planters, a covered outdoor seating area, various seats and benches, outdoor games, and a 'Tiki' bar for non-alcoholic drinks. A further garden area is at the rear of the property which has vegetable beds for people to use in the planting season and a chicken coup.

Leadership and Management

The RI has undertaken regular quality assurance checks by visiting the home to talk to individuals and care staff and review documents. The RI completes detailed, thorough, and comprehensive audits of the quality of the support provided as well as the wider running of the home. The reports highlight where the home is performing well as well as areas for improvement.

Overall, people benefit from effective leadership and management. There have been temporary management arrangements in the home in recent weeks which have led to some staff feeling there is a lack of clear direction for them to follow. We have spoken with the RI and are satisfied with the measures taken to address this. The role of Clinical Lead is being replaced with a second Team Manager to support the home manager. The service has recently recruited some permanent staff which will reduce the need for reliance on agency staff. Care staff are safely recruited. We viewed a selection of staff personnel files and saw they are well organised and include the required information. This includes evidence of registration with Social Care Wales, the workforce regulator, Disclosure and Barring Service (DBS) checks, and references from previous employers.

The statement of purpose accurately reflects the service provided. There are enough care workers on duty to support people in a relaxed and unrushed manner. The home has increased usual staffing numbers whilst using agency staff to compensate for them not being as familiar with residents as regular staff are.

Care staff receive regular training in areas relevant to their roles and responsibilities. The provider employs a behavioural specialist to advise and support the staff team and the home manager on specific issues. Care workers receive regular supervision with their line manager. This one-to-one support provides opportunity for staff members to discuss any concerns or training needs they may have and for their line manager to provide feedback on their work performance.

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

16	Not all personal plans are reviewed at the required minimum frequency, of every three months. Not all plans relate to peoples current care and support needs. There is some conflicting statements in plans for people. The provider must ensure all plans relate to peoples current care and support needs and are reviewed at least every three months.	New
58	The service did not have accurate records of all medicines held in the home, as two individuals had collected their own medication and not booked it in with care staff. Medication charts and temperature records are not always completed accurately.	New

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