



## Inspection Report on

**Ty Anwen**

**Ty Anwen  
The Bryn Trethomas  
Caerphilly  
CF83 8GL**

## **Date Inspection Completed**

22 June 2021

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## 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	28 November 2019
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service.

### Summary

Ty Anwen is a care home, which is able to accommodate up to 16 residents. James Wadlow is the Responsible Individual (RI) who has overall accountability for the service. A suitably experienced and qualified manager oversees the day-to-day running of the home and they are registered with Social Care Wales.

People are happy with the service they receive and speak highly of the staff and management. People get the care they require, as and when they require it, from staff who are suitably trained, well supported and feel valued by their employer. Some improvements are required with the recruitment process for care staff.

Care staff and residents have positive relationships. Care staff understand the needs of the people they support well and deliver care in a respectful and dignified way. People have control over their own lives and are able to make their own choices as far as possible. Care documentation is robust, easy to understand and reflective of the person being cared for. Referrals are made to external professionals such as General Practitioners (GP's) and district nurses as required.

The environment is clean, warm and welcoming; a project is ongoing to improve the environment to the tastes and needs of people who live there. People have their own rooms with kitchenette and en-suite facilities, which are personal to them and contain their own belongings. The home also has communal kitchen, dining and lounge areas for residents to use.

## Well-being

The individual circumstances of people are considered. We saw that all care planning documentation is person centred and specific to the person being cared for. Individual preferences, likes and dislikes are recorded and people have autonomy over their own lives. Detailed risk assessments are in place so people are supported to be as independent as possible whilst maintaining their safety. We saw that people have choice about how and where they spend their time, with activities readily available.

The manager told us about the ethos of the home, which has an emphasis on supporting people to live more independently and preparing them for 'move on' options whenever possible. People feel positive about being able to make progress in their own time. People are involved in the running of the home and key decisions about how it operates.

People are supported, as required, to buy food and cook for themselves throughout the week with a communal meal provided each Sunday. Care staff deliver person centred care and have a good understanding of people's preferences. Senior staff on duty are confident in their roles and make referrals to external professionals as required. People have their own rooms, which are warm, clean and personalised to their own taste. People have family photos, flowers, cards and trinkets in their rooms, which gives a homely feel to their surroundings.

People are treated with dignity and respect. People are supported to maintain their personal appearance and all residents are clean and well cared for. Care documentation highlights what people are able to do for themselves and care staff encourage people to be as independent as they can be. Staff support people with care, compassion and good humour. During the visit, we saw staff sitting with residents; engaging them in conversation and encouraging them to join in with activities.

People can be assured that they are protected from harm or abuse. Staff are trained in the safeguarding of adults at risk of abuse and understand how to report suspected abuse. A safeguarding policy is in place, which refers to current guidance. The home is secure and monitors visitors entering the building. Ty Anwen is clutter free and safe from hazards as far as practically possible. There is a lift for people to access alternative floors safely.

## Care and Support

People receive the support they require, as and when they need it. Throughout the visit, we saw there were sufficient care staff on duty to support people, as they required it as well as engage with people in conversation and activities. We saw staff interacting well with residents and evidence of positive relationships. Staff provide care with genuine warmth and compassion. One person we spoke with told us *“I love it here, the staff are great. I can do my own thing when I choose but there is always someone around to support me when I need it.”* Another person told us *“I like it here, the staff are able to give me time to talk when I need it and I can talk through anything that is going on in my mind.”* We spoke with two visiting professionals who were both complimentary about the service, the quality of care delivered and the communication from the management team.

Residents' files contain all the required information including risk assessments and personal plans of care. These are reflective of the person being cared for and regularly reviewed. We saw evidence that referrals are made to external professionals as required and any guidance or information was fed into personal plans and followed correctly. People have weekly sessions with a member of their allocated 'keyworker team' who they choose. The key worker sessions are recorded, and used to inform the persons reviews.

People are supported to safely access their medication depending on how independent and confident they are. Medication records did not contain people's photos but this was rectified during our visit when we made the staff aware. Regular audits of medication management are carried out and best practices are followed.

People can be assured that they have choice and autonomy. We saw that personal plans of care highlight people's preferences, likes and dislikes. During the inspection, we were able to see that staff understood people's needs and preferences. We saw that some people chose to engage in activities while others chose to spend time doing other things of their choice, including chatting to staff or watching TV in their room. We were told that during the pandemic the home has been using technology for people to maintain contact with their families.

Robust infection prevention and control procedures are followed. We saw staff all wearing the appropriate personal protective equipment (PPE) through our inspection visit.

## Environment

People live in an environment that meets their needs and promotes their well-being. Ty Anwen is warm, welcoming and free from malodour. The home is currently undertaking a project to involve the residents in how the environment can be improved to meet their needs and requirements. A 'relaxation room' is nearly completed with a tasteful ocean scene full wall mural. Another room is planned to be used for beauty treatments. Some furniture was awaiting removal when we visited and some rooms not currently being used were cluttered. We saw that increased cleaning was taking place due to the pandemic, and PPE and hand sanitizer was readily available throughout the home. The central courtyard area is spacious, well laid out with a selection of well-maintained garden furniture and plants. Residents have decorated this area to their tastes.

The home has a five star rating from the Food Standards Agency, which is the highest rating possible and means the hygiene standards are very good and comply with the law. We viewed a selection of bedrooms and saw that they are warm, clean, and personalised to each resident's tastes.

People benefit from a safe and secure environment. On arrival, we found the main door secure, were asked for identification and to sign the visitors' book before we were authorised access. There are window restrictors in place and harmful chemicals are stored safely and securely. We viewed the maintenance file and were able to see that all serviceable equipment has been serviced to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living at the home have a Personal Emergency Evacuation Plan (PEEP), which is important as it guides staff on how to evacuate people in an emergency.

## Leadership and Management

People benefit from effective leadership and management. We discussed one specific area described in the statement of purpose, which was not clear. This was updated during our inspection. The model of care documented in the statement of purpose now accurately reflects the support provided. This was evidenced through reviewing people's personal plans, discussing people's care and support with them and through discussions with care staff.

The RI has undertaken regular quality assurance checks to ensure that the service is fully compliant. These reports are comprehensive and clearly identify the service areas to be improved as well as celebrating the home's successes. Feedback from residents and staff is used to inform the quality assurance process. Referrals are made to the local Safeguarding team in a timely manner and the provider actively engages in processes to ensure people are kept safe and free from harm. Notifications are sent promptly to Care Inspectorate Wales (CIW) and the provider is open and transparent in their dealings with the regulator. The provider has relevant policies in place, which are kept under review.

Care staff 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. Care staff have the opportunity to attend regular team meetings to discuss the operation of the service and contribute any ideas they may have. We saw that personnel files are well organised but the required information is not available for all staff. We expect the provider to take action to address this and will follow it up at the next inspection.

Staff told us that they feel valued and well supported in their duties. Additional support is provided to staff after difficult incidents and the well-being of staff is treated as a priority. The manager is well regarded by the staff team, residents, visiting professionals and the senior management team. The manager and clinical lead are approachable and lead by example in running the service. Care staff are well trained in all aspects of their work and have all received a 're-set' training week recently to consider how they put their learning into practice with the people they care for and support.





**Areas for improvement and action at, or since, the previous inspection. Achieved**

None

**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None

**Areas where priority action is required**

None

**Areas where improvement is required**

Ensure that the required information for staff pre employment checks are kept at the service for inspection

The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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