



Inspection Report on

Swn-y-Mor Care Centre

**Swn-y-mor Care Centre
Scarlet Avenue
Port Talbot
SA12 7PH**

Date Inspection Completed

30 November 2021 & 1 December 2021

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About Swn-y-Mor Care Centre

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Speed 9395 Limited
Registered places	91
Language of the service	Both
Previous Care Inspectorate Wales inspection	Click or tap here to enter text. 10 March 2020
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Swn-y-Mor Care Centre provides people with experiences that enrich their lives. Staff know what really matters to people. They respect people's individuality and are kind and compassionate in their approach to care. People are supported to be as healthy as possible. Care workers provide appropriate care and regularly monitor people's safety and well-being. People have input, as needed, from specialist health services. Care workers support people to keep occupied and to maintain important relationships.

The accommodation is spacious yet homely. There is a good range of facilities to support people with indoor and outdoor activities. People enjoy a lively, sociable atmosphere. Many parts of the home offer views of the seafront. The home is clean, well decorated and in a good state of repair. A good standard of hygiene and infection control is promoted.

Managers lead by example. Action is taken promptly to address any issues experienced by those using the service. There are systems in place to monitor and improve standards. Staff have confidence in managers and are supported to carry out their roles effectively. Administrative processes need to improve with regards to staff recruitment. Work is underway to ensure staff receive the appropriate level of formal supervision and appraisal.

Well-being

Swn-y-Mor Care Centre has a warm, welcoming atmosphere where staff prioritise the needs of its residents. People told us they enjoy life at the home and have confidence in the care they receive. One person said, *"I was looking for faults but I haven't found any"*. Another person commented, *"I have no complaints"*. People's individual care and support needs are identified within personal plans that are regularly reviewed. Care workers support people in a dignified, appropriate way. They make sure people receive the specialist support they need from health services. People's medicines are managed and administered safely. There are appropriate measures in place to reduce COVID-19 and other infection risks. Standards of care are monitored by the responsible individual (RI) and management team. The service has received compliments about the level of care and attention people receive.

The service helps protect people from harm and neglect. We found that people feel safe in their home. One person told us their mental well-being had significantly improved since they moved in. The service maintains appropriate staffing levels to meet people's care and support needs. Care workers regularly monitor people's safety and well-being. The service's safeguarding policy reflects Wales Safeguarding Procedures and includes contact details for agencies involved in the safeguarding process. Staff understand their responsibility to report concerns about people's welfare. Records confirm that the majority of staff are up-to-date with their safeguarding training. Care workers have confidence that nursing staff and management will respond to concerns quickly and appropriately. The service is improving its recruitment process to make sure all staff are appropriately vetted. The home's equipment and facilities are well maintained. Measures are in place to reduce environmental risks to people's safety.

The service supports people to have choice and control over how they are cared for. Care records identify people's care preferences and routines, which staff know and respect. Risk assessments outline how staff can safely support people in their chosen activity. People are supported to keep in touch with their family and friends. One person told us they were able to meet a new family member through their window, which they very much enjoyed. Staff make sure people understand COVID-19 restrictions and how these might impact on their day-to-day activity. Staff work hard to promote people's wellbeing by regularly interacting with them and adapting the way they provide activities.

People live in clean, spacious accommodation that has the facilities to promote their comfort and well-being. People are able to have privacy in their own rooms, where care workers make sure they have access to the items that are important to them. There are many communal rooms where people can socialise with one another and enjoy various activities, such as arts and crafts, church services and bingo. The service has a programme in place to make sure rooms are well-maintained and decorated to a good standard. People have easy access to the seafront on which the home is located. Transport is available to support people with outings.

Care and Support

People are supported by caring and attentive staff. We heard people having light hearted conversations and sharing jokes with various members of the staff team. One person said, *"I like to tease the staff"*. A relative told us, *"Staff are all friendly."* Care workers know what really matters to people; they acknowledge people's individual struggles and make every effort to address these. We found people to be clean, comfortable and content in their home. They had easy access to refreshments and items that were important to them. Records show that people have regular interactions with care workers when being cared for in their rooms.

Despite facing difficult COVID-19 restrictions, staff make every effort to keep people occupied. People keep in touch with family and friends through phone calls, video calls, window visits and indoor or outdoor visits, as able. The service has adjusted the way it provides some activities to reduce COVID-19 risks. For example, a surround sound system in the cinema room and library allows church services to be streamed every week. People have also enjoyed playing socially distanced bingo. Technology is being used to enable people to listen to their preferred music when they want to.

Care records are held on an electronic database, which helps care workers make accurate, time-specific recordings about the care they provide. People's care and support needs are outlined within personal plans that are supported by appropriate risk assessments. These are updated regularly to ensure they remain accurate. They include detailed information about people's care preferences, routines and the health and safety equipment they need. The level of detail within the 'Who I Am' section varied and did not always capture people's social and family histories. The manager told us this is a relatively new area of the database in use, and work to gather personal information is ongoing.

Care workers access medical and specialist services to promote people's health and well-being. For example, people have recently received input from the diabetic nurse, palliative care team and community dietician. Records show that care workers seek urgent medical attention in response to significant changes or concerns about people's health. People told us they feel safe and confident in the care they receive. One person explained how care workers assist them using moving and handling equipment. They told us they are *"never rushed"*. Care recordings show that people receive appropriate support to maintain a suitable diet and healthy skin. People choose from a daily menu and catering staff are clear about people's special dietary needs. Care workers monitor and record people's weight in line with their personal plans.

The service manages people's medicines safely. Staff wear tabards when administering medication to help prevent them being disturbed. Medication records show that people receive their prescribed medication at the appropriate time. People receive 'as required' medication if needed to promote their comfort and well-being. The service is using a new pain tool that uses photos and questions to help identify if people who are unable to verbally express themselves are experiencing pain. Staff check fridge and room

temperatures to make sure medicines are being appropriately stored. There is a detailed medication policy to support safe practice. Monthly audits show good overall compliance with the safe management of medicines.

Environment

The service provides comfortable, homely accommodation and has a good range of facilities. There are four units over two floors, each with its own identity. There are communal rooms on every unit designed for different purposes. These include a cinema room and library, craft room and restaurant. There is additional communal space between the two units on each floor, which residents share. People have en-suite facilities within their rooms and there are communal bath or shower rooms on both floors. Some parts of the home need redecorating, which is included in the service's redecoration plan. Records show the majority of planned upgrades have been carried out. We saw that some areas have recently been decorated to a very good standard. A new conservatory has been built and is expected to be approved for use soon.

The home is set along Aberavon beach, which provides wide views of the coast in many areas of the home. An activity coordinator told us people use beach chairs to spend time with their families on the beach during the summer. The home's side garden features a small golf course. We saw colourful artwork representing the local area and numerous Christmas-themed decorations that residents had personalised. People enjoyed the buzz of activity and sense of excitement as Christmas decorations were being put up in the open lounge and bar on the first floor. There is a hairdressing room available. Wooden sweet and ice-cream carts have been created by the maintenance officer. The service has a wheelchair accessible bus and will use additional taxis, if necessary, to support outings.

There are measures in place to reduce health and safety risks. A visitors' book has been reintroduced to monitor those entering and leaving the building. Keypads are fitted to doors leading to potential hazards, preventing people accessing these areas without the necessary support. Window openings are restricted to prevent possible falls from height. The service has complied with the requirements of the fire service. Records show that equipment has been serviced within the last year to ensure it is in good working order and safe for use. This includes the passenger lift, fire safety equipment, hoists and specialist baths. A gas safety inspection has also been carried out within the last year.

The service promotes a good overall standard of hygiene and infection control. Public Health Wales guidelines are being followed with regards to the routine COVID-19 testing of staff and visitors. Dedicated staff are allocated to assist with this due to the size of the home and staff team. There is a clear and informative hygiene and infection control policy in place. We saw staff wearing personal protective equipment (PPE) appropriately throughout the inspection. Private and communal areas are generally clean and hygienic. However, we saw discarded equipment and detergent spills in one corner of the laundry room and found two people's bedrail bumper pads to be in need of a clean. These were dealt with promptly by the manager, who gave assurances that the cleanliness of the laundry room and resident equipment would be monitored closely. The service was awarded a food hygiene rating of 5 (very good) following an inspection by the Food Standards Agency in 2019.

Leadership and Management

Managers prioritise the needs of residents and make sure the service runs smoothly. There is a strong sense of teamwork amongst staff. Staff described managers as “very good” and told us they were confident in their ability to deal with any issues. Records show that managers respond to complaints promptly and appropriately, in line with the service’s complaints policy. Care workers have received many cards and letters thanking them for the care and attention they have given residents. An independent person is tasked to carry out six-monthly quality of care reviews in order to provide an impartial view about people’s experiences. The RI formally assesses standards by visiting the home and reviewing information remotely. The RI had not reported on his findings from the previous three months due to a delayed site visit. He gave assurances that assessments, including those carried out virtually, would be formally recorded every three months, as is required.

The administration process needs to improve with regards to staff recruitment. We found that clear records had not always been kept of staff’s Disclosure and Barring Service (DBS) checks. Some DBS checks had also not been renewed after three years. This is an area for improvement we expect the provider to act upon. As such, the service is prioritising the recording and renewal of staff’s DBS checks. The manager is also reviewing records to make sure copies of staff’s birth certificates and passports have been kept, if available. These issues will be followed up at the next inspection. Staff records are securely stored within the manager’s office. The service is in the process of transferring staff records onto an electronic database. The database will allow staff to access policies and procedures easily. It will also allow managers to check that staff have received important information.

The service is improving levels of staff training, supervision and appraisal. Records show that these have increased over recent months. The manager uses a colour coded training matrix to monitor staff’s completion of training. Staff told us they receive reminders when their training is due and are given a timeframe to complete this. The manager has a system for monitoring the formal supervision and appraisal of staff. Although some are overdue, staff confirmed they feel supported in their roles and have regular informal supervision due to the impact COVID-19 has had on their work. The manager will ensure formal supervision and appraisals continue and are recorded.

The service maintains appropriate staffing levels to meet people’s care and support needs. Despite increased pressures as a result of the pandemic, care workers told us they are able to provide people with the level of care and support they need and want. Care workers receive updates about people’s well-being during shift handovers, or directly from nursing staff if there are changes during shifts. Rotas show that staffing levels are generally maintained as planned, in line with the service’s statement of purpose. This is a document that sets out the vision for the service and demonstrates how it intends to promote the best possible outcomes for the people it supports. We found the statement of purpose to accurately reflect the values shared by the staff team: *‘We believe care is about what you can do rather than what you can’t do’*.

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
35	Evidence of DBS checks not consistently retained within staff personnel files. Renewals not processed every three years.	New

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