



## Inspection Report on

**Ty Hafod**

**Ty Hafod  
Llantrisant Road  
Cardiff  
CF5 6JR**

## **Date Inspection Completed**

02/03/2023

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## About Ty Hafod

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Ty Hafod Care Ltd
Registered places	27
Language of the service	English
Previous Care Inspectorate Wales inspection	21 August 2020
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

There has been a recent change of Directors at the service. At the time of our inspection visit, they had already identified areas that require improvement which were being addressed. There is a home development plan in place which is being closely monitored. There is a new proposed responsible individual (RI) who is awaiting to be determined as suitable by Care Inspectorate Wales (CIW).

People told us that they value their relationships with caring and respectful staff. People are happy living at the home and we saw good relationships with staff. Relatives are kept informed of any information relating to their loved ones and they are always welcomed when they visit. The home values the importance of maintaining communication with relatives and representatives.

Personal plans are in place that need further work to ensure they are updated to correctly guide staff on how best to support people. There needs to be improved oversight and practice in the management of medication to maintain people's health and well-being. Staff deployment of staff needs to be reviewed to ensure people receive timely care to meet their personal outcomes. Staff told us they receive regular training to understand the needs of people they support.

People are cared for in a warm, clean, and comfortable environment and have their own bedroom which is personalised. There is a choice of food and drinks available for people and those with specific dietary requirements are also catered for. There are safe arrangements in place to ensure facilities and equipment is regularly serviced.

## Well-being

Not all personal plans are accurately reflective of people's needs as we found instances when the information had not been reviewed or updated when there are changes. This is important as personal plans inform staff how best to support people and any associated risks they may face. People's health is being monitored and external professional support is arranged when needed. The care staff we spoke with were knowledgeable of people's needs and their preferences. We saw people are given choices but they should be given the opportunity to be involved in their reviews to inform how they would like to be supported. This would also give opportunity for people to raise any concerns. People told us that staff are always kind, caring and respectful. The deployment of staff allocated should be reviewed to provide people with safe care and support in a timely way. People are not given regular opportunities to participate in activities of interest as there is no activities coordinator in place at present, but this is being addressed. There needs to be improved practice and oversight of the management of medicines to ensure people receive medication at the right time. Staff receive regular training to understand the people they support. The staff we spoke with are knowledgeable of people's needs.

People are living in an environment that will protect them from harm. This is because the facilities and equipment are regularly serviced. Staff are appropriately using personal protective equipment and there are satisfactory standards of hygiene to reduce the spread of infection. There is equipment and facilities available to support people with different needs and requirements. Areas that would pose a risk to people are kept secure. People have their own bedroom and like the personal space. People are encouraged to bring items that are important to them when they move into the home.

People can be confident that there is governance at the service. Although there is a recent change of Directors; they are committed to investing in the service to make improvements and shape the service for the future. There is a senior management team available to support the manager and the home. The manager feels well supported by the company. There are quality assurance arrangements in place to closely monitor the service and identify when improvements are required. The home has a new development plan in place which is being monitored.

## Care and Support

People would benefit from engagement in social activities of interest and to do things that matter to them. The service provider has advertised for an activity's coordinator for the last six months but there has been little interest, until recently. We found that staff actively engage with people but they have limited time to fulfil people's social needs and help them to do things that matter. We found people are not provided with items of interest or comfort. The TV is on in communal areas, but many people are not watching it, with people asleep or disengaged. Some people spend long periods of time in their bedroom but records show limited opportunities for one-to-one engagement from staff which increases the risk of isolation. People are actively involved and encouraged in the day to day running of the home but the meetings are infrequent. These meetings show that people value and look forward to activities.

People's needs are not always met in a timely way. People are complimentary about staff and comfortable in their company. We saw care staff are busy but despite this they are kind, respectful and professional in the way they support people. Recruitment has been challenging over recent months which has resulted in agency usage. The service provider told us that they have recently identified that extra staff are required due to the current needs of people living in the home. We observed how the lack of support directly impacts on people's safety, independence, and well-being, despite the best efforts of a dedicated care team. This included delays in staff being able to respond when people require support, particularly during busy periods of the day which caused distress and upset for a few people. There has been a good response to a recent recruitment drive so the provider has given assurances that staffing numbers will increase during the busiest time of day and use of agency will reduce. We saw people enjoying a social opportunity during mealtimes and observed choices of food and drink offered.

People's personal care plans do not always contain accurate and current information. These documents are important as they guide staff on how best to care for people correctly and the associated risks. This was because of infrequent reviews taking place and changes in people's needs which were not reflected. In the main this was due to agency nurses being used which can result in lack of continuity. Inaccurate and contradictory information can place people at risk of receiving incorrect care and support, particularly if they are new staff. We found records do not evidence people have been involved in care planning or reviews to confirm how they want care and support to be delivered. During our visit, the manager took immediate action to address the issue. We saw evidence that referrals are made to external health and social care professionals when required and their advice and guidance is followed correctly. Care records show that people receive regular repositioning, nutrition and fluids, and continence support to ensure their personal outcomes are met. The home consistently monitors people's health and well-being.

People cannot be fully assured that they will receive medication at the right time. There are safe arrangements in place to ensure medication is stored securely but on the day of our visit the room was unlocked. We found consistent gaps in the room and fridge temperature recordings which can compromise the effectiveness of medication. Most medication quantities are recorded but there are a few instances noted, particularly when there is a new person moving into the home when quantities are not recorded. When people are given 'when required' medication the reason for the administration is not always recorded and the effectiveness not monitored. We found some gaps in medication administration records (MAR) charts which showed that some medication had not been administered. In addition, the omission was not identified for action to be taken. The medication policy could not be located by two nurses we spoke with, but later found by the manager. The policy should be easily accessible at all times to follow, and nurses including agency should confirm their understanding of the safe arrangements in place. However, the nurses we spoke with were knowledgeable and experienced in the administration of medication. Records shows that nurses undertake regular training and competency assessments before administering medication. The manager audits the management of medication which identified practice issues but failed to be adequately addressed as there was repeated failings for the last four months.

## Environment

People live in an environment that meets their needs. The home is warm and welcoming. The home is bright, airy, and communal areas provide people with the opportunity to socialise and dine with others. There is sufficient toilets and bathrooms with adapted equipment to meet people's mobility needs and ensure their comfort. People personalise their bedrooms with photos and keepsakes which promotes a feeling of belonging. The home would benefit from some objects of reference on bedroom doors to help orientate people living with a memory or sensory impairment. The bedrooms offer space and privacy which they are free to access as they wish. People tell us they like their rooms. We found that some communal areas required redecoration and replacement flooring in some areas. We were informed that the service has recently developed a refurbishment programme and work had already commenced on the ground floor. The garden provides pleasant views and people told us they enjoy spending time in the garden.

People can be assured that they live in a safe environment. There are arrangements in place for routine servicing of facilities and equipment. There is good oversight of routine maintenance checks to ensure the safety in the home is maintained. Areas that would pose a risk to people with a memory impairment are kept secure. We saw harmful chemicals are stored securely and hazards have been reduced as far as reasonably practicable. Everyone living in the home has a personal emergency evacuation plan which is readily available. There is a fire risk assessment in place which is reviewed regularly to reflect any changes. However, the last fire evacuation drill took place a few months ago but did not include people living in the home, nor confirm if there were sufficient numbers of staff to facilitate a safe fire evacuation, but this was being addressed by the manager.

There are arrangements in place to maintain infection control. We saw staff appropriately wearing Personal Protective Equipment (PPE) when direct care is required. There are clinical waste arrangements in place to ensure items are appropriately disposed. There are sufficient supplies of PPE throughout the home. We found the home was clean throughout. The service provider recognises the importance of maintaining regular visits with relatives and friends and we saw this was encouraged when safe to do so.

## Leadership and Management

There has been a recent change of Directors at the service. There is a new proposed RI that is awaiting to be determined as suitable by CIW. The manager was appointed in March 2022 and has settled into their role. They are working towards achieving their required management qualification and awaiting to be appropriately registered with Social Care Wales, the workforce regulator. The service provider told us that they are committed to investing in the home to secure the necessary improvements and develop the service. This will also include the appointment of a deputy manager and senior staff which will strengthen the oversight of the home.

People can be confident that there is good governance and oversight of the service. The new RI has recently visited the home to seek the views of people and evaluate the quality of the service. There is a senior management team working alongside the manager to develop the service. We saw that the service provider is starting to introduce robust quality assurance systems to monitor the performance of the home and identify any patterns and trends to act when needed. This information will inform the six-monthly quality care report. The home has a new development plan in place and progress is closely monitored. The manager told us that they felt supported by the company. We were told that surveys have recently been given to people using the service, their representatives, and staff to seek their views which will be evaluated. The home actively communicates with people's families and representatives through newsletters and social media. We will consider this area fully at the next inspection.

Staff personnel files show that there are safe recruitment and checking arrangements in place to protect people at the home. Staff told us that they receive regular training for their role but supervision should take place at least three monthly for all staff. This is important as it gives the opportunity for staff to discuss practice issues and future development needs. Staff feel supported by the manager. We were unable to fully examine this area as the training information was being inputted into a new electronic system. New service policies and procedures have been developed which are currently being issued to staff. We will consider this area fully at the next inspection.



### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
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36	Staff to receive regular supervision and the opportunity for an appraisal to reflect on their practice and identify their personal development needs	New
15	Staff to be provided with up to date personal plans which sets out how best to support the person and the associated risks.	New
16	People's personal plans to be reviewed as often as necessary when there are changes and at least every three months. People or their representatives to be given the opportunity to be involved in their review to seek their views and preferences	New
34	Staff to be appropriately deployed to ensure people's personal outcomes are consistently met and their dignity is maintained	New
58	To have effective arrangements in place for the administration and recording of medication. To improve oversight in the auditing of medication in the home and action issues when needed to protect people's health and well-being.	New

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