

Inspection Report on

Ty Hiraeth

Ty Hiraeth Bryn Road Llanelli SA14 7PW

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

21/12/2022

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About Ty Hiraeth

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	M&D Care Limited
Registered places	11
Language of the service	Both
Previous Care Inspectorate Wales inspection	28/05/2021
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

A review and reorganisation of the leadership and management has been conducted which is proving to have a positive impact on the service. Monitoring and auditing processes have been strengthened. The managers of the service are well supported, and the Responsible Individual (RI) has oversight of the service.

People's care and support plans are detailed and provide a good sense of the individual and their complex needs. Care staff have a good understanding of people's needs and how to support them. People's individual health and wellbeing are important to those providing the care and support. Communication with external health and social care professionals continue to play an important role to ensure people remain safe and their personal outcomes achieved.

The environment has been designed to support the safety of people living and working in the service. There are currently two buildings to the service, the main house – "Ty Hiraeth" and the bungalow – "Ty Richards". The provider is planning to apply for separate registrations with CIW in the future.

Well-being

People are treated with dignity and respect. Care workers speak warmly about the people living in the service and have a good understanding of the person, their needs and how to meet these. Care workers interact with and support people in a caring and thoughtful manner. Care records and risk assessments are detailed and give a good sense of the individuals. External professionals are actively involved in the individuals care and support and praise the service provided in Ty Hiraeth.

Recruitment measures ensure staff working at the home have the right skills and approach to care. Policies and procedures are in place to support good practice, and these are reviewed regularly. There is good oversight of the service by the managers, head of service and the Responsible Individual (RI).

People do things that make them happy. People have access to a range of activities both external and within the service. People were seen participating in and enjoying activities during the inspection. One person showed us what they had bought during a shopping trip; *"I like my new phone and jumper".*

Care and Support

People receive care and support from staff who have a good understanding of their complex needs and how best to support them. Care records are comprehensive and provide a good picture of the individual. The care plans and associated risk assessments are reviewed regularly. Staff are mindful of escalations in people's behaviours and there are clear plans for them to follow to support the individual during these times. Health and social care professionals are actively involved with people, and this is well documented in their care records. Communication between all parties is important to ensure people remain safe and their personal outcomes are achieved.

Whilst some people living in the service are unable to fully express their opinions to us, people were seen smiling, laughing and engaging with care workers. Some people told us how much they like living in the service, the support from staff, their daily lives and recent purchases from the shops. Activities are person centred and are coordinated and reviewed with the individuals, family members and community teams. Staff speak warmly about caring for people and working in the service. Care workers told us *"It's great being part of the people we support lives and trying to help them"*, *"It can be very challenging work, but it is well worth it"* and *"the people we support are at the heart of what we do"*.

At the time of the inspection, no people living in the service communicate through the medium of Welsh. The Active Welsh Offer has been discussed with the managers and RI.

The catering service has achieved a 5* rating. The chef is knowledgeable about the variety and choices of food available and specific for people.

Sufficient staffing levels are in place to meet the care needs of people living at the service. Care staff told us they have enough time to support people appropriately. Staff respond to requests from people in a timely manner and interactions are friendly, respectful and unrushed.

Staff follow the current Public Health Wales (PHW) Guidance. Policies and procedures are in place to support good practice. Care staff are clear on these and their responsibilities around protecting people from infection and harm.

Environment

The service provides an environment which supports people to achieve their personal outcomes. The layout of the environment enables people to use the facilities available to them safely. Individual apartments are designed with the person in mind for their needs and enjoyment. There are health and safety features within communal areas and individual apartments to help protect people and staff members. The provider continues to learn and build upon improving the environment from other buildings they have developed.

Garden spaces are welcoming and offer the opportunity for people to use them for their own enjoyment and safety. The provider works with health and social care professionals to ensure the environment is meeting the individual assessed needs of people.

Arrangements are in place to minimise risk to people's health and safety. All visitors are required to sign in and out of the service. Testing and servicing of fire-fighting equipment are completed within the required timescales. Personal Evacuation Plans are individualised and readily available in emergencies. Emergency alarms are accessible.

Substances hazardous to health are stored safely and communal areas are uncluttered and free from hazards. There are infection, prevention and control measures in place by staff and managers. The service is clean with no malodours.

Leadership and Management

People living and working in the service are supported by a strengthened leadership and management team. A review and reorganisation of the leadership and management of the service has been conducted which is proving to have a positive impact on the service. There are separate managers for the main house and the bungalow. Both managers are well supported by their line manager, the RI and the organisation. The provider is planning on registering both services separately with CIW when additional building works have been completed and the manager for the bungalow is registered with Social Care Wales.

The RI undertakes Regulation 73 visits at the service. He has provided CIW with copies of reports that demonstrates he speaks to people and staff as part of his visits to the service. Staff confirmed this with us. Monitoring and audits undertaken by the manager and senior managers have been improved. Actions required from these audits are acted upon and reviewed regularly. On-line notifications are submitted to CIW in a timely manner.

People are supported by staff who welcome the changes in management and are well supported, trained and feel valued. Staff told us; "*Its great here! [manager]is a great manager, very clear on her and our roles. I have had great training and it really helps me to support the people living here*", *"I thoroughly enjoy working here. We get great support when there are incidents which really helps and shows we are valued*" and *"I feel the service is better since it split from the main house and has a separate manager and deputy. It benefits people we support too as they can have their medication promptly and they have more consistent staff. We have our own PBS manager, lots of training to better understand and support the people living here. I'm now having regular supervision with the manager".*

Staff records show they receive a comprehensive induction, receive regular supervision and an annual appraisal. Staff spoke positively about their inductions and feel it equips them to support the people living in the service. Staff attend a range of mandatory and specific training and the service's training matrix corroborates this. Care staff told us about the training they have attended and demonstrate a good understanding of their role in supporting the people in the service and protecting them from harm. Staff recruitment records hold all the required information and checks. A review of the recruitment of staff has been discussed with the RI and managers during the inspection. There are up to date and regularly reviewed policies and procedures in place to support staff.

On-line notifications are being submitted to CIW in a timely manner and at the time of the inspection the Statement of Purpose reflects the service being provided, but this needs to be kept under review.

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. Th 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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