



Inspection Report on

Llantrisant Care Home

**Llantrisant
Pontyclun
CF72 8LQ**

Date Inspection Completed

18/07/2024

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About Llantrisant Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Abraham Nursing Homes Limited
Registered places	38
Language of the service	English
Previous Care Inspectorate Wales inspection	13 July 2023
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

People receive compassionate care and support at Llantrisant Care Home. They are treated with dignity, respect, and supported to make their own choices. The home environment is safe and supports people to meet their needs. Systems are in place to help protect people from abuse and neglect. The service supports people to stay as healthy as possible and access the right support at the right time. Detailed care documentation is in place to support care staff to understand and meet people's needs. The service provides a balanced diet and varied menu. There are good infection control measures to help reduce the risk of transmission of potential sources of infection. Systems are in place to promote the safe management and storage of medication. The service is well run and has good governance, auditing, and quality assurance arrangements. Staff training and recruitment is safe and effective. Care staff are positive about working at the service and feel supported in their role. The service provides good information to the public.

Well-being

People are treated with dignity, respect, and supported to make their own choices. Care staff have accurate information on people's decision-making capabilities and what their preferences are. People told us they were happy with the service they receive and can do the things they wish. Where people have difficulties making their own decisions, the service works closely with families, and has also accessed independent advocacy when needed. The service has good relationships with relatives more generally, keeping them informed, updated, and involved in their relatives' care, such as reviews of personal plans. Friends and relatives can visit when they wish.

The service supports people to stay as healthy as possible. Issues with people's health and well-being are reported and referred to the relevant health professionals in a timely manner, with subsequent guidance acted upon. Personal plans are detailed, reviewed regularly, and reflect advice and guidance from external professionals. Meal options are balanced, and dietary needs are understood. Infection prevention and control measures are of a very good standard. People receive their prescribed medication as directed. People are supported to take part in meaningful activities. The service employs a fulltime activity coordinator, who arranges and engages people in a variety of activities. They are extremely enthusiastic, motivated, and are a positive and important resource which enhances people's well-being.

People live in an environment which supports them to meet their needs. Llantrisant Care Home is a purpose-built service set over two stories for older people with residential care needs or who have nursing care needs. Bedrooms are comfortable and personalised. There are sufficient communal areas and attractive gardens and grounds, which people can access. Mobility aids and adapted equipment is in place to help people where needed. The home is clean and well-maintained, with the correct checks and servicing in place for utilities and equipment.

Systems are in place to help protect people from abuse and neglect. Staff know their safeguarding responsibilities and how to report issues if they are concerned for a person's well-being. Staff feel confident if they raise an issue with the management team, it will be responded to. Ongoing training ensures staff are sufficiently skilled. Policies and procedures help support staff to ensure people are safe. Recruitment is effective, and regular staff supervision supports continued development. Incidents and accidents are logged, with appropriate actions taken by the service. Access to the service is restricted to authorised individuals.

Care and Support

People receive compassionate care and support. Interactions between care staff and people are relaxed, calm and respectful. People appear well cared for and settled in their environment. People told us “*there’s lovely staff*”, “*it’s an excellent service*”, “*they give me choice*”, and “*I’m well-looked after*”. Visiting professionals told us “*they’re very thorough*” and “*there’s good rapport from the manager*”.

Detailed care documentation is in place to support staff to meet people’s needs. The service assesses a range of information before people move in. Personal plans are person-centred and contain detailed information about the type of care and support people need and how best to deliver this. Accompanying risk assessments are in place. Plans are reviewed regularly with people and their representatives and updated following any significant occurrences or changes in need. Daily recordings and supplementary monitoring charts are completed, giving important information about people’s progress and identifying changes in care needs. Significant improvements of the completion of monitoring charts have been made since the last inspection. Appropriate referrals are made to external health professionals, with the service acting on recommendations and direction given. Deprivation of Liberty Safeguard (DoLS) applications are made where people lack mental capacity to make decisions about their care and accommodation.

The service provides a balanced diet and varied menu. A variety of options are available, with alternatives offered if needed. Food appears appetising and portion sizes appropriate. People have drinks to help keep them hydrated throughout the day and are supported at mealtimes when required. Dietary needs and preferences are understood and available to kitchen staff.

There are good infection control measures in place to help reduce the risk of transmission of potential sources of infection. There is an infection control policy in place which staff are aware of and understand their responsibilities. Staff have access to a supply of appropriate PPE. Domestic staff complete daily cleaning schedules. Laundry routines help reduce the risk of infection.

Systems are in place to promote the safe management and storage of medication. Medication is stored securely and can only be accessed by authorised care staff. Nurses and trained care staff accurately administer medication in line with the prescriber’s directions. An up-to-date medication policy in place. Medication is audited routinely.

Environment

People live in an environment which supports them to meet their needs. Llantrisant Care Home is located in a quiet and picturesque part of the countryside. The service is clean, tidy and free from malodours. The service is secure from unauthorised access, with visitors required to sign before entry and upon leaving. A lift enables access between floors. Bedrooms are comfortable and personalised to how people want them, with some having ensuite facilities. There are sufficient toilet and bathing facilities throughout. A lounge and dining area are available on both floors where people can have meals, undertake activities, and spend time with others. The kitchen facilities are appropriate for the home and achieved a Food Hygiene Rating of 4, which means they are 'good'. Several areas of the service have been refurbished to a very good standard in recent years, with the ground floor shower room recently being completed. We were told of plans to refurbish other areas of the home over the coming months, which would further enhance the environment.

The home environment is safe. Window restrictors are fitted in all bedrooms and bathrooms viewed. Fire exits are clear of clutter and obstructions, with no obvious trip hazards more generally. Substances hazardous to health are locked away. Maintenance and repair arrangements are in place. Records confirm the routine testing and maintenance of utilities, such as gas, electric and water. The auditing and servicing of equipment is up to date and fire safety drills and tests are completed. Personal emergency evacuation plans are in place to inform staff of the level of support people need in the event of an emergency.

Leadership and Management

The service is well run and has good governance, auditing, and quality assurance arrangements. The management team regularly audits a very wide variety of service areas, helping to identify what is working well and where improvements are needed. The Responsible Individual (RI) has good oversight of the service, undertaking three-monthly visits to meet with people and staff and evidencing this to a very high standard. The RI also completes six-monthly quality of care review reports, analysing the performance of the service and identifying actions to improve it where needed. Policies and procedures are in place, providing guidance to care staff on a range of service areas. The service gathers the views of people and staff. Procedures are in place to deal with complaints. The service is open and transparent, making the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences there.

Staff training and recruitment is safe and effective. Care staff files hold the correct recruitment information and evidence of required documentation, such as up-to-date Disclosure and Barring Service checks and proof of identity. The correct pre-employment checks are in place, such as references from the previous employer. Care staff are registered with the workforce regulator, Social Care Wales, and nurses are registered with the Nursing and Midwifery Council. New staff start work once they have completed an induction. Training records show care staff have up to date training in core areas of care, with nursing staff receiving additional training relevant to their role. Staff tell us they feel well-trained, able to perform their roles safely and effectively, and could ask for more training if they felt it was needed.

Care staff are positive about working at the service and feel supported in their role. They told us *“I love it here”*, *“it’s brilliant – we know what we’re doing”*, *“it’s a supportive environment”*, and *“it’s lovely – I feel like I belong and fit in”*. They also told us *“the manager is fantastic”* and *“she’s supportive, understanding and friendly”*. Many of the staff team have been in post for some time, helping to facilitate continuity of care and consistent support. Care staff have regular supervision and a yearly appraisal to reflect on their performance, identify support they might require, and discuss any issues. The manager told us staffing levels are worked out based on the level of need of people. The rota showed target staffing levels are met and were reflective of staffing on the day of inspection.

The service provides good information to the public. The Statement of Purpose sets out the service’s aims, values, and support provided, and is updated annually. A written guide contains detailed practical information about the service and the care provided, including information such as how to make a complaint.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
21	Care and support has not been delivered in accordance with people's personal plans.	Achieved
59	Monitoring charts are not accurate.	Achieved

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