

# Inspection Report on

Caeffair Ltd Affalon house nursing home

Caeffair Nursing Home 2 Felinfoel Road Llanelli SA15 3JG

## **Date Inspection Completed**

Date Last Inspection Completed Donot Delete

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## **About Caeffair Ltd Affalon house nursing home**

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Caeffair Ltd
Registered places	46
Language of the service	English
Previous Care Inspectorate Wales inspection	07 March 2022
Does this service provide the Welsh Language active offer?	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**

Affalon House Nursing Home is a large, 'grade one listed' building in Llanelli, close to a range of town amenities. The home is relaxed, warm and clean. People say they feel comfortable and happy. People choose where to spend their time, be it in their own rooms or with others in a choice of communal areas, including a small garden. Relatives talk highly of the home and are happy for their family members to be there.

Care workers are professional and treat people with dignity and respect. They feel well supported by senior staff, although individual supervision meetings and some staff training has lapsed over the past year due to staffing shortages. The Responsible Individual (RI), manager and deputy manager regularly make themselves available to people, relatives and staff members and prompt referrals are made to healthcare professionals where necessary.

### Well-being

Care workers listen to people about their care and support needs and are aware of the importance of each person's well-being. People's personal plans contain details of their lives, and information about individual preferences, family and friends who are important to the person. Relatives say they are consulted about updates to their family member's support arrangements and are invited to take part in reviewing their care plans. One person told us, "They always let us know if anything needs changing."

People and/or their representatives receive a copy of the service user guide when they arrive at the home: this provides details of the complaints process should they need to use it. People and relatives say they are confident to raise anything they want to discuss with the management team. One relative said, "We've never had to bring anything up, but I know they'd listen if we did."

The home provides the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. Signage around the premises is bilingual and Welsh is regularly spoken - there are people in the home who are Welsh speakers, and several staff members speak Welsh. In addition, documentation about the service, such as the service user guide, is available bilingually, in Welsh and English.

Care workers encourage people to make choices and decisions about how they spend their time, but some people told us there is, "little to do." There is an enthusiastic activities coordinator in place, but they are employed as a care worker for half their time due to current staff shortages. Therefore, fewer activities are being planned currently. There are activities planned for most afternoons each week, and this situation will improve when more employees can be recruited and retained.

#### **Care and Support**

The senior staff team considers a range of information to ensure they can meet people's needs before admission to the home. This includes obtaining information from social workers, previous placements or hospital discharge documents. Care records contain monitoring and assessment forms, including pressure area prevention charts and Moving and Handling assessments for people with poor mobility. 'Total care' records in peoples' rooms provide a record of the routine care delivered throughout each day, such as repositioning people who spend their day in bed, fluids and food intake and output. There is guidance for the staff team on all aspects of the person's support needs: nutrition, communication, pain relief, oral hygiene, mobility and skin integrity. There is good sharing of communication within the team and senior staff make prompt referrals to healthcare professionals when necessary.

All care records are currently being updated into a new format. Although this system is being introduced at the moment, there is a need to ensure these are co-signed by people or their representative/advocate/family member, as the ones we viewed at this inspection were not signed to denote peoples' agreement to their contents.

As far as possible, people are safe and protected from abuse. Care workers have been through the provider's rigorous recruitment process. All employees can access policies and procedures to understand their responsibility to protect vulnerable people. They attend safeguarding training updates and tell us senior staff members are always available for advice if necessary.

The home has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers can refer to infection management policies when necessary. All measures are in constant use to ensure people are safe from infections, including the monitoring of all visitors to the home and regular use of personal protective equipment by all care workers.

#### **Environment**

Affalon House Nursing Home is a large home. The home is warm and clean, and people say they feel comfortable and happy. Bedrooms are personalised to reflect each occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture. There are also specific touches. For example, the deputy manager has sourced Llanelli street signs and placed them throughout the building: these really mean something to people living with dementia, places they remember and recognise.

The staff team promote each person's independence as much as possible, but corridors throughout the premises are not wide, making it difficult to help some people with reduced mobility and accommodate the equipment people regularly use, such as hoists and standing aids.

There is a continuing program of repair and replacement, with a number of windows having been replaced recently. The décor has been refreshed in places, with doors to peoples' rooms painted in prime colours to differentiate between them: something essential for people who are living with dementia every day. There are also brightly coloured toilet seats for easy recognition where the person's memory fails them momentarily when they go into the bathroom. In addition, some areas have been refreshed with different wallpaper patterns. However, the overall impression of the home is of one colour - magnolia. We spoke to the RI about this and urged him to consider continuing the current developments in decoration.

The environment is safe. Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002 and there are clear instructions displayed in the home on what to do in the event of a fire.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry. Care records, employee personnel records and Deprivation of Liberty Safeguards (DoLS) records are securely stored in a locked office and only available to care workers who are authorised to view them.

#### **Leadership and Management**

The RI, manager, deputy manager and nurses all have regular oversight of the support provided to people every day, together with regular contact with peoples' family members and healthcare professionals involved in their care. Quality assurance reports monitor all aspects of people's care arrangements, and the RI completes three-monthly overall reviews of the service. In addition, people and/or their relatives may complete surveys to ask for their opinions on the quality of support they receive.

Although care workers say the management team support them well, not all employees have had three-monthly supervision meetings over the last year, mainly due to staff shortages. Although this situation has improved recently, there is a need to maintain a system where all employees receive regular, individual recorded supervision. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The provider ensures there are knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work: these include reference checks and Disclosure and Barring Service (DBS) checks. The staff induction programme links to individual learning outcomes. Although most care workers have undertaken training relevant to the people they support, some training has lapsed over the past year. The manager showed us plans that will rectify this situation, and while no immediate action is required, this is an area for improvement, and we expect the provider to take action.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. The staff team ensure they protect all private and personal information. The home's safeguarding policy and procedure is in line with current legislation and local safeguarding procedures. Senior staff ensure all care records clearly state any risks to people's well-being and detailed risk management plans help to keep people safe and as independent as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises: they would approach the management team initially, but also would contact external agencies such as the local safeguarding office if they thought they needed to.