

Inspection Report on

Ty Pentwyn Care Home

Ty Pentwyn Nursing Home Pentwyn Road Treorchy CF42 6HD

Date Inspection Completed 12 May 2022

12/05/2022



About Ty Pentwyn Care Home

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Quality Care (Surrey) Ltd
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	30 January 2020
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People receive personal care and nursing care from a stable team of nurses and care workers who are consistent, know them well, and are warm and friendly towards them. There is a nice atmosphere in the home, with lots of residents accessing the communal lounge and dining room and activities happening throughout the day. People have a choice of meals, and food and drinks available to them whenever they wish. Personal plans and risk assessments are detailed and personalised. Reviews are regular but lack meaningful analysis of people's progress towards their outcomes. All staff are up to date with both mandatory and need-specific training. Care staff receive regular supervision, however supervision sessions for nurses need to be held more frequently. Not all areas of the home are secure. Facilities and equipment are serviced and maintained to ensure they are fit for purpose. There are arrangements in place for oversight of the home. The home manager is long standing and works closely with the staff. The Responsible Individual (RI) supports the home manager in promoting the best outcomes for people living at Ty Pentwyn and is proactive at addressing matters that require attention and improvement.

Well-being

People are treated as individuals and have input into the care they receive. Care files contain background information about previous work and family, as well as people's likes and dislikes. People's personal plans and risk assessments contain detailed information outlining individual strategies for support. The kitchen staff have a list of special diets and food preferences and were able to tell us how they cater for these. Care staff are proactive at integrating activities such as hair and nails, quizzes and singing into the running of the day, creating a warm and lively atmosphere. The home has procured an interactive touchscreen 'table' for additional entertainment and stimulation. People told us that they can ask for things they want and speak to care staff or management if they have a problem or worry. We discussed with the manager the need to confirm Lasting Power of Attorney arrangements for those residents who have them, in order to ensure the correct people are involved in making decisions in people's best interests. There is a complaints process in place should it be needed.

People are supported to be as healthy as they can be by getting the right care at the right time. The manager and nurses at the home liaise with a number of external health professionals in order to refer any concerns and implement appropriate guidance. We saw evidence of correspondence with professionals such as dieticians and speech and language therapists, as well as appropriate check-ups from GP, dentist, and optician. Care plans are updated with guidance and medication is altered if prescriptions change. Relatives told us they are kept informed should their loved one need any medical attention.

There are systems in place to protect people from harm or abuse. Risks to individuals are identified in care plans and risk assessments and reviewed regularly. There are policies in place to give guidance to staff on reporting a safeguarding concern and whistleblowing, should they be needed. Most staff are up to date with their safeguarding training and reported they feel confident that if they raised an issue with the manager, it would be responded to quickly. We discussed any events that have occurred in the home with the manager, who appeared confident in knowing which matters should be reported and to whom.

Care and Support

Nurses and care staff have enough detailed information to be able to provide people with the right care at the right time. Feedback from a professional who liaises regularly with the home was positive. They told us: "this home is especially accommodating; they help people settle and include them with others. Some people who have moved into the home have really thrived". Personal plans and risk assessments contain relevant, personalised information. These are reviewed regularly, however the reviews do not analyse any events that may have supported or hindered progress towards the person achieving their goals. This is an area of improvement that we will follow up at our next inspection. Supplementary charts and daily records are completed by care staff and nurses as required. There is a handover at the end of each shift, and any new information is disseminated to all staff so they are up to date on people's current needs and issues. Medication is stored safely and administered as prescribed. There are medication policies in place, and on the day we visited the nurse on duty was able to show their competency in dealing with medication.

People living at Ty Pentwyn, and their families, gave us positive feedback on their experience of the care being provided by the home. People told us: "the girls are marvellous", "it's always very clean here" and "you're not pushed into anything, you do what you want to do". On the day we visited, someone new was moving into the home, and a person who had recently moved in said: "They'll make a fuss. I had a wonderful welcome when I came in. You can change your room around, they tell you to treat it like your own little flat". Visitors we spoke to on the day told us: "there are carers always back and forth, nothing is a problem they are very accommodating", "they give us any updates we need, they tell us anything important" and "we know a lot of people who work here, we think [their loved one] is content here".

There are systems in place to promote infection control and good hygiene. There is a policy in place regarding cleanliness in the home, and a policy including measures to minimise spread of COVID 19. All staff complete regular COVID 19 testing, and we saw personal protective equipment (PPE) being used appropriately by staff throughout the day. Visitors also complete lateral flow tests prior to entering the service. Domestic and laundry staff have cleaning schedules, and on the day we visited the home appeared clean.

Environment

Care and support is provided in an environment that mostly supports people to achieve their outcomes. However, some areas of the home need securing to minimise risk to people's health and safety. Doors to sluice rooms and laundry did not lock, which means people could access them and the potentially hazardous materials inside. This is an area of improvement, which the RI told us would be addressed straight away. Bedrooms are personalised, and people told us they are encouraged to make their space their own. Although some people choose to stay in their bedroom, or are receiving all care in their bedroom, many people stay in the communal areas all day, chatting with care staff and each other, which makes for a good atmosphere. Some areas of the home look disorganised, with boxes stored under tables. Although this is not a hazard, it detracts from the homely environment. The RI advised this would be addressed straight away. The outside space is accessible and has a small building frequently used for arts and crafts. Staff need to ensure this outside space also remains free from health and safety hazards.

There is a schedule of servicing and maintenance in place to ensure equipment and aids, such as hoisting equipment and the lift, are functional and safe to use. There is a maintenance worker on site, who addresses small repairs and general upkeep of the home. Fire alarms and emergency lighting are tested weekly. People's evacuation plans are stored in a grab file that is easily accessible in case of an emergency.

Leadership and Management

People are cared for by a stable, experienced team of nurses and care staff. The manager is long standing, reliable and works closely with the staff. A number of staff at the home have worked there for many years, are local to the area and know some of the people living at Ty Pentwyn before they moved in. This adds to the welcoming, community feel of the home. Feedback from staff was positive. They told us: "I feel very supported by [the manager], I've been here a long time", "I wouldn't change anything, I think people are happy, there's always something going on" and "I think everyone works to their best here, we have our training and supervision, so I think it's good here". Staffing levels are sufficient to meet the needs of the people living in Ty Pentwyn at present, and the manager advised that staff are helpful at covering shifts when there is staff sickness.

Staff are appropriately recruited and vetted. We sampled some staff personnel files and found they contain the required recruitment information. We discussed the manager noting a risk assessment for any positive disclosures from disclosure and barring (DBS) checks. Although nurses have successfully completed the required supervision sessions for care staff, the manager has not consistently held supervision sessions for the nurses since the last inspection. All staff told us the manager is approachable and supportive, and we observed an open, friendly relationship between manager and staff on the day we visited. However, individual supervision sessions are important to allow nurses to discuss personal or professional development on an individual basis. This is an area of improvement, and we shall follow this up at our next inspection. Mandatory and supplementary training is held as a mixture of online and face to face sessions. Most staff are up to date with their training.

There are processes in place for oversight of the care and support being delivered in the home. The manager told us the RI is very involved in the running of the home and has the residents' and staff's interests in the forefront of their mind. We saw evidence of quarterly monitoring visits being completed, gathering feedback from people living at the home, visitors and staff. The RI also completes biannual quality of care reports, identifying what is working well and what is required to improve the quality of the service further.

	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
16	Care plan and risk assessment reviews need to contain meaningful analysis of a person's progress towards their outcomes.	New

36	Nurses must receive formal, individual supervision sessions in line with the service's supervision policy to ensure they are supported and have opportunity for professional development.	New
57	Areas of the home that could potentially pose a health and safety risk to people should be kept secure to minimise that risk.	New

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