



Inspection Report on

Ty Arfryn

**Alltynap Road
Johnstown
Carmarthen
SA31 3QY**

Date Inspection Completed

08/02/2022

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About Ty Arrfryn

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish Group Ltd
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	05/11/2019
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

People living in Ty Arrfryn appreciate and benefit from the care and support they receive through the knowledgeable and caring staff team. Promotion of people's individual health and wellbeing underpins the aim of the service. Care and support plans are detailed and provide a good sense of the individual, their complex needs and how best to support them. External professionals are actively involved in the support people receive.

A dedicated and enthusiastic manager and deputy manager lead the ethos of the service. People and staff respect and value the management team who are themselves well supported by senior managers including the Responsible Individual (RI). There is a range of monitoring and audit processes in place, and the RI has good oversight of the service.

Well-being

People have their choices and views recognised and listened to. Care and support records give a good sense of the person and reflect their individual needs and preferences. People are involved in day-to-day decisions that affect them including meals, employment and healthy lifestyles. Their opinions are sought as part of the Regulation 73 visits conducted by the RI and as part of staff appraisals. People feel the staff team understand them as a person and of their needs. Care and support is delivered according to people's specific needs and wishes and this is adapted when needed to better suit them. Welsh speaking staff do speak to people in Welsh if it is preferred. A dedicated and enthusiastic manager and deputy manager set the ethos of the service, which values their staff and strives for the best for people living in Ty Arfryn.

People are protected from the risk of harm and abuse. Staff speak caringly 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. Appropriate infection control measures are in place and staff are clear about their role and responsibilities around infection, prevention and control. The service is clean with no malodours. Robust recruitment measures ensure staff working at the service have the right skills and approach to care and support. The service actively liaises and works alongside health and social care professionals to ensure people remain as healthy as possible.

People enjoy healthy relationships. Individuals we spoke with told us they have developed social relationships since moving into the service. The communal areas are a hub for social gatherings, activities and positive interactions.

Care and Support

Staff have a very good understanding of the needs of those they support. Care workers speak enthusiastically about caring and supporting the people living in the service. *“it’s amazing, never worked anywhere like this before”* and *“It’s very good here, the people we support are great”*. Staff support people according to their individual needs and are sensitive to any changes the person may be expressing or demonstrating.

Throughout the inspection visit staff interacted positively and caringly with people. There are regular discussions, activities and banter between staff and people. People told us about their achievements, how proud they are of these and the positive impact it has on them. Care and support records reflect this. Plans are afoot to introduce the 'Peoples Achievement Awards' with the aim of developing skills and as a motivational tool. People are supported to be as independent as they can be by completing their own independent menus each week with staff to support them to shop, prepare and make their meals. In addition, people are supported and motivated to seek paid employment and live a healthier lifestyle.

Sufficient staffing levels are in place to meet the care and support 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.

Care staff have access to plans that provide very good details about the support people require to remain healthy and their individual needs. The plans provide a real sense of the individual and involve the person, relatives and community teams in their development and reviews. Health and social care professionals are involved with people and this is well documented in their care and support records. There are comprehensive risk assessments in place, which are reviewed regularly. Care staff have a thorough understanding of the people they support and the complex needs they live with.

There are safe procedures for the storage, administration and disposal of medication. The issue identified in the last inspection has been addressed.

The service promotes hygienic practices to reduce the risk of infection. Staff wear appropriate PPE and adhere to the current Public Health Wales (PHW) Guidance. Policies and procedures are in place to support good practice. Staff are clear on these and their responsibilities around protecting people from infection.

Environment

Arrangements are in place to minimise risk to people's health and safety. Testing and servicing of fire-fighting equipment are undertaken within the required timescales. Personal Evacuation Plans are individualised and readily available in emergencies. Emergency alarms are accessible and have appropriate risk reducing features. Window restrictors are in place and some rooms that contain potentially harmful materials are kept locked. 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 in line with current Public Health Wales guidance. The service is clean with no malodours.

The service ensures the environment supports people to achieve their personal outcomes. The layout of the service enables people to use the facilities available to them safely. The gardens are welcoming and offer the opportunity for people to use them for their own enjoyment including gardening and tending to the service's hens. Each person's bedroom is personalised according to his or her wishes wherever possible. A picture or items that represents the person are located on the front of each bedroom door. One vacant bedroom has been freshly painted but staff are awaiting the new person to move in, so they can decide on colours schemes, bedding, curtains etc. Communal areas are well maintained and fully utilised. There are a number of wall-mounted photographs and items on display throughout the communal areas and a monthly positive stories board, all of which adds to the homeliness of the service.

Leadership and Management

There are thorough governance arrangements in place. The RI has undertaken Regulation 73 visits during the period of the Pandemic. CIW have been provided with copies of the reports, which confirm she speaks to people and staff as part of her visits to the service. Staff confirmed this with us. There are a range of monitoring tools and audits undertaken by the manager and senior managers. Actions required from these audits are acted upon and reviewed regularly. The manager acknowledges the support from her senior managers and the RI have improved since the last inspection, and she feels well supported by them.

Staff are knowledgeable, competent and valued to support people living in the service. Through discussions and observations it is evident that staff have a good understanding about the people they support and the specific needs of each individual. Training and induction records demonstrate staff have a robust induction and a range of training opportunities to develop their knowledge and practice. They told us *“I had a really good Induction, I had lots of training and I shadowed staff. I was given time to get to know the people we support”*. *“I’m having a thorough induction, lots of training and shadowing and support from the manager and team”*. Staff recognise the work on occasions can be very challenging. They told us they are well supported, particularly following incidents, which can be distressing for both the individual and staff member; *“there are very challenging needs for some of the people. We are well supported and have good debriefs after incidents, some of which can be very distressing and upsetting”*.

Staff and people living in the service respect the leadership and management. Staff told us; *“I love it here, it’s really nice. (manager) is amazing – she is so cheerful and thoroughly enjoys her job which helps us”*, *“It is brilliant here, (manager) makes it brilliant”* and *“every service should have a (deputy manager) and (manager) like we have, they are great!”* One person told us *“It is great here, (manager) is inspirational – I am treated as a person here and not as a range of symptoms or a diagnosis. The staff know how to support me particularly when I am unwell and I can be aggressive and try to harm myself. They give me hope for the future”*.

Staff records show they receive regular supervision and an annual appraisal. People living in the service contribute to staff appraisals. Recruitment records hold all the required information and checks. There are up to date and regularly reviewed policies and procedures in place to support staff.

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
N/A	No non-compliance of this type was identified at this	N/A

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