



Inspection Report on

Llys Gwyn House Limited

**Llysgwyn House Residential Home
21 Caecerrig Road Pontarddulais
Swansea
SA4 8PE**

Date Inspection Completed

07/03/2023

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About Llys Gwyn House Limited

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Llysgwyn House Limited
Registered places	36
Language of the service	English
Previous Care Inspectorate Wales inspection	10 September 2021
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Llys Gwyn is a homely and welcoming service which provides assistance to adults who require support with their personal care needs. The service is nestled in the town of Pontardulais Swansea. Many people are from the local area and most staff live locally, giving a real sense of community in the service. People have up to date personal plans in place which give the care team a good picture of the person and how best to support them. Care workers are happy in their roles and feel valued and supported. They receive up to date training and feel confident delivering care and support.

The service is well presented with good maintenance procedures in place. People are safe and there are good security arrangements in place to enter and leave the premises. There is an approachable and visible manager in post who is in the service daily. The Responsible individual (RI) is also in the service most days. Feedback from people about their experiences in the service is documented and regulatory reports are completed within the appropriate time scales.

Well-being

People have a voice and are treated with dignity and respect. Sections of people's personal plans are written from their perspective and assessments are carried out with people to obtain as much information from them as possible. Further information is requested from people's representatives where possible. The RI is visible in the service and seeks feedback from people and their relatives routinely. Care staff were observed to have a good rapport with the people they support, and people told us they were happy in the service.

People are protected from harm and neglect. We saw there is a safeguarding policy in place which has been reviewed. Care workers spoken with are aware of the Wales safeguarding procedures and understand their roles and responsibilities to report any concerns. Routine maintenance and environmental checks take place in the service and there are safety features on all external doors to prevent access from unwanted visitors. The service has good infection control procedures in place to minimise the risk of spread of infectious diseases and is clean and yet still homely.

People are encouraged to maintain relationships. Visitors are welcome in Llys Gwyn, and several visited on the day of the inspection. People have made friends with others living in the service and we saw good camaraderie between people and care staff supporting them.

People's physical, mental health and emotional wellbeing is promoted. Medication is managed well. People are supported by care workers who know them well and are able to recognise any changes in their presentation and health. Timely referrals for medical assistance take place. The service is currently recruiting another activities coordinator to ensure there are planned activities available to people seven days a week.

People live in a home where the oversight and longevity of the service is considered. There is good oversight of the service. There is a visible RI and manager in post who are both available at the home daily. The manager conducts regular audits of different aspects of the service and the RI completes regulatory reports at the appropriate timely intervals, feedback from people, family/ representatives and staff is obtained to drive improvements in the service.

Care and Support

People have personal plans in place that reflect their individual needs well and where appropriate people are involved in the planning process. We looked at three care files and found a good overview of the person and what matters to them. Individual care plans are in place for each identified need and are supported by appropriate risk assessments. Statements within the personal plans are written in the first person to ensure they remain at the centre of the care. We saw regular reviews take place and personal plans and risk assessments are updated when required to reflect people's changing needs. Relatives told us that there is good communication from the service and any issues or concerns are always discussed with them, comments included: "*they always let me know what's going on*" and "*I'm confident in the manager to take action if something is wrong*".

There are good systems in place to manage medication and to maintain people's health. Medication is stored in designated areas in secure, locked trolleys. Temperature checks are in place with each trolley to ensure safe storage conditions. We looked at six Medication Administration Record (MAR) charts and saw that these are completed correctly with signatures in place and appropriate notes. The use of 'as required' (PRN) medication is minimal. Any concerns with people's presentations are acted upon promptly and we saw this detailed in the daily diary logbook for closer monitoring. People are weighed routinely and any concerns with weight loss are referred to the dietician appropriately. Records of this and appointments with health professionals was seen in care files and with follow up notes logged.

The provider has mechanisms in place to safeguard people. We saw the service's safeguarding policy which reflects the Wales Safeguarding procedures. Care workers undertake safeguarding training and those spoken with are aware of their responsibilities to report any concerns about people they support. The provider applies for Deprivation of liberty safeguards (DoLS) appropriately. These are safeguards that are agreed for people who do not have the capacity to make decisions about their accommodation, care, and support. The service notifies Care Inspectorate Wales of these applications as required.

The service has an activities coordinator in post, and they are currently recruiting a second to ensure activities are available for people seven days a week. During the inspection we noted that the activity coordinator was on their day off and we did not see any pre-planned activities taking place. Despite this we saw people watching tv, chatting with others, listening to music and all seemed comfortable and most had a smile to share. During observations we saw people were acknowledged by care staff frequently and care staff were attentive to their needs. Feedback from professionals also confirmed this. One said: "*Staff always work with a professional manner and engage with the residents using good effective communication skills*".

Environment

The provider ensures that individuals' care and support is provided in a location and environment with facilities and equipment that promotes achievement of their personal outcomes. Llys Gwyn has its own car park and garden to the front of the building and a further enclosed courtyard out the back. The service is mainly on the ground floor with a small number of bedrooms on the first floor. People can spend their time in one of the several lounges available to them. There is an external building to the rear of the service where the management offices and laundry facilities are located. We looked around the service and observed people and their care workers. All areas of the service seen are well maintained, clean and homely. Furniture seen is in a good state of repair. People appear content and comfortable in communal areas with care staff visible most of the time. Bedrooms are personalised with people's own items.

The service provider has procedures in place to identify and mitigate risks to health and safety. There is a maintenance person in the service who oversees the everyday checks required. These include, fire safety checks, window restrictor checks, emergency lighting and water temperatures. The service is compliant with all its mandatory servicing and testing which includes, gas, electricity and PAT testing and we saw that certificates are in place for these. All entrances and exits to the service have keypad operated doors to ensure safe exit and entry.

The service promotes hygienic practices and manages the risk of cross infection. Llys Gwyn has had a very cautious approach to infection control since the onset of the Covid-19 pandemic and at the time of this inspection care workers are still always wearing masks when inside the building. This is no longer a requirement in care homes unless there is an ongoing outbreak. On entry we showed a negative Lateral Flow Test (LFT) to minimise the risk to people. Care workers told us that there were always sufficient supplies of personal protective equipment (PPE) available to them. We saw the service's infection control policy which has also been updated to reflect the Covid -19 procedures in-line with the government guidelines.

Leadership and Management

The provider has arrangements in place to oversee the service. The RI is visible in the home daily and supports the manager who has been in post several years. The manager conducts routine audits of systems in the service including medication and training etc. The RI completes quarterly reports about their oversight of the service, and we saw that these look at staff training, complaints, and more, however feedback from people could be evidenced more in these reports. Bi-annual quality of care reviews are also completed, and these are compiled with information received from feedback questionnaires. The RI told us that as they are always in the service, they are always obtaining feedback from people and will ensure this is documented more effectively going forward. Overall, we found these reports give a good overview of how the service is performing and areas identified for improvement. The service Statement of Purpose reflects the service well, and policies and procedures are reviewed to ensure they are up to date with current legislation and guidance.

There are good systems in place to recruit and support care staff in their roles. We looked at three personnel files and saw all required documentation for robust recruitment and background checks are in place. This includes up to date Disclosure and Barring Service (DBS) checks, identification documents and reference checks. Many of the staff are now registered with Social Care Wales (SCW) the workforce regulator and the manager audits this routinely to support any staff with difficulties in the process. Care workers receive routine quarterly supervision and annual appraisals. However, the manager explained that although they have weekly supervision with the RI these aren't documented officially. The manager gave assurances that this is documented going forward to meet the regulations. Overall feedback received about the management team was positive from both relatives and staff and comments included, *"I feel valued, and I like everything about the management"* and *"the manager is lovely and very approachable and I'm confident they would respond appropriately if I had any concerns"*.

Improvements have been made to ensure people receive care and support from a care team who have the necessary skills to perform their duties. Since the last inspection there has been a big improvement on the consistency and frequency of training received by care staff. The service has invested in e-learning to cover the gaps raised due to the Covid-19 pandemic and we saw most staff have completed many of the e-learning modules. The manager also told us that face to face training is also now taking place and has been prioritised. We saw that many of the training modules completed by care staff are seen as certificates in their personnel files, however older certificates should be archived once invalid. Feedback from care workers about the training received to undertake their role was all positive and comments included: *"Training is good there's plenty of it to do the job"* and *"I've done lots of online training, the training is good"*.

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
36	We have advised the registered persons that In order to fully meet the legal requirements improvements are needed in relation to the training delivered to staff A notice has not been issued on this occasion, as there was no immediate or significant impact for people using the service. We expect the registered persons to take action to rectify this and it will be followed up at the next inspection	Achieved

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