



Inspection Report on

Hallmark Ty Porth Luxury Care Home

**Ty Porth Care Home
Cemetery Road
Porth
CF39 0BH**

Date Inspection Completed

23/02/2024

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About Hallmark Ty Porth Luxury Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Hallmark Care Homes (Porth) Limited
Registered places	82
Language of the service	English
Previous Care Inspectorate Wales inspection	
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 living at the home, visitors and staff give excellent feedback about their experiences of giving and receiving care and support in the home. Lifestyle co-ordinators create innovative activities and projects that give people purpose and make them feel valued within the home community. Personal plans and risk assessments are comprehensive and reviewed regularly. There is specialist in-house dementia support that helps care staff to individualise their approach to individuals with distress or behavioural needs, resulting in a clear, notable difference to people's confidence and feelings of safety. The staff team work extremely well together and show a clear person-centred ethos that includes supporting relatives and visitors, as well as the people living in the home. The management team show exceptional support to staff, have clear oversight of all events in the home, and are constantly visible and approachable for any questions or issues from people, visitors, or staff. The service provider shows excellent pastoral support for staff as well as investing in their professional development. Quality Assurance processes are robust and have a meaningful effect on people's confidence in the ongoing high standards of care.

Well-being

People are supported to have control over their day to day lives. There is an evident, strong ethos amongst all staff to treat people with dignity and to ask them their opinions on decisions that may affect them personally. Activity projects are planned in consultation with people and their feedback is sought following events to gauge their popularity. People are offered choices throughout their daily routines and have all aspects of their care and environment reviewed monthly with them as part of a 'Resident of the Day' system. They have full opportunity to raise any questions or issues with carers, nurses or managers at any time. There is information available bilingually for people and visitors to outline what the service does and does not provide, and how to make a complaint, should it be needed.

There are excellent opportunities for people to be stimulated, engaged and feel valued as part of projects and activities in Ty Porth. We spoke with one of the Lifestyle Co-ordinators who spoke passionately and knowledgeably about how activities are useful tools for enhancing people's feeling of purpose, their confidence and self-worth. There are a variety of projects that have been done in the home appealing to different people's preferences and abilities, but all enhancing people's wellbeing. Activities are used as a creative way to increase people's food and fluid intake if they do not eat and drink much at mealtimes. Communities are encouraged to socialise and come together where appropriate. Individuals who appear to be struggling in some way receive personalised support to build them back up. There are excellent networks with local community groups and businesses.

There are robust systems in place to ensure people feel safe and are protected from harm or abuse. All staff undergo a thorough recruitment and vetting process prior to starting their roles. They have full inductions and shadowing to get familiar with people and the environment before working alone. Staff have been trained, and understand, how to identify possible safeguarding concerns and report them. There is an excellent process that management follow for incidents and accidents that may have caused harm, ensuring correct and proportionate actions are taken, and appropriate external agencies are kept informed. Staff have a direct line to the Responsible Individual (RI) for whistleblowing concerns. Visitors and relatives told us there is constant communication between staff and management and themselves, and they find there to be a culture of openness and transparency in the home.

Care and Support

People receive care and support to an excellent standard which is specifically tailored to meet their individual needs. The 'resident of the day' system means a designated care worker can spend purposeful time with individuals, making sure they are always familiar with their wishes and preferences. Personal plans are highly detailed and person-centred, produced in conjunction with people, their representatives, and where necessary professionals. Plans clearly outline the level of care and support people require enabling care workers to best support people to achieve their outcomes. Information recorded in personal plans include care plans, risk assessments and management plans. We saw specialist plans in place for those who require support from the wider multi-disciplinary team. The service has a specialist dementia practitioner which enables staff to provide individualised, effective care and support to people living with dementia. People and their representatives are involved in regular care plan reviews which also review people's well-being outcomes.

People and their families are very happy with the care and support provided. We saw extremely positive interactions between care workers and people. Staff were having meaningful conversations and treating people in a caring and respectful way. Staff appear to know the people they support very well and are familiar with their needs and routines. People's relatives spoke very highly of staff stating, "*they go over and above of a carer, they go that extra mile nothing is too much trouble*". Another relative said "*staff are very caring from the care staff to the kitchen staff and cleaners they all can't do enough for you*".

Medication management systems are safe, and people have reliable and timely access to health care professionals when needed. Medication is securely stored and can only be accessed by authorised staff members. Care workers receive comprehensive training and follow a medication policy promoting safe practice. Medication is frequently audited to identify and address any issues. We looked at a number of medication administration recording charts and found people receive their medication as directed. Information recorded on people's personal plans show they have good access to health care professionals when needed. We saw evidence of appointments with professionals such as GP's, Dentists and Opticians. We also saw records of correspondence with health care professionals with any advice given clearly documented.

Environment

The environment at Ty Porth is clean, tidy and nicely furnished and decorated. There is a communal café in the foyer, which can be used by people and their visitors, as well as for activities such as afternoon tea. There are homemade cakes and coffee available for people to help themselves to. The home has four communities set over four floors. Each community has their own communal spaces, lounge and dining room. There is lift access and stair access to all floors to enable people in the different communities to come together for events or to socialise. All bedrooms are ensuite and are personalised with people's own belongings. Specialist equipment and aids such as hoists, bath aids, specialist recliner and wheelchairs are all available for those who need them.

The environment is safe and secure. We saw evidence of a rolling programme of maintenance, checks and servicing in place to ensure the home, its facilities and equipment are safe. Health and safety monitoring and auditing is in place, and there are both internal and external maintenance workers. Maintenance requests can be submitted by any staff members. People have their own Personal Emergency Evacuation Plans (PEEPs) which are kept easily accessible in the event of an emergency. Fire risk assessments and checks and servicing of fire equipment are completed. Visitors have to sign in and out of the building, to safeguard people from unauthorised access. Keypad locks are used to ensure areas that may contain hazardous items are not accessible to people who may not be able to assess the risks to their safety.

Leadership and Management

All staff members gave very positive feedback about working at Ty Porth. They told us: *“Whenever I have a problem, I have spoken with [manager and deputy manager] and it’s always been sorted”, “I started with very little experience in care, they push you to achieve more and support you to progress”, and “its nice management acknowledge things and instead of just a thank you they have parties and celebrate it.”* There is a clear culture of genuine thought and care for not only people living in the home, but also their friends and relatives. It was clear how well some of the staff and management knew some of the visitors. One visitor told us the staff have become a support network for him and also encouraged him to build networks with other regular visitors of people in the home.

Newly employed staff are subject to thorough recruitment and security vetting before starting in their jobs. They receive comprehensive induction and shadowing before working alone. All staff complete a variety of mandatory and specialist training, which is frequently refreshed. Staff told us that they felt they could ask for additional training in any topic and they would be able to receive it. In addition, the service provider funds additional external qualifications and training for those staff members who wish to further their professional development, for example funding a nursing degree. Particular roles such as the Lifestyle Co-ordinators also receive specialist training to excel.

Staff feel valued and supported in their roles. Supervisions are held regularly and give staff an individual opportunity to speak with their line manager about any personal or professional issues. The management team are visible in the communities throughout the day. Good communication between staff is achieved by thorough verbal and written handovers and diaries. Staff are rewarded for exemplary practice with employee of the month awards that are chosen by people who live in the home.

Thorough and robust quality assurance systems mean that there is excellent oversight of the service and a constant drive to maintain high standards of care and support. There are regular internal inspections completed by the in-house quality team, which not only monitors how people receive their service, but also educates and familiarises staff with being observed and asked questions about their practice. We observed confidence and certainty in staff when we visited. The Responsible Individual (RI) is informed of all quality monitoring information and uses RI visits to gather additional feedback from people, visitors and staff. The biannual Quality of Care document is analytical, detailed, and shows clear action points and outcomes.

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
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