



Inspection Report on

Ty Mynydd

**Ty Mynydd
Longford Court
Neath
SA10 7HN**

Date Inspection Completed

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16/12/2021

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About Ty Mynydd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	National Autistic Society
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	Manual Insert This is the first inspection since this service was registered under The Regulation and Inspection of Social Care (Wales) Act 2016
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 receive support to do the things they like and to remain as healthy as possible. Care workers support people to keep occupied in the home and in the community. Care staff present as knowledgeable, respectful and caring. Care staff gave feedback about staff turnover, staff shortages and the impact this has had on them and on the service delivered. We noted when there are shortages of staff, care workers work additional hours and managers also deliver direct hands-on care. This means people's routines are not affected. The responsible individual (RI) is aware of the situation and has taken actions to make improvements. They spoke to us about the shortages in the social care workforce and the recruitment challenges this presents. There are systems in place in the home to enable the manager and care staff to plan and deliver the care and support as it should be. In addition to these, the service provider has good systems to oversee the service and to make improvements. Improvements are required to systems in place in relation to the management of records.

Well-being

People who live at the home have choices to do the things they like. People engage in a range of activities within the home and in the community. On the day of inspection, we observed people each carrying out their own activities and pursuing their own interests. This included, people getting ready to go out to visit their families and another person having visitors and going out with them. Records clearly show what people's likes & dislikes and preferred routines are. Our conversations with care workers show they know people and what is important to them well.

People are supported to remain as healthy as possible. Care staff support people to maintain good physical health. This includes supporting people with their medication and ensuring they eat and drink well. Care workers watch out for changes in people's health and alert relevant external health and social care professionals when needed. The relationships people have with care workers and with their families promote their emotional well-being.

Measures are in place to protect people from abuse and neglect, as staff know what to look out for and how to raise concerns if they suspect someone's well-being is compromised. Care staff are trained in the protection of vulnerable adults and have policies and procedures to guide them. There are risk management plans in place to keep people as safe and as independent as possible.

The home provides people with suitable and clean accommodation. The home enables people to pursue their own interests and to spend time in the privacy of their own flats/bedrooms or, if they wish, spend time with others in communal areas. Infection control measures are in place throughout the home.

Care and Support

People receive the support they require when they need it. We observed carers supporting individuals inside the home and going out with them. We saw a natural familiarity between staff and people. The feedback from a relative was positive. They explained how staff kept in touch with them with calls and photos whilst the pandemic prevented visits. They told us they trust staff and that the home is the best place their relative has lived in. People also access the services of external professionals on a regular basis. Records show this includes GP, psychiatrist and chiroprapist.

There is documentation in place for each person. It reflects information gathered from people, their relatives and health professionals. What people like and dislike, and how they may express their emotions when they are unable to do so verbally is recorded. There are personal plans in place for all the areas in which people need care and support. Conversations with staff show overall they are familiar with the care and support needs of people. We noted however that not all staff knew about issues one person encounters. We also found it is difficult to get up-to-date and accurate information amongst all the paper based documentation in place for each person. The information is recorded in several places and is, on occasion, contradictory. We also saw pre-populated care planning documents are used, for example a sensory plan. Information which was not relevant to a person was not deleted which means that the document was not fully accurate. While no immediate action is required, the management of records is an area for improvement and we expect the provider to take action.

Staff record the care and support delivered to each person. Daily records and people's plans are then reviewed. We noted, in two personal files, every review consisted of a 'no changes' entry. We discussed this with the service provider. They explained that people's full care plan reviews are contained in their 'Personal Plan (Care Plan) & Personal Outcomes Review' document which are kept electronically. We saw these documents contain comprehensive quarterly reviews. The service provider gave assurances that the system in place will be reviewed to ensure records are not duplicated and easily accessible by all staff, including new team members.

There are systems in place to ensure medication is stored and administered safely by care staff who are trained to do so. We observed medication is securely stored and is administered as prescribed. We noted recording in relation to 'as and when required medication' (PRN) is not always clear. While no immediate action is required, the management of records is an area for improvement and we expect the provider to take action.

Environment

People live in an environment that meets their needs and promotes their well-being. The accommodation comprises of four flats and two bedrooms with en-suite facilities. Each flat has a bedroom, bathroom, kitchen and lounge. The flats and bedrooms we saw reflect people's needs and interests as described in their care documentation. In addition to their own living areas, people have access to communal living areas and to a large outdoor space. We saw some furniture is in need of upgrading. We discussed this with the provider, there is an ongoing programme of maintenance, re-decoration, and improvements in place. We also saw personal items from one person being stored in another person's lounge and records including care staff personnel files not securely stored. While no immediate action is required, the management of records is an area for improvement and we expect the provider to take action.

There are systems in place to identify and deal with risks to people's health and safety. The service provider carries out regular health and safety checks. External contractors carry out specialist checks. The home has a food hygiene rating of five which means the food hygiene standards at the home are very good. We saw notices relating to health and safety matters displayed throughout the home's communal areas and notices relating to the support some people need to eat and drink in the kitchen. This ensures care staff are constantly reminded of the procedures to follow but means communal areas are not as homely as they could be. We discussed this with the provider for them to consider.

Infection control arrangements are in place. Staff are following Public Health Wales (PHW) current guidelines, and we observed staff using appropriate personal protective equipment (PPE) during our inspection visit. PPE and hand sanitizer was readily available throughout the home. The standard of cleanliness in the home is good. However, we noted mal-odour in one flat and one bedroom. There are notices throughout the home which remind staff of procedures to follow, for example good hand hygiene. Laundry facilities are situated in an outdoor building and are suitable.

Leadership and Management

The service provider has arrangements in place to support the smooth running of the service. The RI maintains oversight of the service. They visit the service to speak to individuals who live there, to consult staff and to check the environment. In addition, they review the quality audits carried out by the company's quality assurance manager, by the area manager and by the home manager. We noted the audits in place cover all aspects of the service delivery. Discussion with the RI shows they are aware of staff's concerns in relation to the management of the service and staff shortages. We saw they take action when necessary to improve the service. In October 2021, an experienced manager and deputy were deployed to the service.

There are arrangements in place to recruit, train and support staff. We examined recruitment records. These show the service provider carries out checks before a person can start working at the home. These include checking their identity, employment history, references and their Disclosure and Barring Service (DBS) Check. Supervision and training records show processes are in place for supporting and developing staff. Staff told us they have supervision sessions and they get a lot of training.

Discussions with care workers show they are respectful towards the people who use the service. All state their commitment to providing a good quality service but report staff shortages. They explained how these are managed so that there are always sufficient staff on duty. They told us care staff accept changes to shifts and/or to work additional hours. They spoke of the impact this has on them and on their colleagues. One person spoke of *"juggling staff so pulling staff off days and putting them on nights as nights is priority"*. One person told us agency workers are employed to cover shifts. However, they explained this does not necessarily help permanent staff who, because they know people's routines and the systems in place, end up undertaking most of the work. We were also told one person becomes anxious when they are supported by agency staff they don't know. On the day of inspection, we noted the manager worked hands-on to ensure a person's planned activity went ahead. We conclude that the manager's and care workers' dedication minimises the impact staff shortages have on people living there. We discussed the staffing situation with the service provider. They acknowledge it is challenging and they are relying on staff's goodwill. They are employing agency workers when necessary and are carrying out further recruitment activities.

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
59	The service provider must ensure that records relating to individuals are always accurate and up to date and that staff's personnel files are always stored	New

	securely.	
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