



Inspection Report on

Ty Gwyn

**Ty Gwyn
21-23 Stanwell Road
Penarth
CF64 2EZ**

Date Inspection Completed

30/10/2023

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About Ty Gwyn

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Methodist Homes
Registered places	45
Language of the service	English
Previous Care Inspectorate Wales inspection	03/08/2022
Does this service promote Welsh language and culture?	The service is working towards providing an Active Offer' of the Welsh language demonstrating a significant effort to promoting the use of Welsh language and culture.

Summary

Ty Gwyn can accommodate up to 45 people with nursing and personal care needs. This inspection was unannounced. There is a manager in place who is registered with Social Care Wales, the workforce regulator, in accordance with legal requirement. Karen Slater is the responsible individual (RI) for the service.

People receive good care and responsive support from a friendly staff team. There are sufficient staff to provide care and assistance at the time of this inspection with arrangements in place to cover any staffing shortfalls. The service has a number of staff vacancies and currently uses agency staff with new staff in the process of recruitment. People live in a clean, homely environment which is suitable for their needs. Activities and support is arranged in accordance with people's interests and wishes are carried out and promoted and respected by staff.

The management team and RI are visible and engaged in the day-to-day running of the service. Systems are in place to promote and sustain the quality of care and support provided. Care documentation accurately reflects the care and health needs of people living at the home in a person-centred way.

The home environment is secure. People are actively consulted about the care and support they receive. Infection prevention and control processes are in place to reduce the risk of infectious diseases being spread throughout the home.

Well-being

People are treated with dignity and respect. People told us they are very happy at Ty Gwyn and enjoy positive relationships with staff. Comments included *“staff are good to us here”* and *“the food is good, we are very lucky, staff are kind and helpful”*. Care staff are happy and extremely enthusiastic about working at the service. Comments included *“I love my job here, we are supported really well by the managers”* and *“we are a good team, we all work well together.”* Staff value and respect the preferences of each individual and encourage independence wherever possible. Care documentation supports the delivery of care and support. Although we identified some areas for improvements, the manager told us the system is due to be changed to an electronic system within the next few weeks.

Whenever possible, people are supported to have control over their day-to-day life. People mostly follow their own routines each day with support and encouragement from the staff team. The care staff we spoke with were familiar with people’s individual preferences and these are recorded in the care documentation. People told us their views and opinions are listened to and they can raise any concerns with the staff team or management. One relative told us *“It is the best place; I visit most days and staff are amazing.”* *People benefit from a variety of social activities and pastimes of their choice.*

People are safeguarded and protected from harm. Care staff are trained in safeguarding and have policies and procedures to guide them. Safe recruitment checks are undertaken to ensure care staff are suitable to work with vulnerable people. Staff training is up to date with all mandatory training and additional training offered. The service makes safeguarding referrals when required and notifies CIW of significant events in a timely manner. Feedback about the service describes it as unanimously ‘good’ from people living in and visiting the home.

Measures are in place to promote best practice throughout the home. Management have good oversight of incidents, accidents, complaints and safeguarding matters. A statement of purpose is present which reflects the service.

People are protected from harm. The entrance to the home is secure and the environment is clean, well maintained and environmental hazards have been reduced as far as practically possible. Staff safety checks are completed when required and there is a fire risk assessment in place. Any serviceable equipment is serviced within required timescale.

Care and Support

Systems are in place to protect people who use the service. We saw people's body language and expressions indicated they felt safe and secure around the care staff who support them. People told us they felt safe and secure living at the service. Comments from people using the service included *"I like living here and staff are really supportive, we are really well cared for"* (person) and *"Staff are good here, we are kept involved with any changes at all"*. (relative) During the visit we observed lots of families and visitors around the home providing a homely, environment and people feel a sense of belonging. Systems are in place to ensure people remain safe whilst promoting their independence. A safeguarding policy is available which informs staff of their roles and responsibilities in relation to protecting adults at risk from harm, abuse and neglect. Records we saw evidence staff have received up to date safeguarding training.

People have timely access to health and other services to maintain their ongoing health and well-being. Information within people's care files evidence referrals and contact with various health and social care services. We saw these referrals were made in a timely manner and whenever people's needs changed. Personal plans include details of people's personal preferences, we found these preferences are valued and respected by staff and management. We identified where documentation could be further improved this includes; ensuring recording the support provided to achieve personal outcomes and index for easy navigation for new care staff. We were told this would be captured in the new electronic system due to be installed.

Care staff interact with residents in a friendly and extremely respectful manner. People's choices are promoted, for example regarding meals, drinks and various snack options. Care staff show good knowledge of people's wishes, needs and how to respond to them. The service offers an excellent range of activities within the home including; a daily quiz, music therapy, daytrips of people's preferences and memorabilia. There is a full activity planner on display and delivered weekly to people's bedrooms. People are supported and encouraged to partake if they wish whether in group activities or on a one-to-one.

The service has systems in place for medication management. People receive their medication as prescribed. We looked at the medication administration records (MARs) and saw they are appropriately completed. Fridge and room temperatures are recorded daily by staff and we saw the medication areas to be clean and well organised. The service promotes hygienic practices and manages risk of infection and we saw staff wearing appropriate personal protective equipment when required.

Environment

People are cared for in a clean and homely environment. People are protected from environmental health and safety risks. The home offers suitable accommodation for the people living at the home and management has shown a commitment to developing and improving it for their benefit. The front of the home is secure, with a keypad system in place. The home's spacious reception area is welcoming and benefits from continued refurbishment. Photos and decorations on walls made during social activities of autumnal themes adds to the homeliness of the environment. People can be confident that there are effective arrangements at the home that will protect public safety and minimise cross infection. There is oversight to ensure staff follow the correct infection guidance. We found call bell checks are carried out and call bells available throughout all areas of the home.

People have a sense of belonging. The home offers a wide choice of small communal areas for people to sit and enjoy time with others or spend quiet time. Bedrooms are personalised with items of people's choice and personal belongings. There are small dining areas throughout the home and relaxing garden areas which give the home a pleasant feel. The manager told us people enjoy spending time in these areas during the warmer weather. There is good access and egress for people living at the home with mobility needs. The entrance to the home is secure.

We considered various records relating to health and safety, which evidenced the provider maintains effective oversight to ensure the environment was safe. All confidential files including care and staff files were stored securely in lockable areas. Various fire-related safety checks are carried out and residents have personal emergency evacuation plans in place. There is a fire safety risk assessment and care staff receive training in fire safety and first aid. From our walk-around we noted window openings that may potentially pose a risk to resident's are secure. Environmental audits to ensure areas are clean and safe are carried out daily/weekly and any shortfalls are acted upon immediately. The home has achieved a score of three (satisfactory) food hygiene rating.

The home, surrounding gardens and views provide a safe, secure and well-maintained environment which people told us they enjoy in the warmer weather.

Leadership and Management

People can be confident management monitors the quality of the service they receive. The service provider evidences oversight of the service and seeks to drive improvement in all areas. Systems and processes ensure the smooth running of the home. Clinical and non-clinical audits are in place in relation to key areas of service delivery, including falls and medication. The RI spends time at the home and engages with staff, relatives, and residents to enable feedback. We requested information relating to monitoring and we saw the recent quality of care review report and three-monthly visits carried out. The information demonstrated the RI undertakes formal monitoring as legally required.

People can be assured that staff are competent to undertake their roles and there is a robust recruitment process. We looked at two staff recruitment files and saw they contained all the pre-employment checks required in respect of any person working in regulated services. Staff discussions evidenced there is a more established staff team in place with agency staff used to fill any shortfalls. We were told additional care staff are in the process of recruitment and due to commence employment within the next few weeks. Staff told us the nurses and care staff work well as a team and they feel well supported and valued by management. The training matrix indicates staff are up to date with mandatory training courses such as moving and handling, infection control, fire safety and safeguarding adults at risk.

People have opportunities to express their views and lodge complaints. The home has a complaints policy in place and the written guide to the service informs people how to raise their concerns formally. Mechanisms are in place to protect people and the documents in place set out and provide people with an understanding of the service they can expect to receive. People using the service and staff know who to approach if they have concerns. People have access to independent advocates if they wish and feel safe to use them should the need arise.

Management oversees staff training and supervision needs, and we saw one-to-one supervision in accordance with regulatory requirements. Supervision provides each staff member with opportunities to discuss their performance, development, and any concerns they may have. We were told by the manager of additional incentives made to ensure staff are happy and appreciated. In turn, this secures benefits for people who are supported by a happy workforce.

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
34	The provider needs to ensure that staffing levels are sufficient to meet the needs, and maintain the safety of people using the service at all times.	Achieved
57	Two fire doors wedged open with chairs.	Achieved
60	The provider failed on 2 occasions to notify CIW of incidents that should be reported in line with the regulation.	Achieved
80	The provider is not completing quality of care review reports, with data that is required in line with regulatory requirements.	Achieved

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