

# Inspection Report on

Ty Gwyn

Ty Gwyn 21-23 Stanwell Road Penarth CF64 2EZ

## **Date Inspection Completed**

03/08/2022



### **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	16 May 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 are happy with the care they receive and speak highly of the staff who provide their care and support. Care staff understand the needs of the people they care for and do so with kindness and respect. The service has a number of staff vacancies and currently uses a high level of agency staff which is putting pressure on staff. Care documentation is thorough, robust, and reflective of the person being cared for, and evidences that support from external professionals is sought. Care staff receive training and supervision and generally like working at Ty Gwyn, but some staff report that morale is low at the service. Staff recruitment is safe and robust as pre-employment checks are completed and staff personnel files contain all required information. There are policies and procedures in place for the running of the service and the Responsible Individual (RI) has oversight of the service and visits the service in line with regulations. Quality monitoring does take place at Ty Gwyn but improvements are required to the quality-of-care review report. The environment is well maintained and decorated nicely with good Covid-19 measures in place. People are cared for in single rooms which are personal and comfortable.

#### Well-being

People get the right care without delay. Prior to admission to Ty Gwyn, a pre-admission assessment is completed and a personal plan of care is developed. Care documentation is reflective of the person being cared for and kept up to date. Professional support is sought when required and any guidance fed into personal plans. People attend appointments as needed. Care staff have good relationships with the people they care for and have good knowledge of their needs and how to meet them. The home has some staff vacancies which are being covered with agency staff use. People live in an environment that meets their needs and has all appropriate equipment to maintain their safety. There are extensive activities in place that offers social stimulation on a one to one basis or with the company of others.

People are treated with dignity and respect. Care staff provide care with compassion and kindness and always ensure that people's needs are met in line with their preferences. People are supported to make choices in regard to daily routines, food, and activities and are encouraged to maintain relationships with friends and family. People have their own single bedroom which offers privacy when required. People's rooms are personal and homely. People are provided with information on what they can expect from the service and there is a complaints policy in place if people are not happy with the care they receive. People's views are sought as part of the quality-of-care review process but need to be fed correctly into the accompanying report. The RI engages with people as part of regulatory visits.

People are protected from abuse and harm. There is a robust safeguarding policy in place and the manager liaises with the safeguarding team as required. The provider needs to ensure that CIW are notified of all incidents where required. All staff receive training in regard to safeguarding adults at risk of abuse which is refreshed regularly. Staff recruitment is safe with pre-employment checks completed before employment is offered. Care staff receive appropriate training and feel equipped to undertake their roles. The building is well maintained and the environmental hazards have been reduced as far as practically possible. Safety checks are completed when required and there is a fire risk assessment in place. Any serviceable equipment is serviced within required timescales.

#### **Care and Support**

People get the right care at the right time. Care staff understand the needs of the people they care for and can anticipate the needs of people who cannot express their needs themselves. We saw staff delivering care correctly while showing patience and compassion. Staff speak with people with kindness and ensure peoples dignity at all times. One person we spoke with told us "The staff are marvellous; they look after me really well". Medication processes within the home are safe and robust. we saw that medication is stored securely and administered correctly. Medication Administration Record (MAR) charts contain all required information and are completed correctly. Care documentation clearly outlines people's needs and how they should be met and include risk assessments where required. These documents are extremely important as they guide staff on how to care for people. We saw evidence that referrals to external professionals are made without delay and any advice or guidance is followed correctly. Documents are reviewed regularly to ensure they are current and reflective of the person being cared for.

People have choice and control over their lives. People have their own personal routines and decide when to get up in the morning, when to go to bed at night and how to spend their time in between. Where possible people and/or their representatives are part of care planning and review processes. We saw peoples likes and dislikes recorded along with their preferences on how they wish their care to be delivered. People have choice in regard to the food they eat and where they prefer to eat their meals. We saw a rolling menu with good choices, but people are free to have alternatives if they prefer. Ty Gwyn offers an excellent range of activities within the home including quiz, bingo, armchair fitness, and museum in a box. There is a full activity planner on display and people are supported and encouraged to partake if they wish. On the day of inspection there was church service taking place which people were clearly enjoying. We saw people being offered choices of drinks and snacks which made the service a very social event for people. One person told us "I enjoy myself in the lounge, there is always something going on. I never want to leave this home". Visiting to the home has resumed and people are encouraged to go out with their friends and family where possible.

#### **Environment**

People live in a suitable environment. Ty Gwyn is situated in a residential area of Penarth that benefits from local amenities and good transport links. The home is warm, welcoming, and decorated nicely throughout. We did not detect any malodour during inspection. The service is broken into three units, ground floor, middle floor, and top floor. Each unit has ample communal space which enables people to spend time together and to undertake group activities. People are free to attend activities on any of the units as they wish, and there is a lift for people to move between floors safely. There are a sufficient number of bathrooms and toilets throughout the home which are clean, tidy, and in good working order. The home also benefits from pleasant outdoor space that people are free to use as they wish. People have their own single bedroom which offers personal and private space. We viewed a selection of bedrooms and found them warm, clean, and comfortable. People are encouraged to personalise their rooms and bring items to make their room as homely as possible.

People are cared for in a generally safe environment. On arrival we found the main entrance secure and our identification was checked before we were permitted entry to the home. We were also asked to present a negative Covid-19 test. The building is in a good state of repair and well maintained. Safety checks are completed regularly and repairs completed swiftly. The home is generally clutter free but would benefit from a tidy up in some areas. We noted some loose hand gel in communal areas and advised the provider that these should be fixed on the wall or kept on staff's person. There is a fire risk assessment in place and all residents have a Personal Emergency Evacuation Plan (PEEP) in place which is important as this document guides staff on how to evacuate people in the event of an emergency. Fire alarms are tested regularly. During inspection we noted some bedroom doors (which are fire doors) were wedged open with furniture. We advised provider that correct mechanisms should be used so that the doors close when the fire alarm sounds. Since the inspection we have been advised that the mechanisms are now in place and working.

#### **Leadership and Management**

People benefit from the leadership and management in place. Ty Gwyn has a manager who is registered with social Care Wales, the workforce regulator, and a Responsible Individual (RI) who has oversight of the service. The RI completes visits to the service in line with regulatory requirements and writes a report to support the visits. Quality assurance monitoring takes place but reports do not include the required data and so we have informed the provider that this is an area for improvement and we expect action to be taken. There are policies and procedures in place for the running of the home and the manager understands legal requirements in regard to caring for vulnerable people. Referrals are made to the local safeguarding team when required and applications are made to the Deprivation on Liberty safeguard (DoLS) team when a person lacks capacity to consent to living at the service. This ensures that placements at Ty Gwyn are lawful. We noted that the provider has failed to notify us (CIW) of some events that have occurred within the service. Whilst there has been no impact on people, this is an area for improvement and we expect the provider to take action. Complaints to the service are taken seriously and dealt with correctly. We saw a number of cards and letters complimenting the service and thanking them for the care they had provided.

People are supported by staff who are well trained and safely recruited. We examined a selection of staff personnel files and found that they contain all required information. We saw evidence that pre-employment checks including Disclosure and Barring service (DBS) certificates and references are applied for prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people. All staff receive training appropriate to the roles they undertake which is refreshed regularly. Staff feel well trained and competent to do their jobs. Staff receive supervision in line with regulatory requirements. Supervision is important as it is an opportunity to discuss needs or practice issues in a formal setting that is recorded. Some staff we spoke with told us that they do not feel listened to and feel morale is low in the home. We discussed this with the manager who gave assurances that they had been attempting to resolve this issue but would continue to address the issue as a matter of urgency. Ty Gwyn currently has a number of staff vacancies and is using agency staff to ensure a full complement of staff. We discussed this with the provider who told us that they are actively recruiting for staff and are seeking to fill the vacancies as soon as possible. While no immediate action is required this is an area for improvement and we expect the provider to take action.

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		
	The service is not compliance with Regulation 21 (1) This is because there were insufficient staff to meet the needs of residents living at the home.	Achieved		

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	
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.	New	
57	Two fire doors wedged open with chairs.	New	
60	The provider failed on 2 occasions to notify CIW of incidents that should be reported in line with the regulation.	New	
80	The provider is not completing quality of care review reports, with data that is required in line with regulatory requirements.	New	

### **Date Published** 30/09/2022