

Inspection Report on

Cwrt-Clwydi-Gwyn Care Home

Cwrt Clwydi Gwyn Care Home New Road Skewen Neath SA10 6YA

Date Inspection Completed

04/07/2024



About Cwrt-Clwydi-Gwyn Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	HC One Limited
Registered places	40
Language of the service	English
Previous Care Inspectorate Wales inspection	18 October 2022 & 19 October 2022
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

Cwrt-Clwydi-Gwyn is a vibrant home with a team of caring, motivated staff. People are respected as individuals and supported to remain as healthy and independent as possible. They enjoy various indoor and outdoor activities and are given opportunities to follow their dreams. Care staff support people in a way that enhances their physical and mental well-being. There are plans to upgrade the care planning system and improve record-keeping.

The accommodation is spacious and well-maintained. Private and communal rooms are appropriately furnished and decorated, although the first floor would benefit from more sensory stimulation and dementia-friendly features. The home has two nicely presented gardens.

Staff feel proud to be part of a close-knit team that is committed to giving people the best quality of life. They are recruited, trained and supervised appropriately. The manager runs the home with confidence and leads staff effectively. The quality of the service is monitored by the area director and responsible individual (RI). The RI consults people about their experiences to assess standards and identify service improvements.

Well-being

The home has a real sense of community. People are supported to maintain good community connections and relatives are involved in making home improvements. Staff help people achieve their dreams by championing the company's 'wish tree' initiative. One person said, "They're a wonderful bunch. This is the sort of place you can bring your friends on the hop – they welcome you in". People look forward to spending time with others, particularly during mealtimes and activities. They have recently enjoyed a weekend of 'Dancing through the Decades' and attended parties to mark special occasions. A relative said, "It was fabulous". Staff plan to host themed events every month.

People feel safe in their home. The accommodation is free from hazards and facilities are appropriately maintained. People have positive interactions with care staff and value the relationships they have built. Staff are recruited, vetted and trained appropriately. They work well as a team to prioritise people's health and welfare, providing physical and emotional support when needed. Staffing levels are kept under review to ensure people's needs can be safely met. Staff complete essential training in relation to safeguarding, basic life support and health and safety. People have confidence in the manager, who runs the home with pride and passion.

People's views are valued. Care staff support them to make decisions regarding their day-to-day activity. People help develop and review their personal plans, which identify their care preferences and routines. Staff make every effort to accommodate people's individual requests and follow Deprivation of Liberty Safeguards (DoLS) procedures to ensure people are not unlawfully restricted. The RI speaks with people about their experiences when assessing standards at the service.

The environment generally supports people's needs and interests, but some areas could be enhanced with dementia-friendly features and more stimulation. People have ample opportunities to socialise with others in communal areas, which are appropriately decorated and furnished. Bedrooms are also arranged and equipped to cater for people's individual needs. People have access to attractive outdoor areas, where they can relax or enjoy gardening activities.

Care and Support

People enjoy an active social life. We saw people spending time together in communal lounges, where they watched shows and played games on a portable activity tablet. There is little structure around group activities due to staff absence. There is no set programme of activities, although posters are displayed in prominent areas to advertise upcoming events. Staff are currently unable to drive the home's minibus, so public transport is used to support outings. Despite the challenges, people have much to look forward to, with some attending community clubs every week. The home also supports people to follow their dreams. People have had many enjoyable experiences, including pub lunches, ballroom dancing, skiing and race days. One person said, "It was good fun, a good laugh". People have also received awards for their individual attributes during 'A Night at the Oscars'. Staff told us this will be an annual event due to its success.

People cherish their relationships with care staff. One person said, "They're very nice here, all of them. I can't fault them". We observed many positive interactions as care staff recognised what was important to people and supported them as individuals. Care staff also support people to follow their own routines and complete tasks independently, providing prompts and assistance if needed. A relative told us "They're marvellous here, honestly".

The home uses an electronic system to plan and record people's care. 'Me, Myself and I' documents also provide insight into who people are and help shape the care and support they receive. Welsh language and other communication needs are identified during assessments and reflected within personal plans. Although electronic records are regularly reviewed, information within risk assessments and personal plans is not always consistent. The system is not easy to navigate and care staff reported that updates can take a long time as documents are not linked. A different care planning system that is considered more intuitive and user friendly is being introduced in September 2024. Until then, staff need to be extra vigilant in updating all relevant plans following changes in people's needs.

People have input from medical and specialist services to promote their health and well-being. Their medication is stored and administered in a safe way. Professionals told us people appear well cared for when they visit, which is what we also observed. The new senior team is passionate about improving staff's knowledge and systems of work. Daily 'flash meetings' provide extra opportunities for staff to share information about people's health and welfare, including referrals to health professionals. People enjoy a wide range of meals. One person described their lunch as "pretty good, actually!". Another person told us care staff are willing to make hot snacks outside usual mealtimes, which they appreciate. Care recordings indicate that people consistently receive appropriate support, although they could be strengthened to better capture the activities and interactions people experience.

Environment

The accommodation is well presented overall and has a feeling of space. The large communal lounge on the ground floor has many homely features and is arranged in a way that promotes both social interaction and relaxation. People told us they like eating with others in the dining room. This was beautifully presented for the lunchtime meal, creating a warm, luxurious feel. A colourful and informative Welsh-themed display outside the dining room features common words and phrases. People have access to a hairdressing salon when the hairdresser visits twice a week. We found that bedrooms vary in terms of personalisation. Most have been painted the same colour but contain treasured items and personal effects. A music- and sports-themed bar room is often used for hosting parties.

There is a lack of stimulation and dementia-friendly features on the first floor. The company's dementia group has recently completed an assessment to identify what can be improved. The area director told us of plans to create a garden area and shop in open parts of the hallway. Specialist equipment will also be provided for those living with dementia, which will make their activities of daily living easier.

The home has made good use of its outdoor space. Relatives have helped create attractive gardens for people to enjoy. These are located at the front and along one side of the home. There are various features of interest which provide sensory stimulation and colour, such as garden ornaments, plants, flowers, lights and wind chimes. Seating areas allow people to relax and enjoy the outdoors. Some bedrooms along the side of the home have windows overlooking the garden. One person told us they have enjoyed watching the garden develop and find the view very pleasant.

Health and safety measures are in place. A keycode system helps prevent people exiting the building and accessing hazardous areas unsupervised. Corridors are generally wide and free from clutter. There is adequate space to store equipment and work to declutter storerooms is underway. People can easily access toilets, bathrooms and shower rooms. Safety equipment is used in people's bedrooms in line with their personal plans. Fire safety equipment has been serviced annually and fire drills have been carried out frequently. The home's utilities and equipment are appropriately inspected and maintained.

The home is clean and hygienic. It received a food hygiene rating of 4 (good) in May 2024. Domestic staff carry out general and deep cleans systematically. Laundry workers handle clean and dirty items separately to reduce cross contamination risks. Personal protective equipment (PPE) is available and used appropriately. Except for the floor in the medication room, we found all communal and private rooms to be clean and tidy. There has been a long delay in refurbishing one first floor toilet, where the floor and other surfaces cannot easily be decontaminated. Timescales for completing environmental upgrades should therefore be considered to ensure works are progressed as planned.

Leadership and Management

People have confidence in the home's leadership and management. One person said, "The manager is lovely. Whoever goes through her hands always comes out smiling". The deputy manager and manager are trusted and respected by the staff team. One staff member told us, "It's not a job for them, it's more. There is that personal touch". Care staff are proud of their value base and strong sense of teamwork. In addition to shift handovers, a member of staff from each department attends a daily 'flash meeting' to discuss their ongoing work. This helps prioritise tasks and keep staff informed about the day's events. Written information about the home is available in the reception area. The RI told us work has begun to align key documents to the amended Regulations.

Standards at the home are closely monitored by the area director and RI. The RI sets actions to improve the service following formal visits and quality-of-care reviews. Reports completed by the RI capture the experiences of those using the service very well and convey gratitude for the team's continued hard work and commitment. People are invited to share their views about the home in various ways, including via a 'Have Your Say' tablet located in the home's reception area. Records confirm that complaints are dealt with in line with the home's policy and procedures. The home has received many compliments about people's experiences and maintains a consistently high score following online reviews.

Staff undergo the required pre-employment checks before starting work. This includes a check via the Disclosure and Barring Service (DBS), which is renewed every three years. Staffing levels are increasing, with several new recruits due to start their period of induction. This will relieve some pressure on the team as absences can be more easily covered. For example, the area director told us additional hours will be allocated to support outings and activities. Managers will also consider how senior staff can best be deployed to support staff on each floor, particularly during busier periods. Staffing numbers on the first floor increased shortly following the inspection, which the manager reported is working very well.

Staff complete a good range of training, which includes safeguarding, infection control, health and safety, basic life support, person centred care and various dementia courses. Training statistics are monitored by the area director and RI. Managers have worked with staff to increase their level of compliance with the training programme. Staff have opportunities to discuss their roles during their individual supervision meetings. Records relating to these meetings could be enhanced by ensuring they consistently reflect staff views. Professionals told us staff communicate well with them and they are confident in their abilities. We saw care staff supporting people with kindness and compassion. For example, they worked as a team to improve the layout of one person's room, so it better supported their social needs and preferences.

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.

Area(s) for Improvement			
Regulation	Summary	Status	
N/A	No non-compliance of this type was identified at this inspection	N/A	

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