



Inspection Report on

Trafalgar Park Care Home

**6 HEOL ISLWYN
NELSON
TREHARRIS
CF46 6HG**

Date Inspection Completed

29 April 2021

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About Trafalgar Park Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	HC One Limited
Registered places	52
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes

Summary

Trafalgar Park Care Home offers care to 52 older people, including some who live with dementia. Ruth Yates is the Responsible Individual, being appointed by HC-One Ltd to oversee the running of the service. There is very good oversight and monitoring of the service by managers to ensure standards are maintained. The home is warm, comfortable and clean. People receive good care from staff who are well supported to carry out their role. People living at Trafalgar Park consider it their home and help the service to improve and develop through their involvement. There is a family atmosphere where individuals refer to other residents as their "friend". The home's manager ensures development plans are followed to improve quality of life for residents. Staff respect individuals and their wishes.

Well-being

People are supported to do things that matter to them and are encouraged to make their views known. Residents have meetings where they feel able to raise issues and make suggestions to develop the service and improve the experiences of people living at the home. Residents inform us that the manager and staff take action when suggestions are made. Minutes of the meetings reflect issues raised but could better reflect how these are going to be addressed. We see people making decisions about their daily life and staff supporting choices people make. People are observed to be happy, involved in activities of their choice and supported by kind staff who evidence that they know individuals well. Staff told us they love their job and always aim to make the residents smile. This is observed and captured in photographs. Daily written records do not always reflect the positive outcomes for people and the caring atmosphere within the home. The service makes appropriate applications for Deprivation of Liberty Safeguards when people lack capacity, enabling them to access advocates to ensure their views are represented.

The Service Provider, through the Responsible Individual (RI), has policies and procedures in place to safeguard people living at Trafalgar Park. The manager reports any incidents or accidents to the relevant authorities. Full investigation of incidents ensures appropriate action is taken to maintain high standards of care. People told us they felt safe and would know who to raise a concern with if they needed to.

The service offers people the opportunity to live in a home where they can develop new friendships whilst maintaining relationships with family and existing friends. The service recognises the importance of family contact. During the current Covid-19 pandemic the home supports and promotes the maintenance of relationships with people outside of the home. Families explain how they have been able to stay in touch with loved ones and respect that the home is following government guidelines. Social workers tell us that it is sometimes difficult to contact the service by phone to arrange reviews. Given this information, the manager will aim to improve this line of communication. An activities coordinator is commended by people at the home for their imagination and resourcefulness. They offer opportunities for people to come together. One person told us "I've never done as much in my life – crafts and that". People tell us how they would go out on trips regularly before the current government imposed restrictions. People are supported to move around the home to be with those they wish to socialise with. The ethos of the home is one where people feel part of a family. Staff tell us they are a team. We observe residents introducing each other as "my friend".

Care and Support

Personal plans are in place, reviewed regularly with the individual or their representative, showing a good understanding of the person and their needs. Risk assessments support the personal plans and are appropriate to the individual. Staff are aware of the personal plan, follow this and any updates provided through regular meetings. A booklet called "Remembering Together" sits on the personal plan, supporting the recording of a person's social history and is a valuable tool to encourage discussion with others. These need to be available to the individual. We are assured by the Area Director that this is a work in progress. Daily records that evidence the provision of care are sometimes inconsistent and don't always capture outcomes. People's families tell us "It's better care than when they were living with us" and "Very good care".

Individuals are supported to maintain a healthy diet and fluid intake. During the past year the service has closely monitored people who are at risk of losing weight. Identified causes include ill health but also general low mood due to the national lockdown requirements when individuals have not been able to see family or friends in person. We see people who are at risk of losing weight being supported with their fluid and nutritional needs as outlined in the plan. This includes provision of high calorie meals, drinks and snacks. There are very good records to support this. Regular weight checks are carried out. Analysis of records and reviews ensure appropriate intervention from the GP or dietician. People tell us the food is "first class" and "really good". People enjoy home-baked products and comment how they like the varied snacks available. People who are diabetic are encouraged to select the healthier options but choice is always down to the individual.

People are consulted about their wishes regarding advanced care planning, especially for end of life, and are provided with appropriate care at this stage. Care plans have records to show a person's wishes, including any wish to be resuscitated. For individuals who are considered nearing the end of their life, the service ensures involvement of relevant health professionals and specialist palliative care nurses. We see people being treated with empathy and kindness; given time to talk and supported to make decisions. Specialist equipment is in place where required. When people become unwell, the service monitors their needs but could provide specialist equipment more promptly and not rely on external services to allocate this. Awareness of this has been raised with the RI who gives assurances that this will be taken forward. We are told that staff provide very good end of life care that respects the wishes of the individual.

Environment

The service provider ensures that the premises meets the needs of the people living at Trafalgar Park. Information is available about the home in the Statement of Purpose and people are encouraged to visit the home prior to admission. The home is well laid out, offering a variety of spaces for communal activities or quiet relaxation. Dining rooms are arranged to offer good dining experiences. There is opportunity for individuals to personalise their room, including arranging to provide their own furniture. People tell us they are very happy with their rooms and the home. They also tell us they enjoy the garden that is suitable and accessible to all. Lifts provide access between floors. People live in a home that is well maintained and nicely decorated. Records and certificates evidence that routine testing of the environment and equipment is kept up to date. The highest level 5 has been awarded to this home by the Food Standards Agency. The manager or appointee undertakes regular audits of the building.

Policies and procedures support the management of infection control. The service has an infection control lead who has ensured that standards of cleanliness have been maintained throughout the home. They tell us that the service provider has been fully supportive, especially throughout the pandemic, ensuring stocks of resources. Systems are in place to monitor cleanliness of the home including regular auditing. The general practice of staff, including the use of Personal Protective Equipment (PPE) is tested through checks by the management. We found the home to be clean and observed deep cleaning of areas that are used on a daily basis. We also observed staff wearing appropriate PPE. Due to the current pandemic some areas of the home are being used for different purposes. This temporary arrangement could be improved if the situation is to be ongoing as staff did not have enough private space to change before and at the end of a shift. Visitors are supported to see loved ones in a controlled environment as required by the current guidelines, supporting the safety of residents

Leadership and Management

The service provider ensures that there are effective arrangements in place to monitor, review and improve the quality of care and support. A responsible individual (RI) is appointed to have oversight of the service. They have policies and procedures in place and check that these are being followed through a variety of monitoring systems. There is evidence that the information gathered is acted upon to ensure an improved service and good outcomes for people. The manager listens to people, addresses any issues and ensures implementation of actions to guarantee improvements. These include improved catering and continuity of staff. The visibility of the manager within the service is confirmed by staff who acknowledge their positive mannerisms and encouragement to maintain high standards. The manager, in turn, acknowledges the value of the RI's visits and feedback on the quality of performance, including care.

There is a sufficient number of competent, experienced staff to support people. Rotas and staff lists show that staffing levels are in line with numbers identified in the Statement of Purpose. The Area Director identifies trends, including numbers of people that have increased needs, in order to adjust staffing levels. When talking to staff, they told us staffing levels have improved, but night times are particularly busy at the moment due to increased dependency of some people. Staff feel they can speak with their line manager or the service manager to help identify the need for increased staffing levels. There is a balance of experienced and newer members of staff.

Staff are encouraged and supported but do not always receive quality supervision meetings. Training provision is very good with over 95% of staff having completed the required courses. Staff tell us they have been supported and encouraged to develop; one member tells us "They've given me confidence, I'm doing things I never thought I could do. They have really brought me on", another tells us, and "they are so supportive". Staff are complimentary about the relatively new manager, one telling us "He took us under his wing" when Covid started. Supervision meetings are mostly carried out, with some exceptions during the current pandemic. Records of supervisions require improvement. Senior care workers have some training in supervision of colleagues when stepping up into the role, but the senior care workers tell us they would benefit from refreshers. Appropriate supervision is identified as an area for improvement and will be re-tested at the next inspection.

Areas for improvement and action at, or since, the previous inspection. Achieved

Areas for improvement and action at, or since, the previous inspection. Not Achieved

None	
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Areas where priority action is required

None	
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Areas where improvement is required

The service provider is not ensuring that people working at the service receive appropriate supervision and appraisal as supervisors have not had refresher training and supervision records lack evidence of quality.	Regulation 36(2)(c)
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The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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