

Inspection Report on

Ty Cwm

Leonard Cheshire Disability Ty Cwm Lon Ty Cwm Carmarthen SA31 3GA

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

11/10/2023

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About Ty Cwm

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Leonard Cheshire Disability
Registered places	20
Language of the service	Both
Previous Care Inspectorate Wales inspection	18/05/2022
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People lead happy, healthy, and fulfilling lives at Ty Cwm. A relaxed atmosphere throughout the service helps people and visitors feel at ease. The enthusiastic and professional staff team strive to make a positive difference to people's lives. Nurses and care workers demonstrate a thorough knowledge of the people they support. People are encouraged to make daily choices in how they live their lives and do things that are important to them. People and their relatives are invited to contribute to their care planning review process, to enable each person to have choice and a voice about how their support is provided.

There is good staff retention, so care workers are familiar to people. All employees feel well supported by the senior staff and there is a range of staff training available to help care workers support people safely and effectively. Care workers say they feel supported by the manager and receive regular individual supervision to discuss their work.

An established, enthusiastic management team continually strive to develop people's care and support wherever possible. The Responsible Individual (RI) regularly visits to talk to people and care workers to obtain their feedback about the service. Good communication channels are evident, with highly effective monitoring of the quality-of-care people receive by the RI.

Well-being

People do things that matter to them and make them happy. People and their relatives know and understand what support is available to them because they are invited to be actively involved in their support arrangements. Relatives say, *"They keep me up to date all the time, I am always welcome here and join in with activities"* and *"It is like family here and seeing X happy and smiling is the best I could wish for"*.

People have control over their day-to-day lives because care workers ensure each person is involved in decisions about their support. There is good staff retention, so care workers are familiar to people, giving them confidence their needs and preferences are understood. Personal plans are detailed containing individual preferences and identify what is important to individuals.

The relaxed atmosphere in the service helps people and their relatives feel at ease. Each person is encouraged to personalise their surroundings in whatever way they wish. People feel safe, relaxed, and comfortable, and know how to make a complaint if they need to. Peoples' privacy and personal information is consistently protected. Care workers receive regular support, guidance, and training: they have been through a good recruitment process and senior staff members regularly monitor them to ensure they are meeting people's needs. They may access policies and procedures to enable them to protect vulnerable people.

The home's statement of purpose accurately describes what the service provides and is readily available to people and relatives. Each person using the service has a copy of the written guide. This provides details of what people can expect from the home as well as details of the complaints process should they need to use it.

The service provides an 'Active Offer' of the Welsh language even though there is currently little demand for exclusively Welsh speaking support. Some staff members are Welsh speakers and bilingual documentation is readily available. During the inspection we observed staff speaking with people in their preferred language (Welsh). Welsh speaking staff support staff who do not speak Welsh to learn and say key words such as "Bore da" so they can build skills and interact with everyone.

Care and Support

People have accurate and current plans for how the service provides their support. The manager considers a range of information to ensure they can meet each person's needs, and there is a real emphasis on ensuring any new person would fit in with others in the service.

A detailed recording system provides a clear record of people's support arrangements. Risk assessments and personal plans describe health interventions, what is important to each person, and there is a clear system to record peoples' medical conditions and how these fluctuate. Senior staff regularly review all documents, so they remain up to date.

The staff team work hard to ensure people are as independent as possible where they can be, and they are living fulfilled lives, doing things that matter to them. Examples of these are, going to the 6 nations rugby matches, going to see your favourite team in rugby matches, going and doing your own shopping, having the church come to you to sing together.

During a balloon and parachute activity staff who spoke Welsh were interacting with people in their preferred language. The care worker was excellent at including everyone, translating what had been said in Welsh. The support and inclusion of peoples preferred language was brilliant. Welsh speaking staff help non-Welsh speaking staff to have key words to say and understand such as "Bore da, Prynhawn da, Diolch etc.

There are very good hygiene practices throughout the home and care workers may refer to infection management policies when necessary. The service stores cleaning products securely in locked cupboards and there are guidance notes for handling the products.

The provider takes appropriate steps to safeguard people from neglect and abuse. Care records clearly state any risks to people's health and well-being, and detailed risk management plans help to keep people safe.

Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach any of the senior staff team but would also contact external agencies such as the local safeguarding office if they thought they needed to.

Environment

The provider ensures the building is maintained and supports the people living there. The manager has requested a complete repaint of the environment, and preparation works have begun. Regular audits are undertaken to ensure the building and any equipment used are safe and appropriate for use.

Outside, the summerhouse and garden have been completed, this provides people additional spaces where a range of activities can take place, including music, potting, crafts, relaxing and sensory areas. A greenhouse is also being built where people will be encouraged to grow vegetables.

The property is homely, warm, and clean. People say they feel comfortable and happy living there. Each person's private room is secure, spacious, and personalised to reflect the occupant's taste and interests, with ornaments, soft furnishings, photos, and items of furniture. There are different communal areas to ensure people have an environment where they can relax according to their individual needs.

People are safe from unauthorised visitors entering the building, as all visitors must ring the front doorbell before gaining entry and sign the visitors book on entry and departure. Hand sanitiser and PPE is available to all staff and visitors throughout the home. People's personal information, together with employee personnel records, are stored safely, so are only available to authorised members of the staff team.

Clear infection control procedures are in place and care workers use all necessary PPE when providing personal care. Fire exits are free of obstructions and maintenance records show weekly fire alarm tests are conducted. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002.

Leadership and Management

The provider has a clear vision of the support it provides, and a positive regard to each person receiving support and the staff team. There is excellent management oversight of the service. The RI is in regular contact with the service and regularly audits monitor all aspects of people's care to a high standard, including medication, infection control measures and record keeping, and any issues are resolved in a timely manner. People, staff and their relatives may complete surveys that ask for their opinions on the quality of support they receive. Each person has a copy of the complaints policy and the management team encourage people to raise any concerns. They operate an open-door policy which staff confirmed saying "X's [manager] door is always open, and I can go to any of the management team, I feel happy and confident to" and "One thing I love about this place is we are all on one level, the management are so approachable and part of the team it is like family". People say they know how to make a complaint if they need to and are confident the provider would listen to them and take any actions needed if they did.

Care workers undertake all mandatory training and specific training relevant to the people they support, and staff meetings give care workers the opportunity to discuss their work and to keep up to date with developments in the service. Care workers have an excellent understanding of their roles and responsibilities.

The RI has very good oversight of the service, their quarterly reports focus on the safety and well-being of people. We saw reports that show the RI is inclusive and seeks the views of people and staff, and proactive action is taken as a result. The RI identifies and includes all actions needed to improve people's well-being into a six-monthly quality of care report.

Staff have access to policies and procedures that are mainly kept up to date and are in line with legislation and current guidance. Policies are developed centrally, and this means that there are some Wales specific legislation, procedures and guidelines that are missing, for example the safeguarding policy is detailed and clear, but it has no reference to the All-Wales Safeguarding Procedure. This information needs to be included into the policy. This has been discussed with the RI and manager who have asked for the policies to be updated so they are area specific. The manager and RI have also raised that the policy review dates are not always filled out, we also discussed this with the RI and manager who will be raising this with the policy team.

Three-monthly employee supervision records show all care workers can discuss any issues they wish to raise, in a formal setting and have the conversations recorded. Care workers spoken to told us the manager and RI are brilliant, they are approachable and very supportive, and they feel confident to undertake their role. Staff told us "*The management here is Fantastic, the door is always open, we are a team, the manager works alongside us on the floor leading by example and wouldn't ask staff to do anything that they wouldn't do themselves*", and "It's not like other places where you feel seniors and managers are above you, we are all equal and a team, we are a strong unit that support each other".

Care workers spoken with demonstrate a good understanding of the safeguarding policy and procedure and stated they feel confident reporting any concerns they have.

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	
N/A	No non-compliance of this type was identified at this inspection	N/A	

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