



Inspection Report on

Allt Y Mynydd

**Alltymynydd Nursing Home
Llanybydder
SA40 9RF**

Date Inspection Completed

15/10/2021

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About Allt Y Mynydd

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Ashberry Healthcare Limited
Registered places	44
Language of the service	Both
Previous Care Inspectorate Wales inspection	09/01/2020
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.'

Summary

People receive a good service through a knowledgeable manager and a dedicated staff team. There is currently no Responsible Individual (RI) in post but CIW have received assurances from the provider of the continued oversight of the service during this time.

People's individual health and wellbeing are important to those providing the care and support. People living in the service and their relatives have corroborated this. Work is required to ensure the individual needs of people are accurately documented and people and / or their representatives are involved in the assessment and review of their care.

The environment is safe and appropriate infection, prevention and control measures are in place in line with Public Health Wales guidance. Refurbishment to the exterior of the main entrance is in progress.

Well-being

People have their choices and views are recognised. People are supported to take part in one to one and group activities of their choice. There are regular social activities that we observed during the inspection visit.

Overall care records reflect the needs and preferences of the people. However, more details are required about any specific support individuals need and how they and /or their representative are involved in the care planning and review process. The previous RI sought the views of people living and staff working in the service during actual and virtual visits. People have access to information about how to raise a concern if they need to, one person told us *“I would speak to the manager or one of the staff if I had a concern”* and a relative told us *“I have not had cause to complain, however, I think if I did I would be listened to”*. People can personalise their bedrooms with items important to them such as furniture, ornaments, photographs, posters and bedding. People are offered choices of meals and refreshments with alternative options readily available.

People are protected from the risk of harm and abuse. Care workers spoke caringly about the people living in the home and have a good understanding of the person, their needs and how to meet these. Care workers interact with and support people in a caring and thoughtful manner. Appropriate infection control measures are in place and staff are clear about their role and responsibilities around infection, prevention and control. The service is clean with no malodours, and there is an ongoing programme of maintenance and improvements. Recruitment measures ensure staff working at the home have the right skills and approach to care. The home liaises with health and social care professionals to ensure people remain as healthy as possible.

Care and Support

Care and support is provided by a staff team who have a good understanding of people's needs and how to provide appropriate care and support. All staff spoke enthusiastically about caring for people and working in the service. There are sufficient staffing levels in place to meet the needs of people and to allow time for meaningful interactions.

Staff support people in a caring and professional manner. People told us they are well cared for and staff are kind and helpful. Comments include; *"the carers are wonderful, they are like my second family"* and *"they are all lovely, so kind"*. Relatives also spoke positively about the care their love one receives including; *"I know mam is getting good care, the carers are so good to her"* and *"the carers and nurses are great!"*

The kitchen has a five star food hygiene rating. There are varied menus offering daily choices. People told us that there are menu choices available and they can always ask for alternative meals to those on the main menu if they want. Meal times appear to be a very positive and enjoyable social event where people are encouraged and supported to eat their meals.

Care staff use electronic care records, which provide information about the care and support people require to remain healthy. Care plans provide details of the needs of people; however, additional person centred information is required to give care workers a better sense of the individual and their specific care and support needs. In addition, more work is required to demonstrate how individuals and /or their representatives are involved in the assessment and review of their care, particularly during the Pandemic.

Health and social care professionals are involved with people and this is documented in their care records. There are appropriate measures in place for the safe storage, administration and recording of medication. Care staff have a good understanding of safe medication practices and a good knowledge of the use of specific medications to support people living with Dementia.

The service promotes hygienic practices to reduce the risk of infection. On arrival, we were requested to show a valid Lateral Flow Test (LFT), we provided our contact details and had our temperature taken and recorded. Staff wear appropriate PPE and adhere to the current Public Health Wales (PHW) Guidance. The manager has worked with Environmental Health and the Local Health Board to ensure the service is meeting its obligations around infection, prevention and control measures. Policies and procedures are in place to support good practice, care staff are clear on these and their responsibilities around protecting people from infection.

Environment

Arrangements are in place to minimise risk to people's health and safety. Testing and servicing of fire-fighting and moving & handling equipment are undertaken within the required timescales. Personal Evacuation Plans are individualised and readily available in emergencies. Emergency alarms are accessible and when activated are responded to in a timely manner. Infection, prevention and control measures are in place because of the pandemic with sanitation and PPE stations located throughout the home. COVID-19 testing procedures are in place for all visitors, who come to meet their relatives at the home. Substances hazardous to health are stored safely and communal areas are uncluttered and free from hazards. The service is clean and free from malodours.

The environment supports people to achieve their personal outcomes. The layout of the service enables people to use the facilities available to them safely. Décor is designed to stimulate and assist orientation. Internal redecoration and refurbishment has been and continues to be undertaken. People's bedrooms are personalised with items of furniture, ornaments, photographs and prints. People are able to personalise their bedrooms with photographs, pictures and items that are important to them.

A café is located in the grounds of the service and work is underway to improve the main entrance for the use and enjoyment of people and their visitors.

Leadership and Management

There are governance arrangements in place. The previous RI has undertaken Regulation 73 visits both virtually and physically at the service during the Pandemic. He has also provided CIW with copies of reports that identify people and staff are spoken with as part of his visits to the service. The RI has held “You said ...We did” meetings with staff to obtain their views and to feedback actions taken by the organisation. Staff and people living in the service confirmed this with us. There are a range of monitoring tools and audits undertaken by the manager. Actions required from these audits are acted upon and reviewed regularly.

Staff told us they feel well supported and appreciated by the manager. “*The manager is excellent, she is very approachable*”. Staff feel confident if they have a concern they can speak to the manager or a member of the senior team; “I know I can speak to (manager) or one of the nurses if I have any queries”. Staff also told us the manager has bought them gifts during the COVID-19 Pandemic to thank them for all their hard work. Staff follow appropriate infection, prevention and control measures and are able to explain to us their responsibilities in reducing the spread of COVID-19.

Staff records show they receive a comprehensive induction, receive regular supervision and an annual appraisal. Staff attend a range of mandatory and specific training and the service’s training matrix corroborated this. Care staff told us about the training they have attended and were able to demonstrate a good understanding of their role in the protection of individuals and safe moving and handling procedures. There are up to date and regularly reviewed policies and procedures in place to support staff. Staff recruitment records hold all the required information and checks.

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	N/A

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