



Inspection Report on

Llys Cadfan

**Llys Cadfan
Brynhyfryd Road
Tywyn
LL36 9HG**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

27 October 2021

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About Llys Cadfan

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gwynedd Council Adults and Children's Services
Registered places	33
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes

Summary

Llys Cadfan is situated in the coastal town of Tywyn. The providers are Gwynedd Council. The responsible individual (RI) is Mr Aled Davies and there is a suitably qualified manager in post who is registered with Social Care Wales.

People are happy with the care and support they receive from Llys Cadfan. They told us care workers are kind and friendly. Relatives are satisfied with the way care and support is provided by staff and the way the home is managed. People are supported by staff to engage in activities, hobbies and interests. Personal plans provide good detail about how to meet people's needs. Risk assessments are in place to safeguard both people and staff. The premises are located within their own grounds and in close proximity to local facilities.

Staff feel supported by the manager and deputy manager. Staff follow a recruitment process including all the necessary checks and receive the necessary training to be skilled in their roles. Staff development in relation to supervision and appraisals is in place.

The home is clean and tidy with good practice infection prevention and control measures in place.

Well-being

People told us they feel they are treated with dignity and respect. They said staff respond to their needs and preferences. People are relaxed in the company of care workers who communicate in a friendly and caring way, interacting on a one to one basis. Discussions with staff show they know the needs of people they support. People have opportunities to receive support from Welsh speaking staff. Staff communicate effectively with people whilst following current guidelines relating to use of personal protective equipment (PPE).

People are able to do the things that are important to them. People told us they are able to continue with their daily activities and preferred choices on how to spend their days. There was evidence in photographs seen of people enjoying the facilities and activities available. People have kept in touch with their families and friends by telephone or social media. Visits to the home are arranged dependent on Public Health Wales (PHW) guidelines. People said they would speak to staff if they had any issues, and they would be listened to.

People are provided with person centred care. They are occupied and provided with opportunities for stimulation. Relatives tell us there is good communication with the manager and staff, and commended the staff team for sharing information as required. People and their relatives are involved in decision making before and after people move into the home. Staff strive to obtain as much information as possible to maintain positive outcomes for people living in the home. The collecting of this information is an ongoing process with care documentation reviewed on a weekly basis or sooner as required. Relatives have regular contact with the home and are involved in reviews.

People are protected from abuse and neglect. There are measures in place to safeguard people from the risk of harm. Individual risk assessments are included in personal plans and are reviewed as required. Care staff told us they know what steps to take if they are concerned about a person/people. We viewed staff training records, which show care workers receive training to ensure people's safety; these include training in safeguarding, moving and handling and medication.

People are supported by care workers to be as healthy as they can be. We observed staff support people, and people we spoke with told us they feel the care they receive is good. Menus on display show a choice for each meal served. Observation during the lunch period confirmed this. People told us they enjoy the food. People are appropriately referred to health care professionals and the district nurses have maintained visits as required during the pandemic.

The environment meets the needs of people accommodated. The environment is well organised and people have a variety of areas, within the service, where they choose to spend their time. The specialist unit is spacious and has a safe outside area for people to walk freely without risk of harm.

Care and Support

People and their relatives are involved with developing personal plans and include personal outcomes in relation to people's health and well-being. Personal plans and risk assessments reflect how people would like to be supported. Personal plans are reviewed three monthly as required. Relatives told us they are involved in the review process and are kept informed of any health or social concerns regarding their relative. Health professionals also told us they are part of the review process. The information in personal plans and care documentation is repetitive in sections. The "My Life, My Care" document states it is to be completed 48 hours after admission. One seen was dated 18 September 2021 but the person was admitted to the home on 29 January 2019. Documentation should be signed and dated on the day completed.

Relatives are satisfied with the way aspects of care and support is provided and how the home is managed. We heard about the support provided by trained care workers who have time to support people with their personal needs, wellbeing and health needs. Meal times are organised with kitchen staff serving meals. Mid-morning snacks have been introduced, ensuring people who are late getting up or missed their breakfast had refreshments and something to eat prior to lunch being served.

Regular, appropriate activities and opportunities for people to pursue interests or hobbies are provided. We saw weekly activity programmes on display, staff encouraging people to participate in individual activities and where people preferred to sit and read or watch the television this is respected by staff. Staff interact with people in a meaningful way and are aware of individual's preferences in relation to recreation. Records are maintained of activities and the home has photographs of activities and a social media page for sharing information about the various activities arranged.

There are processes in place to safeguard people. Individual risk assessments are in place and staff are aware of the importance of making the relevant referral to the local authority if they have any concerns about the people they work with. Care workers told us they are aware of the safeguarding procedures and staff receive up to date safeguarding training.

The service promotes hygienic practices and manages risk of infection. Since the coronavirus pandemic, they have introduced additional information to staff on extra precautions required. Safe practices are maintained and the appropriate PPE is provided for staff to safely give care to people. Care workers confirmed they have access to sufficient PPE and people receiving a service said they felt safe with the current practices in place. Visiting to the home continues following current Public Health Wales (PHW) guidelines and the homes visiting policy, which has been reviewed during the pandemic.

Environment

The environment is safe, homely and warm. Bedrooms and communal areas are decorated and furnished to a good standard and people are surrounded by their personal items and belongings. There are aids and adaptations to support people to access all areas. A locked door policy is in place and care workers checked our COVID status and identity before entering. Visitors to the home are requested to follow current guidance in relation to infection control. The home has a specialist unit to provide care and support for people living with dementia.

People can be confident there are effective infection control arrangements in place. There is an infection control policy for all staff to follow and the majority of staff have received infection control training. There are cleaning regimes in place to minimise cross contamination to help prevent and control infection. There are PPE designated areas around the home for people and staff to access PPE.

Leadership and Management

There are arrangements in place to maintain oversight of the service. Processes are in place to monitor the quality of the service. The RI has supported the service and management through the recent pandemic; this has been done through telephone calls and virtual meetings. The regulations require the RI to speak with people and staff at least every three months. This has not taken place on a three monthly basis during the pandemic. The Local Authority area manager supports the manager and staff team by conducting regular visits and telephone/virtual meetings. We have advised Gwynedd Council that improvements are needed in relation to regulatory visits (Regulation 73) in order to fully meet the legal requirements. While no immediate action is required, this is an area for improvement and we expect the provider to take action and it will be followed up at the next inspection.

People are supported by a service that has sufficient numbers of staff who are suitably fit and have the knowledge, competency and skills to meet their needs. Staff said they are supported by the manager and deputy, and are part of a staff development programme including training, supervision and annual appraisals.

We saw records show required checks are carried out prior to commencing employment. The providers have a selection and vetting process in place, including obtaining references. Limited face-to-face training has taken place since the pandemic due to government restrictions. Staff are provided with alternative learning opportunities, including mandatory and specific training. Training includes first aid, moving and handling, safeguarding and dementia care. Staff rotas show there is sufficient staff on duty to meet the needs of people living in the home. Care workers are allocated to work within all areas of the home and those working on the specialist dementia unit have received specialist training.

The service has a statement of purpose, which clearly describes who the service is for and how it will be delivered. People are given information that describes the service and how to make a complaint. The statement of purpose does not meet current legislation about RISCA and the Social Services Well Being Act. The manager is reviewing the document to ensure it meets legislation.

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
73	There are arrangements in place to maintain oversight of the service. Processes are in place	New

	<p>to monitor the quality of the service and ongoing support is being provided by Local Authority officers to improve the service. The RI has supported the service and management through the recent pandemic; this has been done through telephone calls and virtual meetings. The regulations require the RI to speak with people and staff at least every three months. This has not taken place on a three monthly basis during the pandemic. The Local Authority area manager supports the manager and staff team by conducting regular visits and telephone/virtual meetings. While no immediate action is required, this is an area for improvement and we expect the provider to take action.</p>	
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