



Inspection Report on

Llys Cyncoed

**127 Cyncoed Road
Cardiff
CF23 6AF**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

09 and 10 August 2022

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About Llys Cyncoed

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Care UK Community Partnerships Ltd & WELL Cardiff Opco Limited
Registered places	99
Language of the service	English and Welsh
Previous Care Inspectorate Wales inspection	This is the first inspection since the service registered under The Regulations and Inspections of Social Care (Wales) Act 2016
Does this service provide the Welsh Language active offer?	This 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 Welsh language and culture.

Summary

Llys Cyncoed offers a welcoming, supportive atmosphere and people enjoy living there. Documentation is in place to know how best to support people and demonstrates that all care is safely provided as required. Individual preferences are catered for. Care workers are respectful and kind, and good working relationships are developed. People can choose where to be and how much organised activity they wish to be involved in. People are observed to be relaxed and tell us "*If you live in a care home, there's nowhere better you can be!*" People particularly like the home cooked food.

The home is purpose built with sufficient space and equipment to meet people's needs. The provider has improved the presentation of the décor throughout the home and has stated that further financial investment is available to refurbish areas that need this. Access to the rear garden is problematic for some people but the service provider is considering how this can be overcome, in addition to one balcony area on the first floor. There are very good systems in place to monitor, service and maintain all aspects of the environment and equipment.

Arrangements are in place to ensure the smooth operation of the service. The responsible individual (RI) oversees the quality of care and safety of people. A dedicated manager supports the team of experienced, suitably trained staff to provide and continually monitor care provision.

Well-being

People have information to help them make decisions and feel listened to. Pre-admission assessments are carried out to ensure people can express their support needs, and how they would like this support. Care plans outline the agreed support required. People have information about the service in documents that are provided in English or Welsh. Activity plans and daily menus are available to help people make choices, but we observed consultation with people to individualise these activities and food provision. People are mostly confident that they can raise issues through the staff, meetings, and care plan reviews, and these will be listened to. The service has systems in place to gauge the view of people and stakeholders about the quality of service, and responds to suggestions made. Advocacy services are used to help people make decisions if a person or their family representative finds this difficult.

Measures are in place to keep people safe and protected from harm. The environment is well maintained and spacious. Equipment is in good working order, is regularly serviced and tested, and is suitable for people's needs. The provider has identified areas of improvement for the environment and has a plan in place to renew and replace items, but this is not impacting on people's safety. All staff have background checks to ensure they are fit to work with vulnerable adults, they also have appropriate training and supervision. Managers monitor the quality of care provision and regularly audit documents and systems, such as medication, so that risks can be addressed. The service is proactive in involving health professionals to support people with care provision outside of the service's competency. Staff have robust training and they tell us they feel confident in their role and have the skills to provide the levels of care and support required. They are also aware of how to raise a safeguarding issue if they feel a person is at risk of harm. People who lack capacity have suitable representation.

People are able to do things that matter to them and they feel valued. Organised activities and encouragement from care workers provide opportunities for people to be involved in things they find interesting such as singing or trips into the community. Some people would like better access to the garden and the provider is considering how this can be arranged. People choose where to be in the home and get the assistance they need to move around the building. People and the choices they make are respected by all staff. Warm interactions from care workers, and appropriate, gentle hugs and touches reinforce to people in the service that they are valued. The 'little things' such as a 'Welcome' sign on a door of a new resident, or the manager immediately taking action to help a person stay cool in their room during a hot day by changing the curtains, demonstrate people are valued. More formal feedback on the service is gathered in various ways and the provider takes action to address any issues or suggestions.

Care and Support

People are consulted about their care and support needs. Personal plans contain assessment documents that are completed with the individual or their representative. Two people we spoke with confirmed that a care manager visited them in their own home to discuss their needs; though they were unable to visit the service to view it themselves before admission, a family member was able to do this. The information captured during the home visit informs the writing of the care plan, which is agreed with all parties. Risks to people are assessed, and where individuals wish, documents show that they can take calculated risks, for example, choosing to wear jewellery though their skin may be fragile and at risk of tearing easily. People are offered the option to discuss their end of life wishes. Records of regular reviews of personal plans were seen, with evidence that the person or their representatives is consulted.

Mechanisms are in place to safeguard people. The personal plans are clear and generate tasks on an electronic system prompting care workers so that there are no omissions of care. We saw that people consistently receive the care they require, including help to reposition when this is important to keep skin healthy. We also saw that people at risk of weight loss have increased support and monitoring to help maintain a healthy weight. We saw that people had appropriate referrals when care needs changed, such as assessing a person's ability to swallow; and the guidance given by health professionals is then followed by the workforce. Medication administration processes are safe and people have regular medication reviews with their relevant health professional. Medication storage is secure and kept at appropriate temperatures so that the effectiveness of medication is not compromised. People have access to health services, though some choose to pay for private health care such as chiropody. When people have a change in their needs, or there is an incident such as a fall, personal plans are changed accordingly to ensure the right support and equipment is in place. People who lack capacity have relevant representation, sometimes from an independent advocate as part of referrals when a 'Deprivation of Liberty Authorisation' is required.

People are happy with the quality of care they receive. People told us that they appreciate the kindness the staff show, but also the fun that they bring to daily life. We saw caring, warm interactions between staff and people, which had a positive impact on the mood of the person, and people were always offered choice. People mostly experience a positive dining experience and tell us they like the food. We saw the head of catering consulting with one person to discuss their preferences so that the choices of meal could be adapted to better meet their taste. The menu is nutritionally balanced and we saw alternatives to the menu options provided, with people enjoying home cooked food. A wide variety of activities are offered and we saw people taking part if they wished. One group of people had enjoyed

a trip in the minibus to Penarth, and others looked forward to the to sing-a-long planned for the afternoon.

Environment

There are well-organised systems in place to monitor the environment. Equipment is monitored for wear and tear, meets required standards and is suitable for people's needs. The décor is of a high standard and promotes an atmosphere of relaxation. Welsh signage is available throughout the home. The provider has identified areas for improvement, such as replacement of the kitchen flooring. People told us that shower trays in their bathrooms are not draining well, and we saw evidence that the management are exploring the reasons for this. Lifts support people to move between floors and are in working order. People enjoy the terraced balconies, but one on the first floor is only available under supervision as the provider is aware that the balcony rail height could pose a risk, especially to people who may not be able to understand risks around falls from height. The provider is planning to address this. The provider is also considering the grounds of the home and how to support better access to the garden. This would promote people's well-being as some people told us that they can't easily access the garden and would like to be able to do this.

People are happy with their bedrooms and have a choice of size of rooms. People we spoke with told us they liked that they could bring their own furniture when they moved in. We saw bedrooms personalised with items important to the person, and for people who have some memory loss, display boxes outside bedroom doors with items to indicate the history and interests of a person. These provide a point of orientation and discussion.

Infection prevention measures are in place to safeguard people. Staff wear appropriate protective equipment such as masks. Currently, to help prevent the spread of the Covid-19 infection, staff and visitors have to show evidence that they have a negative lateral flow test result before entry. Hygiene regimes are in place and we saw that the home was clean and free of bad odours. The home has a Level 5 certificate for Food hygiene.

The South Wales Fire Service has inspected the service and has identified improvements the provider needs to make around fire safety. The provider is prioritising these improvements and recognises the investment required.

Leadership and Management

The provider has a 'Statement of Purpose' (SOP) and 'Service User Guide' in place that tells people what to expect from the service. Both documents can be made available in Welsh. The service is provided in accordance with the SOP. Policies and procedures are in place and reflective of regulatory requirements in Wales. The responsible individual visits the service and speaks with people and staff to gain feedback of the service's performance. Information from various sources is also used with this feedback to drive improvements in the service. The provider of the service has committed to investing financially in the environment with décor refreshed and bathrooms about to be refurbished. They indicate that they will continue to invest, not just in the environment but in staff and service provision.

A well-respected, knowledgeable and organised manager oversees the day-to-day running of the service and demonstrates good leadership. They follow organisational systems that support continual quality reviews and improvement. We observed a meeting where the heads of department come together daily to share information; there is good communication so that all staff are aware of people's needs and any changes identified. The manager and heads of department foster a supportive atmosphere for all colleagues. The caring/ supportive ethos is apparent throughout the service. There are good communication systems to support families of people living at the home. We spoke with three family members who confirmed this.

There are sufficient, competent staff to support good outcomes for people. Care workers are safely recruited, with checks carried out to ensure they can work with vulnerable people. Care workers have appropriate induction training and further training to carry out their role. Staff have training in safeguarding of vulnerable adults so they are aware of indicators of abuse, and know how to report concerns. There is also a focus on training around 'First Aid' and 'Supporting people to eat' so that care workers have an awareness of how to prevent incidents such as choking, in addition to providing appropriate action if required. All staff receive supervision meetings with a line manager to review performance and support development. We are told that the service is on track to ensure all care workers are registered with Social Care Wales, the workforce regulator, by October this year. Care workers tell us the staff are a "good team" who work well together. The team help cover sickness and absence so that agency workers are rarely used, ensuring continuity of care for people in the home.

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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Date Published 13/10/2022