



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Inspection Report on

Ty Dewi Sant

**Myrtle Close
Penarth
CF64 3NQ**

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Description of the service

Ty Dewi Sant Care Home is situated in a residential area of Penarth. The home is registered with Care Inspectorate Wales (CIW) to provide accommodation and personal care for 33 people aged 60 years and above including 6 people who have dementia care needs and one person who has a learning disability.

The home is owned and run by the Vale of Glamorgan County Council and has an appointed responsible individual (RI) who has responsibility for the overall quality and performance of the service.

The registered manager is Mrs Dawn Ann Curtis who was not present during the inspection visits.

Summary of our findings

1. Overall assessment

Overall, we found that people living at Ty Dewi Sant and their families were extremely complimentary of the care they receive. Staff are caring and knowledgeable about residents needs. We found written care plans were detailed and person centred, however further improvements could be made. People are accommodated in an environment that is clean and homely. Rooms are decorated to individuals' choice. Residents have access to several areas and lounges within the home in which to spend time, either with others or in the quieter areas throughout the home.

2. Improvements

This is the first inspection carried out since the Vale of Glamorgan Council took over from the previous provider.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service and the areas where the home is not meeting legal requirement.

1. Well-being

Summary

People living at Ty Dewi Sant are extremely happy with the care provided and benefit from positive relationships with staff. The home offers an excellent range of activities including group activities and 1-1 activities for people who wish to remain in their own rooms. Staff are happy, caring and demonstrate a good knowledge of people's needs, likes and dislikes.

Our findings

People living at Ty Dewi Sant are satisfied with the quality of the service they receive. We observed people were able to choose where they wished to spend their time and had access to a relaxed and calm environment. We spoke to almost all residents living at the home who commented positively and appeared happy and content.

Comments included:

"There is always something to do, I am very lucky".

"Staff are always happy, what more can we want".

"Every day there is something going on here, look at us today".

"There are classes here weekly, quizzes, gardening and we can do what we like".

"I am always supported and encouraged".

"I love the staff here, they help me a lot".

Relative's comments included:

"Very happy with the care and staff here".

"Was a difficult decision but I am more than happy with the home".

We have received questionnaires completed by relatives that indicate people are happy with the service provided.

When we arrived at the first visit we observed several people having a late breakfast in the small individual dining areas. Residents we spoke with told us they can get up and go to bed when they wished. One resident told us they *"preferred to get dressed later in the morning after breakfast"*. Another resident told us; *"Staff are always helpful when I need assistance"*. This indicated that people's wishes are respected.

People are able to exercise choice and control over their everyday lives. We saw that staff considered people's likes and dislikes and offered choice throughout the day. For example; we observed both breakfast and lunch time meals being served, we saw staff ensured that people had their preference of food and drink and we saw individual choices being catered for. During the second visit we were told by residents that it was "fish and chip Friday", we were told it was a favourite day as "the drinks trolley" is brought into the dining area. We observed people choosing a drink of choice from the trolley and there was lots of laughter and banter during this time.

We spoke with the cook on duty who displayed good knowledge regarding individual residents preferred choices, likes/dislikes and any special diets required. The home has a rating of "4" from the Food Standards Agency (this means that the food hygiene standards were found to be good).

We carried out a SOFI2 observation in the dining area (SOFI2 is an inspection tool which enables us to observe daily life from the perspective of the resident). We found this to be an extremely positive experience and social time for residents.

Therefore we considered people enjoy meal times and benefit from varied, balanced and individual choice being offered.

People are able to take part in a range of activities. When we arrived at the first visit we overheard the laughter from the dining area where we saw residents, chatting and laughing around the table. We were told they were preparing compost ready for planting in the spring and we were shown the large tubs of compost which was being collected from used tea bags. The handyman told us "*this gets collected throughout the year and then used for the hanging baskets and tubs which are prepared in the weekly gardening class*". We observed lots of laughter, banter and conversation during this time.

During the afternoon we saw "*bingo*" and a "*quiz*" carried out and residents encouraged by staff to participate. Staff encouraged people to sit in the dining area and experience the activity taking place even if they preferred not to join in. Residents told us about the recent "*fish and chip evening*" that had taken place and staff were keen to show us the area which had been painted and decorated as a sea-side theme with buckets, spades, fish and deck chairs. We were told fish and chips had been purchased in newspaper and also original salt and vinegar bottles had been purchased. We were told residents had enjoyed the evenings "*at the seaside*". Staff told us music to the sounds of the sea had been played and the evening was "*great*" and enjoyed by residents.

This indicates that people are happy living in the home with things to look forward to and have established relationships with staff.

2. Care and Support

Summary

Overall, people's individual needs are understood by staff as written guidance outlines how they are to meet individual needs. Guidance is person centred and includes how individuals wish for their care to be carried out. People are protected and safe. Care documentation and daily records are reviewed when care needs change. Medication Administration Records (MARs) are completed correctly and medication administered in a timely manner.

Our findings

People receive appropriate, person centred care. We examined a sample of residents care documentation, including four care files, to determine how risk and care assessments were translated into residents care files and how the files contributed to the provision of care. We found overall the care files provided in-depth information on how to support the person. Care files are important documents which should advise staff of a residents needs and the actions that are required to meet those needs. The care files contained comprehensive assessments, updated monthly reviews and detailed care plans regarding individual's diagnosis, health and emotional needs.

However, we found in one persons file that the risk assessment and care plan in place regarding skin integrity was not robust enough to effectively instruct staff to reduce the amount of harm and to ensure that staff met their needs. We discussed this issue with the deputy manager at the time of the visit who assured us the matter would be dealt with immediately. A further file identified that a resident was documented as enjoying daily time out of the home; however the resident had not left the home unsupervised for 18 months due to a change in health needs. The deputy manager informed us the files would be amended immediately.

Our conversations and observations indicated that people's plans were a true reflection of the care and support being provided. This demonstrated that people's individual needs and preferences are understood and anticipated.

Staff interact well with people. We observed staff giving people the individual attention they needed in a relaxed and respectful way. We observed staff communicating in a way that people understood and taking time to ensure people were content and happy. We spoke with one resident who told us they were happy at the home and had no real problems apart from difficulty mobilising to the wash hand basin. We established due to a sight impairment the hand basin was not within easy reach for the resident. We alerted the deputy manager who, following discussion with the resident arranged for an appropriate chair to be delivered and placed in front of the wash hand basin. This tells us people are listened to and supported.

People can be assured that medication administration is carried out appropriately and safely. We examined the Medication Administration Records (MARs) and arrangement for ordering, administering and storing medication. We found this to be completed correctly with no 'gaps' in recording. We found daily fridge temperatures had been regulated.

Regular audits had been completed to ensure medication was administered and managed accurately. We were told a review of the medication gets carried out regularly and a formal audit carried out. Audits are required to highlight areas for improvement and what action is required. We found the medication room to be appropriately locked. Overall, we found there are robust medication systems in place.

3. Environment

Summary

Ty Dewi Sant offers its residents an environment which is comfortable, homely and clean. . The home has various sitting and lounge areas throughout. Bedrooms are personalised to individual taste with personal items of memorabilia including photographs, ornaments and items of furniture.

The home has a rating of '4' from the Food Standards Agency. (This means that the food hygiene standards were found to be good).

Our findings

Residents at Ty Dewi Sant are supported within a clean and safe environment, which easily allows people to spend time privately or with others. We carried out a visual inspection and found the home to be clean, tidy and fresh throughout with décor and furnishings of good standards. .

We spoke with the cook on duty and briefly viewed the kitchen and food stores which we found to be neat and well organised.

Each unit of the home has its own small preparation and dining areas where residents could access drinks and snacks throughout the day and we saw drinks and snacks encouraged by staff. There were larger lounge areas and a large dining area which residents used for activities throughout the visits. Relatives also sat in this area chatting. We saw photographs displayed of celebration birthdays and special events which had taken place at the home. One corridor had been decorated to the theme of music and we saw musical instruments, vintage memorabilia records and various items displayed. Staff were keen to discuss the decorated corridors with us and told us of the plans to extend the music theme along the corridor.

The home offered sufficient space for residents to use walking frames and aids therefore maximising their independence. We were shown the garden "shed" and staff told us of the plans for this to be turned into a shop in the warmer weather. Residents told us of the flower tubs and hanging baskets which are prepared and enjoyed every year by residents and staff.

Thus people's wellbeing is enhanced by having access to a clean, tidy and safe indoor and outdoor living environment which is nicely decorated and is a safe and pleasant place to live.

People are protected and their safety is maintained. We found the entrance to the home to be secure and we had to ring for entry. Staff asked us for identification on arrival and we were requested to sign the visitor's book. We found all confidential files to be stored securely. Medication was stored in a locked medication room and the medication trolley locked when a member of staff was not present. We examined the maintenance folder and found regular checks were carried out on all equipment used at the home. For example; all gas, electric and PAT testing certificates were present and dated. All fire extinguishers had been checked and hoists serviced.

During the visit we observed the maintenance person carrying out various checks within the home. For example; the call bell system within each individual rooms and water temperatures throughout the home. We observed laughter and banter between residents and the maintenance person during the visits and people told us of the support that was given to the gardening projects by the maintenance person throughout the year. Therefore, we found people's right to privacy is respected within a safe and secure environment.

4. Leadership and Management

Summary

Staff are positive about the support provided by the managers and we saw the home was well led. People using the service and their representatives are regularly consulted about their care experiences and the quality of service provided. Monitoring visits are conducted. All incidents are reported to the appropriate authority as is legally required.

Our findings

People are cared for by staff that are supported by their management team. We saw evidence that regular monitoring visits had been undertaken by the responsible individual under Regulation 27 of the Care Homes (Wales) 2002. The last recorded visit had been undertaken 2 November 2017, however this report did not include interviews with service users and persons working at the care home. We were provided with the latest Quality Assurance report dated March 2017. At the time of both visits the registered manager was not available. However, we were assisted by the deputy manager of the home who demonstrated a good level of understanding of the responsibilities to ensure regulatory compliance.

During the inspection, we examined the notifiable incidents and saw that CIW were notified of incidents as required under Regulation 38 of the Care Homes (Wales) 2002. Therefore people can be assured they are safeguarded.

Ty Dewi Sant offers continuity of care from a permanent team of care staff, many of whom told us they have worked at the home for several years, although we were told agency staff are also required and the home is in the process of recruitment. During both visits we saw there was sufficient staff available to assist people with their needs and during meal times. Staff we spoke with told us they enjoyed working at the home and comments included;

“We are a good team”.

“I love my job here and the residents”.

“We are lucky; we all enjoy and help each other”.

“I love looking for new activities for the residents to do around the home”.

People are therefore cared for by familiar staff that are knowledgeable about people's needs and wishes.

People receive care from staff that are appropriately appointed, trained and supervised. We examined two staff files and saw the service had a robust process for the recruitment of staff. The recruitment files are kept at the council offices and we had previously attended the offices to examine recruitment files and were told the files could be accessed through the computer system directly to the home. We contacted the council offices during the visit and requested the two recruitment files to test the effectiveness of the process. The files were sent immediately to the home through the computer link and contained all the required documentation for the recruitment of staff. We discussed with the deputy manager regarding arrangements for staff details to be retained at the home. Staff we spoke with told

us they received appropriate training for their role commenting, "*I receive support and training for my job*".

Staff also commented "*I can always approach the manager with any issues*".

Thus people benefit from a service where the well-being of staff is considered and where staff are well led and supported.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

This area is not applicable as this is the first inspection carried out post registration.

5.2 Recommendations for improvement

The following are recommended areas for improvement to promote positive outcomes for people:

- Revisit care and support documentation used within the home to ensure it contains all the required information to enable staff to meet people's needs.

6. How we undertook this inspection

We (CIW) carried out a full inspection on the 25 January 2018 and 26 January 2018 in accordance with Care Inspectorate Wales revised inspection framework. We considered all four themes: well being, care and support, leadership and management and environment. Our visits to the home were unannounced.

The following methods were used to provide evidence for this inspection report;

- Consideration of information held by CIW about the service which included records of notifiable events received by CIW.
- Observations of daily life, care practices and interactions between care staff and residents at the home.
- Conversations with kitchen staff, deputy manager and staff at the home.
- Conversations with almost all residents living at the home.
- Observations of the care home environment.
- Detailed examination of the care documentation, relating to four residents.
- Review of the communication book, accident/incident records.
- SOFI2 observation carried out in the dining area. (The Short Observational Framework for Inspectors 2 is a tool which enables us to observe daily life from the perspective of the resident).
- Copy of the Regulation 27 visits carried out.
- Detailed examination of two staff recruitment files.
- We examined the relative/staff questionnaire feedback.
- We examined the homes policy and procedures.
- We considered the arrangements to review the quality of care provided.
- We viewed the evacuation procedures.

Further information about what we do can be found on our website www.cssiw.org.uk

About the service

Type of care provided	Adult Care Home - Older
Registered Person	Vale of Glamorgan Council
Registered Manager(s)	Dawn Curtis
Registered maximum number of places	33
Date of previous CSSIW inspection	First visit carried out post registration
Dates of this Inspection visit(s)	25/01/2018 and 26/01/2018
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Not explored at this visit
Additional Information:	