



Inspection Report on

WAM Care Homes Ltd.

**TY MAIR CARE HOME
12 PEN Y GAER COTTAGES
LLANELLI
SA14 8AG**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

20/02/2020

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Description of the service

Ty Mair Care Home is located in Llanelli and is registered to provide nursing and personal care for up to 74 people over the age of 65 years, the home has a Dementia unit that has 16 residents (this is inclusive of the 74). On the day of the inspection there were 63 people living in the home.

WAM Care Homes Ltd. owns the service. The responsible person (RI) is Charlotte Charles there is a manager in place but is not registered with Social Care Wales

Summary of our findings

1. Overall assessment

People living in the home receive a high standard of care from a committed care staff team and home manager, who are continually working to improve the service they provide and the care and support that the individuals living in the home need.

The care staff have a good understanding of the needs of the people they care for, their likes' dislikes, personal history and what is important to them. Care staff are well trained and professional, respected by those living in the home and motivated to work as a team. There have been improvements made to the bathrooms that will benefit the people living in the home. We recommended that due to the home having a high number of people living with dementia, the provider should look at the decoration of the home to ensure it is dementia friendly i.e. lighting, decoration, and consistent signage.

2. Improvements

Most of the bathrooms have been improved in the home

- Walls have been decorated to add colour and a more homely feel
- Different baths have been fitted that suit people's needs i.e. height adjustable baths, seated bath hoists.
- New shower/wet room

3. Requirements and recommendations

Section five of this report sets out the action service providers need to take to ensure they meet their legal requirements and recommendations to improve the quality of the service provided to people in the care home.

1. Well-being

Our findings

People's views and choices are listened to. People we spoke with told us that they could speak to staff or the manager at any time to discuss concerns. We saw that people and/or their representative were involved in their care but this needs to be recorded in individuals care plans. The home is working towards an active offer of Welsh, we observed staff in the home communicating to individuals in the language of their choice, There were bilingual notices and information displayed in the home but some work was required to improve the signage. We also saw people's bedrooms were personalised according to their choice and a variety of meal options were readily available to them.

People are safe and protected from harm. Care workers knew how to recognise the signs of harm and had received safeguarding training to better equip them. The environment protected the safety of individuals. Checks were being carried out to ensure the equipment and facilities being used ensured the safety of those using them. The home is clean, free from malodours, warm and feels "homely". Facilities in some parts of the home should be improved to better support the needs of people living with dementia. In the main people live in a home which contributes to their well-being.

People are happy and cared for. We saw people positively interacting with each other and care workers supporting people in a caring and sensitive manner. Care workers had a good knowledge of the individuals they cared for. We saw that people had been supported to develop friendships and could participate in a range of activities and events.

1. Care and Support

Our findings

People are cared for and supported by competent staff that have a good understanding of their individual needs. We observed throughout the day people's choices, preferences and needs were recognised. Thought had been put into the effect of uniforms on people in the dementia unit; as a result staff do not wear them. This has resulted in a relaxed homely atmosphere. Only the senior/nurse who are in charge of medication wear a uniform.

People are supported by staff who understand them and their individual health and care needs. We observed the handover from night staff to the day staff; this was a very detailed handover and had clear information that related to the medical needs for individuals, which, after discussions with the senior care worker were reflected in the individual's care plan. A person told us; *"I am happy here, it's a lovely home and the "girls"(care workers) are very kind"*. The care workers we spoke with were able to provide us with details of the people they cared for, how they presented and some of their personal histories; this was corroborated when we read nursing and care records. The nursing and care records we read gave a good overview of the individual, giving specific information about the person including details of their personal histories and medical conditions. We identified that individuals or their representative's had not signed care plans, we discussed this with the manager who assured us that this would be addressed. Care plans were well written, give a good sense of the individual, their care needs and how these were to be met. We found that care plans reflected the care provided.

People told us that they choose when they want to get up and when they wish to retire, if they want to join in activities or entertainment and that there were always choices available at meal times. One person told us *"I had a lovely dinner, I enjoy my food"*, we also saw another person saying they didn't like the choice of soup, so care staff offered a different flavour soup that they got from the kitchen. We heard a person ask, *"What's for lunch"*, the care worker explained the two options and he said, *"I like the sound of that, I'll have the sausages"*. Other comments that people had made to us were *"I like my room, this is mine for a bit of peace and quiet"*, *"I like getting my hair done, it gives me a lift"*.

We saw that there were a range of meal options available and a rolling four weekly menu that corroborated this. We noted that people's individual dietary needs are catered for and cakes were made for people to celebrate their birthdays. During a lunch, we saw care staff supporting people to eat and drink in a caring manner giving individuals the time they needed, offering choice and having good knowledge of the individual that they are supporting. Examples of this include; during the lunchtime period one person told a care worker *"I'm not very hungry"* with support from the care worker we saw that the person ate all her lunch, at a pace that she wanted.

Care workers respond quickly to individual's needs, We observed care workers taking the time to assess what was wrong then raising this to a senior care worker who responded quickly then the nurse contacted the GP. Care staff demonstrated a good working knowledge of the people they care for, changes in the person's usual behaviour and the policies and procedures to follow.

We also looked at medication documentation, how medicines were stored and how they are administered. We found that the documentation was well maintained with no errors noted on the medication recording sheets (MAR), medicines were correctly stored and we observed a nurse safely administering medication. We also checked the controlled drugs demonstrated the number of medications documented in the controlled drug register, and these corresponded with those stored in the medication cabinet all entries in the register are signed by two care workers.

We therefore consider that people's health and care needs are being met.

People are treated with dignity and respect and have their individual identities, routines and preferences recognised and catered for. Throughout the time of the inspection, we saw care staff positively interacting and supporting people in a kind and caring manner. We also observed care staff in the dementia unit supporting a person to wash and dry cups and mugs. The interaction and communication was very positive. When finished the care worker said, *"as soon as there are more cups to wash, I'll let you know"* the person helping replied, *"thank you, I like to help"*. The care staff did then let the person know when there was more washing up to do, and again supported them to do it.

2. Environment

Our findings

People live in a safe and secure environment. On arrival and departure from the home we were required to sign the visitors' book, there were security keypad systems on doors and restrictors to the windows. A care worker checked our identification on arrival at the home.

Emergency pull cords were seen to be freely hanging and accessible in communal toilets, bathrooms and individual bedrooms.

Renovations and building work to improve the living space for the individuals, taking into account their personal needs and preferences has been planned. Attention has been given to updating and implementing bathing facilities that are safe and welcoming for people to use and meet their individual choices and assessed needs. There needs to be attention to the décor of areas of the home to make it dementia friendly and ensure the lighting suitable as areas around the home were very dimly lit.

There is an area planned to turn into a small resident and family's café; this is something that the activities coordinator has been doing and it has been going very well. This was also set up to help families of residents that had passed away to keep in contact with friends they had made and keep that connection, and also support other families that have a family member in the home who are possibly coming to the end of their life.

The bathrooms have been improved to be more user friendly; further improvements to the home to improve the communal living areas are planned with work starting in the very near future, this includes sectioning areas to suit individual needs and preferences and with some sound proofing to the doors. A new call alarm system is being implemented to help reduce the high level of noise at peak times and to make it feel more like the individuals home.

We carried out visual a check of moving and handling equipment, which demonstrated they are serviced within the required timescales, were clean, and in working order. The Moving and handling slings checked did not show any fraying or damage to the fabric. Emergency pull cords were freely hanging and accessible in communal toilets, bathrooms and individual bedrooms. The current call alarm system is being updated and a new system put in, the care staff will have pagers that vibrate to reduce noise in the home and make it feel more homely for the people living there.

We also noted that fire-fighting equipment throughout the home is serviced within the required timescales. Examination of care workers training records demonstrated that they had attended fire and moving and handling training. During discussions with care workers they were able to tell us about safe moving and handling practices and what equipment individuals needed they were assisting, this was also reflected in the individuals care plans. We also observed care workers safely moving people during the period of the inspection. Staff spoken to explained the actions they would take in the event of a fire in the home.

For safe and accurate fire evacuations and drills, the home must ensure that all staff and visitors have signed in and out of the building.

The home also has a maintenance person who completes various checks and maintenance around the home. All maintenance files were up to date and in order on day of inspection.

We can conclude that for the most part people are living in a pleasant, clean environment that reflects their individual choices and needs.

3. Leadership and Management

Our findings

The manager had a positive and proactive approach to staff support, training and the quality of the care provided although they need to register with Social care wales.

People can be assured that staff members who support them have been through a robust recruitment process. We examined four staff personnel files that demonstrated clearances and information had been conducted and were held on the files. Some information was not available in some of the files seen and stored separately, a consistent filing process was discussed with the manager.

Training records examined demonstrated that care workers received a range of mandatory and specific training including;

- moving and handling
- fire training
- first aid
- food hygiene
- safeguarding
- health & safety
- infection control
- dementia

We spoke to six care workers who confirmed that they had received a good induction and had attended a number of training events. One care worker told us; *"I love it, best decision I have made to be honest"* Other comments made by care staff to us *"I love it here" "It's so rewarding, its great" "we are a great team, there is continuity in the carers which is so important for the residents"*. All staff spoken to had a clear understanding of their responsibilities in protecting and reporting any concerns. Both staff and family members have expressed that they feel able to speak to the manager about anything

We read the minutes from the last staff and relatives meetings. These had clear documentation of what was to be discuss and had the details of all the upcoming decoration/renovation works that are happening and the reasons for this. There was a quote in the relatives meeting minutes that read *"Ty Mair was moving in the right direction and seemed a happier place the last few weeks"* also expressed that the manager has the *"on the job experience that the home has been missing"*. People benefit from a service where staff are valued and supported in their roles. The staff we spoke with told us that they enjoyed working in the home and spoke positively about the management of the service.

The supervision records for the four care staff were checked and we saw that supervision meetings were being held within the required timescales, staff are supervised two monthly and have yearly appraisals, we were shown a clear plan in the manager's office of when each staff member's supervisions are planned for the coming year.

People can see a visible management presence and oversight of the service. The manager spoke positively about working in the home and felt well supported by the Responsible Individual (RI) who visited the home regularly for any advice or guidance. People and their relatives told us that they felt able to raise concerns with the staff, manager and RI. We were provided with a copy of the six-month RI report which provided good details including; changes in management, upgrading and refurbishments of the home, activities, staffing, fire inspection, and training.

The Statement of Purpose reflected the service being provided in the home and was readily available.

Whilst we recognise the improvements that have been achieved in the service, to ensure that this continues, the manager to achieve the required qualification and registers with Social Care Wales

4. Improvements required and recommended following this inspection

4.1 Areas of non-compliance from previous inspections

None

4.2 Recommendations for improvement

- To ensure that care plans reflect the current needs and requirements of individuals – up date when changes in short term health/injury that is monitored.
- The lighting around the home needs improving as it dips in brightness and can be very dull in places; this could make navigating around the home for individuals with dementia or visual impairments difficult and a potential hazard. The lighting needs to be consistent around the home.
- Ensure all visitors and staff including RI sign in and out of building, to ensure that health and safety relating to fire safety is followed.
- The manager to obtain the QCF level 5 as soon as possible, and register with SCW.
- Ensure that the training matrix is up to date and reflects the staffs training record.

5. How we undertook this inspection

This was a full inspection undertaken as part of our inspection programme. We made an unannounced visit to the home on 20 February 2020.

The following methodologies were used:

- We talked with six people living in the home.
- We talked with relatives.
- We observed interactions between staff and people living in the home.
- We read five care records.
- We read the minutes from residents and family meetings.
- We talked to six members of staff.
- We talked to the manager.
- We talked to members of the catering team.
- We read four staff files and supervision records.
- We read the staff training matrix.
- We looked at the administration, documentation and recording of medication including controlled drugs.
- We read the services statement of purpose and service user guide.
- We read the annual quality assurance report.
- We read the services complaints procedure.
- We had a tour of the home.

Further information about what we do can be found on our website:
www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	WAM Care Homes Ltd
Manager	Rachel Jones - not registered with SCW
Registered maximum number of places	74
Date of previous Care Inspectorate Wales inspection	19 July 2018
Dates of this Inspection visit(s)	20/02/2020
Operating Language of the service	Both
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service
Additional Information:	

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