



## Inspection Report on

**Ty Clyd**

**Heol Fargoed  
Bargoed  
CF81 8PP**

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## **Description of the service**

Ty Clyd Care Home is situated on the outskirts of Bargoed and overlooks the Rhymney Valley. The home is registered to provide accommodation and personal care for up to 30 people. An assessment unit with seven beds is part of the home and aims to enable people to regain daily living skills. The home also can provide respite care for one person. On the day of our visit there were 27 people in residence; four of whom were accommodated in the assessment unit and one person staying for a period of respite care. Ty Clyd Care Home is operated by Caerphilly County Borough Council who have nominated a responsible individual, as well as appointed a manager who is registered with Social Care Wales and who was present throughout the inspection visit.

## **Summary of our findings**

### **Overall assessment**

Based on what we saw on our visit, the home provides high quality care and person-centred support. People are assisted to keep as active and healthy as they can be; their individual and changing needs are anticipated and met by a well-trained and knowledgeable staff team. Staff interactions with residents are positive and the residents are treated with warmth and respect. People benefit from a homely, safe and clean environment. Daily routines are planned around the needs and choices of the residents and they are encouraged to be as independent as possible and to express themselves. The home integrates social activities seamlessly into the day and offers a good variety of group and individual events. New bathrooms have been installed and other areas are scheduled to be upgraded, and we were told that a conservatory and a cinema themed room planned. The staff team is committed, stable and well trained. They are sustained by a well-established, effective and hands-on management team. Ty Clyd is also well integrated in the local community.

### **Improvements**

This was the first inspection for the service since re-registration under new legislation.

### **Requirements and recommendations**

Section five sets out areas in which the home is not currently meeting legal requirements and our recommendations to improve the service, if any. Please refer to section five below for further details.

## Well-being

### Summary

We heard from residents that they like living in Ty Clyd Care Home; they are settled and have positive relationships with the staff that look after them. They are treated appropriately and kindly, and staff know their needs and preferences. Friends and families are encouraged to visit and to join in, which enhances the home's warm and welcoming atmosphere. Residents and visitors praise the care and support delivered at Ty Clyd.

### Our findings

What we were told:

*"The girls (staff) are very kind and they ask me what I want"* (resident)

*"It feels like home here, only I don't have to cook myself"* (resident)

*"This is a great place for my mum, they let her do a lot for herself and make sure she is safe"* (relative)

People's well-being is promoted through good relationships with staff and a caring setting. Our observations of staff interactions with residents showed good practices and they were conveyed in a manner ensuring dignity and respect to people's preferences. We noted that staff were familiar with people's individual likings and needs, and mindful of their safety and well-being. We observed that a care worker prompted a resident to use her walking aid when getting up from her chair in a kind and discreet manner. We also spoke with a relative who said that she is impressed how well staff knew her loved one's preferences, not only for food but also for her clothing and toiletry choices. There was a general focus on promoting independence and supporting the residents to be as independent as possible and to express themselves, and we could see that people responded with a smile and enjoyed the interaction. This demonstrates that people have positive relationships and feel like they belong.

People have choices in the activities they pursue, are supported to follow their interests and experience a sense of achievement. We saw that residents were offered opportunities to participate in various indoor activities. During our visit, we witnessed singing, people doing jigsaws and engaging in a pampering session. The home's pets, a budgie and fish in an indoor tank, were popular with residents and visitors alike. The home has no specially appointed activity co-ordinators because engagement is encouraged by all staff. We found staff were keen and knowledgeable about what stimulated and occupied residents and they undertook and enabled a variety of pastimes with them. We saw a care worker helping a resident with his crossword and introducing him to using the internet to look up clues. We noted that family and friends were actively encouraged to participate. We saw products of previous activities on display, in the common areas as well in people's rooms. We found that people can engage in activities that are meaningful and important to them.

People are supported to stay independent and have some control over their everyday lives. We saw that the home makes a distinctive effort to support the residents in maintaining or regaining their individuality and independence, and to encourage their family and friends to be part of this. We saw examples of this in several areas, for instance in the way activities are integrated seamlessly throughout the day or when a care worker passed clean washing to a resident so she could put it into her wardrobe herself. We conclude that people's opinions and choices are recognised thus encouraging a sense of belonging, continued independence and value.

People can feel safe and protected from harm or neglect. Staff we spoke with were clear about their responsibilities around protecting the people they looked after. They were clear about the action they would take if they had any concerns about a person's well-being. Policies relating to keeping people safe, including the safeguarding policy, were available in the service. Discussions with the manager confirmed her understanding of the process to follow. We saw risk assessments in people's care files which were reviewed regularly to ensure that any risk to a person was minimised. We also saw that a book to record all visitors to the home was being used, which further promoted the safety of people living at the home as well as their visitors. We saw that staff and people's records were stored in lockable cupboards. People living and working in the home can be confident that their personal information was properly protected. This shows that people are safe and as far as possible protected from harm.

People are able to receive their care in Welsh if they choose so. We were told that there were currently no Welsh speakers in residence, but that Ty Clyd is committed to meeting Welsh language needs of its residents if required and that it supports the Welsh Government's 'Active Offer'. There are four staff members who are fluent in Welsh and could provide Welsh only care for residents. We heard staff answering the phone and greeting the caller in Welsh. We therefore conclude that people are supported to communicate in the language of their choice.

## Care and Support

### Summary

Residents receive the right care and their specific needs and preferences are understood and addressed by compassionate and competent staff. Care documentation is regularly reviewed and person centred and therefore enables enhanced care outcomes. There is an on-going commitment to provide continuity and consistency, as well as to promote choice and independence.

### Our findings

We were told:

*"They know here what my friend is like and let her do her stuff"* (friend of resident)

*"I always can get up and go to bed when I want"* (resident)

*"My grandchildren like to come and visit me and we watch the fish and the budgie like we used to at home"* (resident)

People are assisted in their changing needs and are supported to be as healthy as they can; their care files are important documents which inform staff of people's needs and preferences. We noted that staff have sound working practices and a good knowledge of people's needs. They delivered care in a timely, warm and well organised manner. Staff and management worked successfully on improving their record keeping, reviewing assessments and keeping individual care plans so they are more reflective, person centred and detailed. People's daily records reflected the care and nursing interventions and gave good information with regards to activities, social contacts, mood and other relevant events. Charts for weight, assessments, wound monitoring etc. were kept in a clear and timely manner in the resident's files we studied. Care plans were easy to use and only contained the pertinent and up-to-date information. It is evident that people receive the care which best reflects their needs and preferences.

People are as healthy as they can be because they receive proactive healthcare. We examined medication administration records and how controlled drugs and medicines were handled, accounted for and stored. We found that there were safe practices in place. We identified a few minor areas which would benefit from improvement, for instance consistency with on-demand medication recording and routine stock audits for controlled drugs, separate storage for internal and external medications and better temperature control of the drug room. All medication storage areas were locked or attended. There was evidence of regular medication audits and stock control. Residents can choose to self-manage their medication if it is safe for them to do so. We noted that there was a good supply of continence products, supplements and aids and adapted equipment. There was evidence that people received appropriate timely medical support and the involvement of various health professionals was well recorded. We concluded that the home has safe and appropriate procedures for medication and health care.

People receive care and support from staff who are able to care for them appropriately and sincerely. We heard from relatives that the staff's communication and co-ordination with them is good. The manager was described as *'hands-on'*, *'approachable'* and *'open to suggestions'*. Residents we spoke with mentioned that they felt they weren't waiting long to be attended to after pressing the call bell button. There is no formal regular monitoring of the call bell system in place but the system was able to deliver a printed record in which we found the waiting times were within the limits set by the provider for themselves. We also

saw, and were told by staff, that they were checking routinely on people. Some staff told us they were *'rushed off their feet at times'* and *'wishing we had more time to interact with the residents'* due to being short staffed. However, the returned CIW questionnaires which we had given to staff didn't mention this. The staff rotas we reviewed showed staffing levels which reflected those proposed in service's statement of purpose and there had been no recent use of agency staff. On the days of our inspection visits, we saw that there were enough staff on duty to ensure people's needs were met. We saw that the numbers of staff on duty reflected what was displayed on the duty rota. Discussion with visiting relatives and people living at the home confirmed that, although staff were busy at certain times of the day, there was always enough staff on duty to meet people's health and personal care needs. From our observations and findings we established that people can be assured to receive good quality and empathetic care at the right time.

People's individual nutritional needs and preferences are understood and anticipated. The residents we spoke with said that they enjoyed their meals and the choices on offer. We saw that residents had choices where to eat their meals and the daily menu was displayed in the dining room. There were sufficient staff at hand at mealtime and they supported the diners when required. They were doing this in a respectful and unobtrusive way, demonstrating warmth and compassion, and also having good humoured banter with the residents. We also noted that people were enabled to make alternative choices, for example a resident didn't like the sandwich he was eating and it was promptly replaced with another one of his choosing. We found that there were 'drink stations' and a supply of fresh fruit presented enticingly. We spoke with a member of the kitchen staff who demonstrated a good understanding of people's nutritional needs and was able to tell us about people who required special diets. She also confirmed that they communicated with dieticians as required. We found that people's well-being is promoted because their choices and dietary needs are recognised and catered for.

## Environment

### Summary

People benefit from a safe, clean and comfortable environment. There are areas (indoors and outdoors) which allow for privacy and quiet times in addition to rooms for socialising with residents and/or visitors. The home is well maintained and clutter free and meets health and safety requirements. It feels homely and welcoming.

### Our findings

We were told:

*"I like the views from my window"* (resident)

*"I can sit down with my mum and have a cup of tea with her, she is very settled and happy here"* (relative)

*"I like that I have my own room here, with my own paintings and other things"* (resident)

People benefit from a safe, clean and comfortable environment. The home had secure access. It was well decorated throughout and thought had been given to colour schemes and furnishing in order to enhance people's sense of security and belonging; for example the kitchen in the assessment unit was made to resemble one in a typical house. There were also a resident budgie and fish in a fish tank which provided distraction and stimulated residents to take responsibility to care for them. All people had their own room with shared bathrooms, some of which had been updated recently. There were enough bathrooms and toilets available to the residents. We found a shared bathroom where personal items were being stored and this is not a recommended practice. People living in Ty Clyd were encouraged to personalise their rooms, and a relative told us that their loved one could choose to bring some furniture and soft furnishings when she moved in. Ty Clyd had various lounge spaces which residents and their visitors had access to, so they could choose their surrounding according to their needs and wants at the time. Furthermore, we noted that there were areas such as activities/kitchen room and the foyer which is furnished with armchairs and residents were sitting there and greeting visitors. The latter is so popular that management are looking into options to provide more space there. A secure, well-appointed courtyard garden complete with raised vegetable beds to be tended by residents was available. We were told that a conservatory is being planned for further enrichment of the people living in Ty Clyd Care Home. The home currently has a five star rating with the Food Standards Agency (which is the highest rating possible) and the menu we appraised, as well as the food served, was appetising and appropriate. The kitchen staff were knowledgeable about the various dietary requirements, allergies and preferences of the residents. We also noted that care staff and kitchen worked well together to encourage good nutrition; for example we observed a staff member giving feedback to the cook about a resident's dinner preference. We concluded that the environment in Ty Clyd suits the needs of the residents and is enriching and comfortable.

People are cared for in safe, secure and well maintained surroundings. The entrance to the home was secure and visitor's identities were checked before they were asked to sign into the visitor book. When we visited, the home appeared to be in a good state of decoration and repair, had sound practices for safe use of equipment in place and the respective records and files were kept appropriately. Health and safety checks were in place, equipment was working and routinely serviced, checks in relation to the safe maintenance of fire safety equipment, gas, water temperatures, Legionella prevention measures and electricity services were found to be routinely made and satisfactory, and remedial action



taken where appropriate. Confidential documentation relating to staff and residents were kept safe and hazardous substances, cleaning materials and medication were locked away securely. We conclude that people live in an environment which is safe, free from harm and their right to privacy is respected.

## Leadership and Management

### Summary

People living at the home can be assured that the service is led by dedicated and competent management which is well established and approachable. People are cared for by a staff team who work well together and support each other. Staff receive relevant training to ensure residents are safe and get the best possible care. Supervision is accomplished regularly. Quality assurance and reviewing processes are effective and ongoing in accordance with regulatory and provider requirements.

### Our findings

We were told:

*"The girls (staff) are lovely here and put up with me"* (resident)

*"(the manager) is very hands-on and approachable"* (relative)

*"I like working here, I have been here 24 years now"* (staff member)

People benefit from clear and robust systems in place to monitor the quality of the service they receive and to have their voices heard. Ty Clyd's vision and purpose are clear and accessible in writing. We saw that the home encouraged feedback and provided opportunities to do this in various ways, formally and informally. Management and staff were described as being *"very approachable"* and *"visible"* and we saw a record of written compliments and feedback which was predominantly positive. There were records of regular meetings with residents and relatives in which matters like the menu and activities were discussed, and we also noted that suggestions were considered and implemented. We found that Ty Clyd recurrently reviewed their quality of care in a way which included comments from residents and their relatives. The responsible individual visited on a regular basis to undertake quality monitoring, and reports following these visits were available when we inspected. We examined the home's Statement of Purpose; it contained clear and detailed information about its aims and objectives, about its services and facilities and it outlined Ty Clyd's philosophy of care and approach to care delivery. It had recently been updated. We found that people and their visitors are being consulted about the service they receive, and that Ty Clyd is committed to constant improvement and quality assurance; we also established that clear information is provided so people can understand the care and support available to them.

People are supported by a stable and committed staff team. There were systems in place which make sure that staff are suitable to work in the home. From the personnel files we reviewed, we concluded that there is a robust recruitment and employment process in use. The required information was present, such as proof of identity, photo, and a Disclosure and Barring check (DBS). Written references and a written employment history had been acquired. Induction and mandatory training was organised and documented. The home's training matrix showed the training provision for regular and extra training needs, with focus on the key areas of manual handling, infection control, safeguarding, dementia awareness, and food hygiene. This gave staff the appropriate knowledge and skill to meet the needs of the people in the home. We noted that management and staff members also undertook specialised training, for instance a care worker trained to be a champion for dementia. We saw evidence of staff training modules provided to improve positive language and behaviour. Staff received regular supervision in form of a confidential and documented one-to-one discussion between the staff member and their line manager. We saw this evidence in all the staff files we sampled. Although there was no formal staffing tool being used at Ty

Clyd Care Home, the staffing levels were set out in the Statement of Purpose and reflected in the rotas we examined. Staff members we spoke to felt supported and valued by the home's management. Staff told us they feel listened to and were not afraid to bring up issues or ideas with the manager. We spoke with some relatives who confirmed that they felt they could do the same with staff and management, also commenting that the manager is very approachable and knows residents and staff well. We determined that staff are satisfactorily trained and have time to spend with people to make sure not only their physical requirements are met, but also their emotional and psychological needs. We noted that considerable efforts and attention went into providing continuity of care for the people in the home, with new staff recruited recently. People's care is enhanced by the recruitment, support and training of a consistent and motivated staff team and by being well led and supported by management.

## **5. Improvements required and recommended after this inspection**

### **5.1 Areas of non-compliance from previous inspections**

This was the first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016.

### **5.2 Areas of non-compliance identified at this inspection**

No areas of regulatory non-compliance were identified at this inspection.

### **5.3 Recommendations for improvement**

- Medication records should properly record PRN (as necessary) medications in order to evidence why a drug is given and whether it worked effectively or not
- Routine stock check audits of the controlled drug book audits should be consistent
- Ensure the room temperature is maintained within acceptable limits for medication storage
- Separate storage for internal and external medicines is recommended
- Ensure individuals' toiletries are not left in the communal bathrooms

## **How we undertook this inspection**

We (CIW) made an unannounced visit on 7/2/2019 with two inspectors. This was a post registration inspection under the Regulation and Inspection of Social Care (Wales) Act 2016 and the manager was present throughout. The inspection considered the residents' well-being, the care and support they receive, the quality of leadership and management, and the quality and suitability of the environment.

The following sources of information were used to compile this report:

- Observation of the routines and care practices
- Observation of the home environment and ambience
- Observation of staff interactions with the residents and within the team
- General observations observing and record life from a resident's perspective over a short period of time
- Dialogues with residents, staff, visitors and management
- Examination of three resident files
- Examination of four staff files
- Review of staffing rotas and other resource information
- Results of six anonymous staff and relatives questionnaires received back
- A partial medication audit was undertaken
- Review of records relating to health and safety maintenance, equipment and utilities
- Review of records relating to incidents, accidents and subsequent trend analyses
- Review of complaints and compliments
- Supervision and staff meeting records
- Samples of the food menu
- Records of social activities available
- Minutes of resident meetings
- Consideration of the service's quality assurance process and internal auditing
- Consideration of information we already held about the home. This included the statement of purpose, service user guide, notifications and concerns

We gave a full feedback of the findings of this inspection to the manager on the day of the inspection and also to the responsible individual via phone on 12/02/2019.

Further information about what we do can be found on our website:

[www.careinspectorate.wales](http://www.careinspectorate.wales)

## About the service

<b>Type of care provided</b>	<b>Care Home Service</b>
<b>Service Provider</b>	<b>Caerphilly County Borough Council</b>
<b>Manager</b>	<b>Michelle Jones</b>
<b>Registered maximum number of places</b>	<b>30</b>
<b>Date of previous Care Inspectorate Wales inspection</b>	<b>This was a post registration inspection and the first for the service under the Regulation and Inspection of Social Care (Wales) Act 2016</b>
<b>Dates of this Inspection visit(s)</b>	<b>07/02/2019</b>
<b>Operating Language of the service</b>	<b>English</b>
<b>Does this service provide the Welsh Language active offer?</b>	<b>The service is continuing to work effectively towards providing a service in Welsh for those who chose it.</b>
<b>Additional Information:</b>	