



Inspection Report on

Trem Y Mor

**TREM-Y-MOR
SCARLET AVENUE
PORT TALBOT
SA12 7PH**

Date Inspection Completed

30/01/2020 & 03/02/2020

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Description of the service

Trem Y Mor is a purpose built, specially adapted single storey home situated in Aberavon Port Talbot, overlooking the seafront. It is registered to provide personal care for up to 16 adults. It predominantly offers a short-term respite break for people, with an option of extended care accommodation for a minority of people who need to live at the home on a longer-term basis. The home is split into four separate areas, known as pods. Each of which houses four bedrooms with its own communal lounge and small dining and kitchen area.

Neath Port Talbot County Borough Council owns the service and the Responsible Individual (RI) is Susan Bradshaw. There is an experienced manager in post, who is registered with the workforce regulator Social Care Wales.

Summary of our findings

1. Overall assessment

People are happy at Trem Y Mor and have their physical, social and emotional wellbeing enhanced by committed staff. People are encouraged to make choices by staff, that have a good understanding of their needs and what is important to them. People are seen as individuals and have good social opportunities, both in the service and the wider community.

People live in clean, spacious and well-maintained surroundings, which are well maintained. The service is well managed by a senior management team that continues to develop the service around people and their carers.

2. Improvements

This was the first inspection of this service since it was registered under the Regulation and Inspection of Social Care Wales Act 2016 (RISCA).

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. They relate to the following:

- Personal plans.
- Welsh active offer.

1. Well-being

Our findings

Care workers treat people with dignity and respect and ensure their personal preferences are recognised.

We saw care workers knew people they supported very well. There was minimal staff turnover, resulting in staff working with people for a significant period. Care workers were professional but friendly in their approach, and were well trained. Personal planning documentation was well-organised and provided good information of the person. Although goals needed to be clearer and more regular reviews were required with the person and/ or relative. Care workers always referred to people in a positive light and demonstrated a caring and supportive attitude throughout the inspection. People and their relatives were happy and comfortable with staff, working in an open and inclusive environment. Therefore, we conclude people are happy and supported to make decisions within a caring environment.

People's physical and emotional well-being is supported.

People receive good quality care and support that enhances their quality of life. People were well cared for, clean, well groomed and comfortable at Trem Y Mor. We found the environment to be relaxed but responsive. People had good access to the wider community. There were a wide range of both internal and external activities of which people could get involved. Such activities enhanced the physical and emotional wellbeing of people. There was good communication with relatives/ carers and appropriate referrals were made to health and social care professionals in a timely manner.

This evidence suggests people benefit from care that improves their wellbeing.

Care and support is provided in a location and environment with facilities and equipment that promotes achievement of their personal outcomes. People live in a clean and comfortable environment. Specialist equipment was available; safety checked and were being well maintained. People had access to pleasant and interesting communal areas, both internally and externally. We saw domestic staff ensured the home was clean and fresh. A stringent, well-organised system for maintaining safe systems of work was in place. This ensured the building, services and any equipment used by staff and people was fit for purpose. Fire procedures and checks were routinely completed.

People are therefore supported in a suitable and safe environment.

We found people were safe and protected from risks.

There were safe staff recruitment systems in place, and care workers were well trained.

The service had appropriate mechanisms in place to safeguard vulnerable individuals.

There was a clear safeguarding policy in place, and all staff received safeguarding training as part of induction. All staff demonstrated good knowledge of health and safety and the safeguarding process. Individual risks to people were identified and recorded as part of the

assessment process. There were personal plans in place. All accidents and incidents were recorded, analysed and appropriate prevention measures put in place when needed. Deprivation of liberty (DoL's) applications, where appropriate, were in place to ensure restrictions placed on individuals were lawful and proportionate. The service has suitable mechanisms in place to safeguard vulnerable individuals to whom they provide care and support.

2. Care and Support

Our findings

Staff take a positive and sensitive approach with people who are happy with the care and support they receive.

We found staff knew people very well and were fully aware of the care and support needs of the people they supported. We found care workers approached people in a warm and friendly manner, and included them in any decisions. People had individual keyworkers that were responsible in gaining a better understanding of what was important to them. This was done through informal conversations with people and their carers, as well as through information provided by care managers. We had conversations with a number of people throughout the inspection. All feedback was very positive and included comments such as “*staff are great*” and “*they have really helped me*”. Throughout the inspection, we observed people were supported in a timely manner. We saw one person become agitated; two staff members dealt with this sensitively and professionally. Another person was in the process of moving into more independent supported accommodation. They were clearly excited about this opportunity and were being complimented and encouraged by staff in their achievements. A wide range of activities and facilities were on offer to people within the service. These included an IT suite, sensory room, hot tub, library, games consoles and opportunities to get involved with gardening. People also enjoyed the range of board games on offer, as well as attending the day centre located within the service. People also enjoyed easy access to the beachfront promenade, and access to a wheelchair specifically adapted to go into the sea.

Therefore, we conclude people have opportunities to engage in a range of activities and have good relationships with staff.

People are supported to remain healthy.

We found care workers monitored the health and wellbeing of people on daily basis. Areas such as the dietary and fluid intake of people when needed was being closely monitored. We saw one person on professional advice required their food to be cut up due to the risk of choking. Another individual was being supported to lose weight through regular exercise and a healthier diet. This we saw was having a positive impact. They told us they had lost a significant amount of weight, and were able to walk a greater distance. During the inspection we saw them walking with staff around the building. People, had good access to health care professionals. These included physiotherapists, occupational therapists and general practitioners.

The service promotes the health and wellbeing of people.

We found clear and accurate systems in place for the management of medication.

The medication room was appropriate and temperature checks being carried out on a daily basis. All medication administration records (MAR) were accurately being recorded and any PRN (when required) medication was noted with the reasons stated on why it had been

administered. All staff administering medication were trained and had their competencies checked annually by senior staff as part of the supervision process. There were clear auditing processes in place, including a daily check by senior staff. Therefore, the service maintains safe medication procedures.

Overall, personal plans contain clear and up to date information.

We sampled three personal files and found these were well organised. However, they were not being reviewed on a quarterly basis. The manager acknowledged this and systems immediately put in place. We saw people had a number of individualised risk assessments, which identified how their needs would be managed and risks minimised. We found personal planning documentation included people's social histories. It also provided useful information on people's disabilities, health condition and ability to communicate. Daily recordings made by staff evidenced a range of outcomes were being achieved and personal plans evidenced the involvement of people and their carers. However, more work was required in ensuring the individuals goals were made clear within personal planning documentation.

Therefore, overall we can conclude personal plans are effectively maintained to ensure that the care provided reflects individual needs.

3. Environment

Our findings

People live in a safe, pleasant and homely environment where they are happy. The service is located on Aberavon beach with uninterrupted views across Swansea Bay. The home has been designed to offer ground floor easy access to people with a range of support needs. This includes people with learning, physical, sensory disabilities and mental ill health. Bedrooms included ensuite facilities and access to specialist lifting equipment when required. Each four-bedroom pod had its own lounge, fully equipped kitchen and dining area. Externally, each pod had access to safe, fully enclosed outside space. Two of these areas had artificial grass, with plans in place to fit the same to the remaining two pods. There was also a large communal garden area where people could sit and enjoy their surroundings.

We found the service was well maintained, decorated and furnished to a high standard. We found it was well equipped for the people living there. Bedrooms were spacious warm and clean. We saw toilet and bathing facilities were appropriate and sufficient in number. People had access to a range of facilities including a Jacuzzi bath, chilling room, sensory area and an IT suite. There was also an area that could be used for people who were displaying agitation and changes to behaviour. People, could be supported to this area safely away from other people staying at the home by well-trained staff. It provided privacy and minimised stimulation. We found the service benefited from spacious communal areas, which people were free to use as they wished. There was a day-centre situated within the building, which people benefiting from respite could also use. There was also a large dining area, which appeared vibrant and a positive place where people could socialise. However, there were no bi-lingual signage in the communal areas of the home. We established through both observations and speaking to people living at the home they were very happy. Comments included *“it’s a great place to stay”* and *“I love it here”*. Relatives were also *“very happy”*. We found the home was safe from unauthorised access, as all visitors on entering the home were requested to sign a visitor’s book. Confidential records and personal information were safely stored in the main office in locked cabinets, or on computer. Therefore, the home environment is suited to meet the needs of individuals living in the home.

Environmental risks to people have been identified and as far as possible eliminated. The home employed an experienced maintenance officer on a full-time basis. They were well organised and provided us with records to evidence the testing and servicing of equipment was being carried out. We found the building and services to be well-maintained and a detailed programme of maintenance and safety checks were in place. These included water temperatures checks and checks of bedrails in people’s rooms.

We found the testing of equipment was kept up to date. Evidence such as up to date recorded checks of lifting slings and certified checks of portable lifting equipment supported our findings. We saw safe systems of work in relation to fire safety and staff received awareness training in fire safety and awareness. We noted personal emergency evacuation plans (PEEP's) were in place, which ensured people received the right support in the event of an emergency.

Therefore, people can be confident steps have been taken by the service to ensure people are protected from risk.

4. Leadership and Management

Our findings

People are supported by an experienced and professional group of staff, who maintain good staffing levels.

We found a staff team with a good mix of knowledge and experience. Staff told us they “*really enjoyed*” working at the service, and “*we are a close team, and enjoy working together*”. This was evident throughout the inspection, as the team were supportive of each other and keen to ensure people were being well supported. We found good staffing levels were being maintained. They were also flexible to meet the varying care and support needs of people who used the service. We found staff had time to spend with people and did not appear rushed throughout the inspection. Staff rotas were well organised and reflective of the statement of purpose.

Staff felt well trained and supported. Supervision records evidenced that all staff were having formal supervision bi-monthly. Appraisals were arranged on an annual basis. The responsible individual (RI) was accessible and visited the service on a regular basis. The manager felt well supported by both the responsible individual and the wider team. We found both the manager and senior care worker to be approachable, open and available to staff and people living at the home throughout the inspection. They maintained a happy and community based feel within the service. Training records evidenced mandatory training was up to date, and managed centrally by the local authorities training department. We saw staff had good access to ongoing training based on the people they supported. This included positive behaviour Management (PBM), dementia care and training modules on learning disabilities and autism. We saw training updates were provided over a three-day period every year.

Therefore, people can be confident that staff are well supported in their roles, and continue to make a positive difference to their lives.

People are protected by stringent systems of employment and recruitment.

The service as part of Neath Port Talbot Local Authority benefited from support from the corporate human resources department. On checking three staff files, we found the relevant checks and documentation to be in place. We found a stringent induction process in place, and care workers spoke positively on the induction they received.

Therefore, the service ensures staff employed are suitably fit to provide care and support to people living at the home.

There are stringent audit systems and processes in place for monitoring the service. Both the statement of purpose and written guide were well-presented documents, which were reflective of the service being provided. The written guide had just been reviewed and a new guide was now available. This we saw included a number of nicely presented photographs to assist people who were unable to read. We were told that both documents

would be available in Welsh as part of the Local Authorities commitment to promoting the “active offer” of the Welsh language. We found the management team maintained a clear quality assurance process, in satisfying regulatory requirements. This included monitoring and regular audits of areas such as care planning, medication and the care and support being provided. The manager also ensured ongoing dialogue with people, relatives and staff was maintained. We found staff meetings, and coffee mornings with friends and relatives were arranged on a regular basis. These were recorded and any actions identified and followed through.

The responsible individual was accessible and attended the home on a regular basis. They also completed monthly reports on the service and what impact was having on people and their carers. We were also provided with a detailed six monthly report on the quality of care being provided. We saw this was appropriate and ensured the views of people, carers and staff were included. It also referenced any improvements/ actions to be addressed. We were confident all incident and accidents were recorded, and analysed and formed part of the ongoing quality assurance process. The service benefits from stringent policies and procedures. Although, both the complaints and whistleblowing policies required minor amendments.

Therefore, the service has systems and processes in place to monitor, review and improve the quality of care and support.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

This was the first inspection of this service since it was registered under the Regulation and Inspection of Social Care Wales Act 2016 (RISCA).

5.2 Recommendations for improvement

We recommended the following areas for improvement:

- Personal plans- To ensure all personal plans are reviewed at least on a quarterly basis, or sooner if circumstances change.
- Personal plans: To further develop personal plans in ensuring the goals/ aspirations of people are clear, also to evidence the involvement of the person and/ or relative.
- Welsh active offer: To introduce bi-lingual signage on communal areas throughout the home.

6. 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 30 January 2020 between 08.30a.m. to 5.00p.m. We did a follow-up visit on 03 February 2020 between 1.30p.m. and 3.30p.m.

The following method was used:

- We met senior staff and were given a comprehensive tour of the building & surrounding grounds.
- We had discussions with the manager and senior care worker about the management of the home.
- We looked at a range of care and other records, including medication, accidents and incidents reports.
- We selected three people's care files to examine and discussed the contents of the written records, risk assessments, care assessment, personal plan and reviews.
- We observed at various times, communication between people and the staff.
- We discussed and examined the staff recruitment, training and supervision records.
- We viewed the home's statement of purpose and written guide.
- We had conversations with many of the care, catering and housekeeping staff on duty.
- We met and spoke with two relatives visiting the home.
- We assessed the well-being and care provision for people who use Trem Y Mor on a regular basis.

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	Neath & Port Talbot County Borough Council
Manager	A manager is in post who was registered with Social Care Wales.
Registered maximum number of places	16
Date of previous Care Inspectorate Wales inspection	08/05/2018 and 09/05/2018
Dates of this Inspection visit(s)	30/01/2020 & 03/02/2020
Operating Language of the service	English
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 or demonstrates a significant effort to promoting the use of the Welsh language and culture.
Additional Information: There are staff who are Welsh speaking at the service who are identifiable by their lanyards. The manager advised that the new Statement of Purpose will be bi-lingual. There are currently no Welsh speaking people using the service.	

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