



Inspection Report on

Ty Nant Care Home

**53 Brook Street
Tonypany
CF40 1RE**

Date Inspection Completed

22/11/2019

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Description of the service

Ty Nant care home is located in the centre of Williamstown in Tonypany and has good links to local amenities. It provides personal care and nursing care with accommodation for up to 33 people aged 55 years and over who have dementia care needs.

The home is owned and operated by Newcore Healthcare Limited who have nominated a Responsible Individual (RI) Bikram Choudhary who has overall responsibility for the service. Ty Nant has a suitable manager who oversees the day to day running of the service and is registered with Social Care Wales (SCW), the workforce regulator.

Summary of our findings

1. Overall assessment

People are happy with the service they receive, and are well supported by staff who understand their needs. Management within the home is effective and committed to continually improving the service they provide.

Staff are recruited safely, well trained and fully supported to undertake their roles. People are cared for in a warm, welcoming and well maintained environment that would benefit from some minor improvements to be more dementia friendly.

2. Improvements

This was the first inspection since the home re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service and the areas where the care home is not meeting legal requirements. These include the following:

- Equipment storage.
- Décor within the home.
- Medication storage.
- Complaints processes.

1. Well-being

Our findings

People can be assured they get the care they require without delay.

We saw staffing levels were appropriate to meet the needs of people using the service, and staff had a good understanding of the needs of the people they cared for. We witnessed staff providing care with dignity and respect whilst showing compassion. People we spoke with including residents, family members and visiting professionals, all spoke positively about the support at Ty Nant.

We viewed a selection of care files and saw they were in good order; thorough, robust and regularly reviewed and updated. We saw detailed information on people's medical conditions and how to manage them included within files, with clear evidence that referrals had been made to external professionals and services in a timely manner.

We viewed the medication storage and administration processes and found these to be safe and robust with Medication Administration Record (MAR) charts in neat order.

We conclude that people's physical and emotional needs are met appropriately.

People can be assured their individual circumstances are considered.

We saw evidence people were treated as individuals by staff. We viewed care documentation which was person centred and clearly highlighted personal preferences, likes and dislikes of the person being cared for. Food menus within the home offered choice with people free to eat their meals communally or privately. All dietary requirements were catered for with kitchen staff understanding modified diets.

Routines within the home were individual, some people received full support while others were supported to be independent with tasks. People were supported to engage in social activities appropriate to their choices and abilities. We saw that social needs were met by a dedicated activity co-ordinator who arranged extensive social events within the home, community and further afield. People were cared for in single rooms which benefited from en-suite facilities. People were encouraged to personalise their rooms to make them more comfortable and homely.

We conclude that people are supported to have control over their lives.

People can be assured they are safe.

We saw that Ty Nant was a secure building that allows authorised access only. People were cared for in a suitable environment that was free from hazards and had equipment to maintain safety and independence.

We saw all staff had undertaken safeguarding of adults training and a safeguarding policy was in place. We saw evidence of the home consulting with the Local Authority safeguarding team and making safeguarding referrals when appropriate. Safeguarding referrals were stored centrally with outcomes recorded. The home had appropriate policies and procedures in place to ensure the smooth running of the home, but we noted that a complaint had not been logged within the complaints file and so recommended improvements in this area.

We conclude that people are protected from abuse and neglect.

2. Care and Support

Our findings

People can be assured they will receive prompt care.

We examined the care files of four people using the service and found them to be thorough, robust and reflective of the person receiving care. Personal plans were reviewed regularly and updated when required. Referrals were made to external agencies and any guidance or recommendations were reflected in personal plans and followed appropriately.

Staffing levels at the home were sufficient to meet the needs of people using the service, and were in line with those set out in the statement of purpose. We viewed practices within the home and saw staff providing care with dignity and respect with clear knowledge of the needs of the people they cared for. One person we spoke with told us *"I don't know where I'd be without the carers"* We also spoke with a visiting family member who spoke positively about the care their relative received. We were told the family visit regularly and had never had any reason to make a complaint.

We examined medication processes within the home and found them to be safe and robust. People's medication was stored in their own rooms and administered as required, with controlled drugs stored in the medication room and locked away safely. We audited a selection of controlled drugs and found the quantity to match the recorded figure in the book. We examined the Medication Administration Record (MAR) charts and found them extremely neat. All MAR charts contained a picture of the person receiving the medication, and had been completed correctly with no gaps; the effects of as required (PRN) medication were fully recorded.

We conclude that people's well-being is promoted by the care they receive.

Individual circumstances are considered.

All people had their own personal routines and chose when to get up in the morning, when to go to bed at night and how they spent time in between. All care documentation examined was person centred and individual to the person being cared for and clearly documented the likes and dislikes of the person.

Staff we spoke with had a good understanding of the needs of the people they cared for and were committed to promoting independence. We observed lunch time within the home and saw staff providing support to people in accordance with their needs. Some people were fully supported to eat their meals while others were given verbal guidance and reassurance. People were offered a choice of meal and drinks, and we were told by kitchen staff further choice was always available. The cook told us *"residents can have what they want"*. We also saw people could choose where to eat their meals, whether it was communally in the dining room, lounge or privately in their bedrooms. One person told us *"I prefer to snack in my room"*. We saw that the person had snacks available in their room and staff brought a cup of tea and a cake to the person's room.

We conclude people are encouraged to have autonomy over their lives.

People can be assured that their social and recreational needs are met.

Ty Nant employed a full time activity co-ordinator and had recently recruited an assistant. We spoke to the activity co-ordinator at length who told us about activities and events that take place within the home, community and further afield. We were told small groups of residents regularly attended 'singing for the brain' and would be taking part in an organised concert for the public. We were told that the home has good links with the local community

including the schools, church and boys and girls club. We saw activity rotas which included bingo, gardening, quiz, walks and church services.

We spoke with a family member who told us "*families are made to feel welcome and are included in social events within the home. There is always something going on here*".

We conclude that people are encouraged to do things that matter to them.

3. Environment

Our findings

People can be assured they live in an environment that meets their needs.

Ty Nant is a purpose built facility set over three floors. We found the environment to be warm, welcoming and homely but noted the décor to floors one and two could be more dementia friendly as the handrails were white on cream walls and did not stand out. We were assured the home was looking to decorate the walls an alternative colour.

Ty Nant benefited from spacious communal areas including a large lounge with a bar, a spacious dining room and an activity room which accommodated a hair salon area. A separate area for activities and cooking with low ovens for people in wheelchairs to use was also available. There was a smaller lounge on floor two and a small seating area designed as a train carriage with a TV screen set as a virtual train ride. People had access to ample bathrooms and toilets which were clean and contained appropriate equipment to maintain safety and independence. We did note that some personal hygiene products had been left in one bathroom and recommended these were stored in people's own rooms.

People were cared for in single en-suite rooms and were encouraged to make the rooms as personal as possible. We viewed a number of rooms during inspection and saw they were clean, warm and personal to the person occupying the room.

We conclude that people live in a home that promotes their well-being.

People live in a safe environment.

On arrival we found the main door was locked and we had to press a buzzer to gain access to the building. We were asked for identification, (which was thoroughly checked) and to sign the visitor's book before we were authorised access. We saw the home had handrails in situ and appropriate flooring to promote the mobility of people using wheelchairs or walking aids. The home was generally neat and tidy, but we noted that on floor one there was an open area in the corridor which contained some clutter which made the environment look untidy and within a storage trolley was a sealed bottle of medicine that was immediately moved when we pointed this out. We were advised there were plans to renovate that part of the communal area and were assured the clutter would be put away.

We saw all windows had appropriate restrictors in place and all harmful chemicals were locked away safely and securely. Areas within the stairwells were being used to store unused equipment, and noted that on floor two the equipment was spilling out quite close to the door which could pose a risk in the event of a fire. We discussed this with the maintenance staff on the day and the equipment near the door was moved immediately.

All residents had a Personal Emergency Evacuation Plan (PEEP) in place, which is a plan for how people should be evacuated in the event of an emergency or a fire. On the day of inspection a fire drill was taking place which was co-ordinated by the maintenance person. We saw when the alarm sounded the fire doors closed and staff responded appropriately and identified the location of the potential fire quickly and had the PEEP file to hand.

We viewed the maintenance file and found it to be good organised so we were able to see that gas and electricity safety testing was up to date and all serviceable equipment had been serviced appropriately. We saw that all residents had access to equipment needed to maintain their safety and independence at all times.

We conclude that people's safety is maintained within the environment.

4. Leadership and Management

Our findings

People benefit from the leadership and management arrangements.

Ty Nant benefited from a manager registered with Social Care Wales and an RI who had good oversight of the service. We spoke to the RI at length during inspection and were satisfied they understood the legal requirements of the role. We were told quarterly RI visits were completed and we saw appropriate quality assurance monitoring of the service took place although the information had not yet been formulated into a formal report.

We viewed a selection of policies and procedures and found them thorough and robust, with additional clinical guidance provided where necessary. Ty Nant had a clear complaints policy in place and were recording and responding to complaints however, there was one complaint within a care file that had not been logged in the complaints file, and so recommended that all complaints were logged at all times.

We saw evidence that Deprivation of Liberty Safeguards (DOLS) applications, safeguarding referrals and regulation notices were submitted appropriately which indicated the home understood and was fulfilling its legal requirements.

We conclude that leadership and management is effective.

People can be assured they are supported by people who are safely recruited.

We examined a selection of staff personnel files and found them to contain all required information including identification and a full employment history. Pre-employment checks, including references and Disclosure and Barring Service (DBS) certificates, were applied for before employment was offered. These checks are important as they determine the suitability of a person to work with vulnerable people. We saw there was a system in place to ensure that DBS certificates were renewed every three years.

We examined the staff training matrix, which had some minor gaps, but we were assured staff were booked on up-coming courses. Staff we spoke with told us they had regular training and one person said "*we are always on training*".

We examined the supervision matrix and found all staff were supervised regularly. We were told by staff they were well supported by the manager and could approach them with any issue whether it be work or personal.

We conclude that staff are well trained and supported.

5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

This was the first inspection since the home re-registered under the Regulation and Inspection of Social care (Wales) 2016.

5.2 Recommendations for improvement

- Unused equipment to be disposed of, or stored more appropriately.
- Consideration to more dementia friendly décor in corridors.
- Medication to be stored appropriately at all times.
- Ensure all complaints are logged in the complaints file.

6. How we undertook this inspection

This was a full inspection completed as part of our annual inspection programme. This inspection was the first post RISCA registration inspection. We visited the service unannounced on 22 November 2019 arriving at 09:50am and leaving at 16:10pm.

The following regulations were considered as part of the inspection:

- The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.

The following methods were used:

- A tour of the building.
- Discussion with manager.
- Discussion with RI.
- Observations of practices within the home.
- Observations of medication administration processes.
- Viewing a selection of policies and procedures.
- Discussion with visiting family members.
- Discussion with visiting professionals.
- Discussion with Five residents.
- Discussion with Six staff members.
- Viewing of four resident files.
- Viewing of four staff personnel files.
- Viewing the training and supervision matrix.
- Viewing of the maintenance file.
- We used the Short Observational Framework for Inspection (SOFI). The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.

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	Newcore Healthcare LTD
Responsible individual	Bikram Choudhary
Registered maximum number of places	33
Date of previous Care Inspectorate Wales inspection	This was the first inspection since the home re-registered under the Regulation and Inspection of Social Care (Wales) Act 2016.
Dates of this Inspection visit(s)	22/11/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people who use, or intend to use their service. We recommend that the service provider considers Welsh Government's ' <i>More Than Just Words follow on strategic guidance for Welsh language in social care</i> '.
Additional Information:	

Date Published 14/01/2020