



Inspection Report on

Ty Victoria Nursing Homes

**97 Victoria Road
Wunarlwydd
Swansea
SA5 4TB**

Date Inspection Completed

10/05/2021

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About Ty Victoria Nursing Homes

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Aura Care Homes Limited
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	No

Summary

This was an unannounced inspection as part of our programme of scheduled inspections. People and their relatives are happy and satisfied with the care and support they receive. There is information available for staff to understand how to best meet people's care and support needs but this needs reviewing and updating.

Staff are available in sufficient numbers and mix of skills to adequately provide support to people. Safety equipment is in place and health referrals are made in order to promote peoples' health and well-being. The service provider has developed systems to enable them to capture people's views. The recently established management team have put checks and processes in place to keep service delivery under constant review.

Improvement is required with consolidating support, and developing staff with formal supervision. Improvements are identified and need acting upon such as the garden area to improve health and safety in the home, staff training and records and medication audits. The manager is registered with Social Care Wales (SCW).

Well-being

People have control over day-to-day life. Records show that people are offered choices to make everyday decisions. We spoke with the Responsible Individual (RI) and manager, who told us they regularly speak with people who live at the home and their families about what matters to them. Staff commented they feel supported by the management team. Relatives told us the manager and RI are easy to contact and "*the new manager is excellent*" and "*communication is good*". During our visit to the home, we spoke to various people who told us they have a genuine relationship with staff and commented, "*I love them all*" and "*they're good to me*".

People get the right care and support. Records reflect referrals are made to a variety of healthcare professionals such as psychiatry and district nursing. This was confirmed by comments from a visiting healthcare professional who said "*I have no worries about the quality of care at the home*". Relatives told us their family member "*is well supported and we are happy with the level of care and supported provided. They are encouraged to stay active and to do as much for themselves*". This is reflected in records we reviewed.

People are safe and protected from abuse and neglect. The service provider has safeguarding policies and procedures, which are aligned to current legislation and national guidance. Staff demonstrate an appropriate understanding of their role and responsibilities. People living at the home told us they feel safe and secure.

People can mostly do the things that matter to them. We saw staff supporting people in a gentle and unhurried way to take part in activities such as reading, chatting with friends and listening to the radio. There are a range of formal activities available but these have been limited during the pandemic. There is flexibility within these activities to enable people to take part as they wish. The acute nature of the medical needs of some people means there is a need for flexibility within the activity programme. The manager said that an activities coordinator is employed part-time at the home who has overall responsibility for organising and overseeing activities and these are recorded in the day records.

Care and Support

Policy, procedure and application of hygienic practices and risk of infection are in place at the home. Staff demonstrate an understanding of infection control and the use of personal protective equipment (PPE). Staff were seen to wear appropriate PPE and follow correct procedures. We observed the home to be clean and tidy. Staff maintain appropriate standards of hygiene and there are cleaning schedules in place with oversight from the manager. We saw PPE stations in various areas in the home and we were shown sufficient supplies in stock.

People are provided with the quality of care and support they need to achieve their personal outcomes. Policies and procedures in place include the management of people's individual needs and safeguarding that are in line with current legislation and national guidance. The manager considers a range of information about prospective residents prior to coming to live at Ty Victoria Nursing Home. Personal plans are appropriate and reviewed regularly. These contain information about people who live in the service, their relatives and healthcare professionals. However, these would benefit from developing more person centred information, which informs carers how the person likes to be supported. There was limited information which demonstrates people are enabled to undertake activities of their choice and risk management plans in place needed be developed further. Healthcare professionals told us care and support provided at this home is good.

Records show people's diet and nutrition is monitored and daily records are kept up to date. We saw records of people's skin integrity are being accurately kept and pressure-relieving equipment is monitored. We discussed with the manager the need to introduce more regular monitoring of this equipment, which they agreed to introduce. We also discussed the auditing of alarm call bell checks, which we completed on the day of our visit with an appropriate response time. The manager told us they would implement a regular audit of call bell alarm response times.

The service provider recognise and understand the specialist needs of individuals who have been identified as having a cognitive impairment. Staff demonstrate they understand the need for ongoing support and encouragement to motivate and enable people to take part in daily life. We saw staff are gentle and patient in their interactions with residents. One member of staff commented, "*we try and make people laugh and smile,*" and another commented, "*we look after people like they are our family*". This was supported by a relative who commented, "*it's like a family atmosphere at the home*".

Environment

The home is secure and secure. Visiting professionals are requested to undertake a lateral flow test and sign into a visitors book on arrival, ensuring peoples' safety is maintained. Visitors are also required to follow the home's infection control procedures in relation to COVID-19. There is a visitor pod at the front of the building, which has recently been put in place and used for visitors, which has a separate entrance for visitors and a separate entrance for residents. This was clean and well organised. Information is stored securely in a locked office and care documentation is treated sensitively ensuring people's privacy is upheld.

Systems and processes are in place to ensure risks to people's health and safety are identified and addressed. Maintenance records show that checks are carried out around the home to identify and address any problems and checks were up to date. Materials that have the potential to cause harm were organised and secure.

People's well-being is not fully supported due the limited outdoor space available. The external grounds of the home have limited space for residents. At the previous inspection we were informed that the service provider was going to develop a garden area for residents to relax and take part in garden activities. At the time of this inspection, no progress had been made with developing an appropriate outdoor area with seating and tables. Currently there is no accessible outdoor area which is suitable and safe for use. We expect service provider to take action to address this and we will follow this up at the next inspection.

The manager ensures the environment supports people to achieve their personal outcomes. The home is informal and relaxed and we saw people sitting in the lounge areas on both floors or sitting in the comfort of their bedrooms relaxing. The accommodation is clean and comfortable and would benefit from updating decor and furnishings. We were told by the manager that further refurbishment work is planned. Bathrooms and other communal areas are clean and free from excessive clutter. Signs and pictures need updating to help people with orientation of time and place.

The laundry room is well organised and has an entry and separate exit. Appropriate systems were in place and all laundry equipment was in working order. There is a storage area for household waste and clinical waste bins. These would benefit from being stored within an area which makes it look less unsightly.

Leadership and Management

The service provider has governance arrangements in place to mostly support the smooth operation of the service. Arrangements for the oversight of the service are in place, such as systems for assessment care planning, monitoring and review to enable people to achieve their personal outcomes. We saw policies and procedures are in place and updated. Records seen by us relating to how the service is delivered were inconsistent. Care files lacked person centred information, robust risk assessments and were disorganised. We expect the service provider to take action to address this and we will follow this up at the next inspection.

Sufficient numbers of staff were on duty safely support and care for people. Records and observations show there are a mixture of experienced and new staff available. We saw there are sufficient numbers of staff available when they are needed. People living at the home told us, *"they're always around when you need them"*. A relative commented *"the new manager is excellent"* and *"the staff are really kind and my parents are very fond of them"*. Records show a recognised dependency tool is used to determine the numbers of staff required. The sample of staff supervision records seen by us were not carried out at the required frequency and staff files are disorganised. We were shown a training matrix which included mandatory courses as well as other courses. We considered the matrix needs updating. We discussed this with the manager and we expect the service provider to take action to address these matters and we will follow this up at the next inspection.

The service needs to strengthen its systems for medicines management. There is an appropriate medication policy and procedure in place. Medication audits are completed by senior staff but are only a balance check of stock. A more robust medication audit needs to be put in place. We discussed this with the manager and we expect service provider to take action to address these and we will follow this up at the next inspection.

The service provider has oversight of the financial arrangements and investment in the service. The RI assured us that the service was financially sustainable in order to support people to be safe and achieve their personal outcomes. During our visit, the manager told us of plans for investment at the home such as developing the garden and refurbishment of interior of the building.

Areas for improvement and action at, or since, the previous inspection. Achieved**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None

Areas where priority action is required

None

Areas where improvement is required

The staff training matrix showed gaps in training for several staff.

Staff supervision did not meet the require frequency and amount to comply with regulations.

External area (Garden) The service provider has not ensure residents have access to an outside area for recreation and to relax.

Medication audits - Medication audits were not sufficiently robust.

Care Records - Care records seen by us were not person centred and were disorganised.

The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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