



# Inspection Report on

**Tirionfa Residential Care**

**Llandderfel  
Bala  
LL23 7HG**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

23/10/2019

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## **Description of the service**

Tirionfa is a family run care home service located in Llandderfyl approximately 3 miles from Bala, Gwynedd. Tirionfa is set within its own grounds and provides care for up to 11 people aged 65 years and over.

The providers are registered with Care Inspectorate Wales (CIW) as a business partnership. The nominated responsible individual (RI) on behalf of the business partnership is Janet Foulkes. There are two managers in place, one of whom is the RI, both registered with Social Care Wales (SCW).

## **Summary of our findings**

### **1. Overall assessment**

Overall, people are positive about the care and support they receive. There are a variety of activities which interest people and they can make choices about how they spend their time. People are cared for by experienced staff who work closely with the health professionals ensuring people's well-being is maintained. The physical environment is maintained to a good standard with aids and adaptations to aid people's independence. Leadership at the home supports staff to develop their skills to further improve the care and support provided. Recommended areas of improvement are made as referred to within the relevant sections of this report.

### **2. Improvements**

This was the first inspection following its re-registration under the Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016. Improvements made at the service will be considered at the next inspection.

### **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:

- Medication – Over the counter homely remedies.
- Prescribed emollient barrier creams.
- Refresher mandatory training.
- For the provider to familiarise themselves with the statutory guidance under RISCA.

## **1. Well-being**

### **Our findings**

Practices and processes in the service support people with their physical and emotional well-being. People's health needs were recorded within their personal plans, and records were available to show people were supported to access medical attention, when required. Medication records evidenced that people were assisted to receive their medication as prescribed. Good relationships were evident between people and staff. We saw staff interact with people in a caring and friendly manner providing care and support in line with their personal plans. People told us they liked the staff supporting them and we saw people were relaxed and happy in staff's company. People are occupied with a variety of activities which people can make a choice to participate or not. We found leadership at the service emphasised the importance of understanding each person's care and social needs. Staff told us they received training and were supported by the responsible individual/manager and manager. The home was clean and comfortable and provided a range of facilities to support people to be as independent as possible. People receive good care and support, have the opportunity to stay healthy and active and do things that make them happy.

People have control over day to day matters. We saw the statement of purpose (SoP) contained information regarding the service provided. We saw people received a service in the language of their choice. People's preferences about where to spend their time, in communal lounges or their bedrooms, were respected by staff. The management spend time on a daily basis talking to residents and staff, involving them in the development of the service. People have their individual identities and cultures recognised and are supported to maximise their physical and emotional well-being.

Staff training, policies and procedures are in place to ensure people are protected from abuse and neglect. We observed staff interacting with people and saw they treated individuals with dignity and respect. Staff records evidenced they had received training to enable them to carry out their duties safely, however mandatory training was out of date and needs addressing. We saw records of validating initial DBS record to ensure staff were safe to work with vulnerable people. People are safe and protected from abuse and neglect.

People's well-being is enhanced as they are cared for within a welcoming, comfortable and safe environment which meets their needs. We found people received care and support within a spacious, clean, homely and personalised environment. Various aids and adaptations were available to promote independence. We saw a choice of areas were available for people to spend their day, in the company of others or within their own rooms if they preferred. Accessible outdoor space was available for people to sit or walk around the grounds safely. People live in a home that best supports them to achieve their well-being.

## 2. Care and Support

### Our findings

People are happy because they can do things that matter to them. We saw staff interact with people in a friendly manner. There was a stable staff team and it was evidenced through observations, that staff were aware of the individual needs and capabilities of people. We saw people were able to choose where to spend their days. We spoke with people living at the home who commended all aspects of care and support which enhanced their general well-being. Comments included:

*“Bendigedig yma” (wonderful here).*

*“Best home on the market”.*

*“I came here for a while and decided to stay, I get everything I need good food, good caring staff, why jump out of the frying pan into the fire?”.*

*“Like a family here, X and Y (providers) are very jolly. I had porridge for breakfast – didn’t want anything else, may have toast tomorrow”.*

*“Don’t have to worry about food, I have everything I need here and I’m not lonely. Wych yma (Brilliant here)”.*

*“We get everything we need here X and Y (providers) are always happy and friendly”.*

We saw staff interact with people in a friendly and caring manner. Staff talked to people on a one to one basis. We found through discussions with people and staff that activities took place at the service. Planned activities were arranged in addition to people’s preferred daily routines such as reading the newspapers, word search, watching television, going for short walks or trips to Bala. One person told us they used to sing in the local choir and enjoyed the concerts and local school children visiting to entertain people. Activities were recorded in daily records and weekly planners and notice boards in the entrance hall provided details of forthcoming concerts and activities. During our visit we saw people were visited by relatives and friends, sat watching television and reading. Three people were going out to Bala for the afternoon whilst another was collected by their relative for an afternoon out. One person enjoyed the fresh air and was walking around the grounds in the autumn sunshine, appropriately dressed for the season. This indicates people are settled and comfortable with staff and are able to take part in activities and social interests which supports their physical and emotional well-being.

People receive timely, appropriate, person centred care. Systems were in place to ensure the service could meet the needs of people before they moved into the home. This included obtaining the needs assessment completed by a social worker. In addition, one of the managers visited people in hospital or their own home to complete a pre admission assessment. We spoke with a person visiting the home as a relative who also visited the home in their professional capacity; they shared that the service is very professional with detailed paperwork in place.

They added that the manager and staff were very supportive and friendly. Many people's first language was Welsh and we heard staff speaking with people in English and Welsh. People told us they liked the choice to sit in the lounge or seating area in the entrance hall where they could greet and talk to visitors. We saw evidence of regular reviews taking place with the outcomes of the reviews recorded, actioned and communicated to relevant people involved in their support/lives. One relative told us they had looked at various homes in the vicinity and decided on Tirionfa due to its "*homely environment, fresh atmosphere and pleasant staff*". People living in the home have access to professional services. Written information in care files checked showed people had access to various health and social care services whenever required. This included visits from health care professionals, social workers, opticians and dentists. This indicated that staff have awareness of the individual needs of residents.

The service have systems in place to ensure that medicines are stored and administered safely. We found medication was stored securely. There were effective ordering, re-ordering, handling and disposal of medicines. On looking at people's care records we found medication information cards provided by the health authority on discharge from hospital and any medication allergies clearly recorded. A recent pharmaceutical audit concluded overall satisfaction of medication practices with a recommendation made for two signatories for any new medication added to the medication administration record (MAR). We saw this had been actioned. We found over the counter homely remedies where not included on the MAR charts which requires adding. On conducting a tour of the building we found prescribed emollient barrier creams in communal bathrooms. These were brought to the manager's attention and were immediately removed for return to pharmacy or returned to individuals personal possessions. None of the people living at the service self-medicate, however there are protocols in place regarding this and this would be considered on request following a capacity assessment. The district nurses oversees the safe storage of any medication required to be administered by health professionals. People are supported by staff to take prescribed medication however systems should be strengthened to ensure all medication taken is recorded.

Individuals are supported to maintain a healthy diet and fluid intake. People told us there was a varied choice of meals provided with hot and cold refreshments offered throughout the day. One person told us they enjoyed their porridge for breakfast and were always offered alternatives. The main meal was served at lunch time with a roast dinner prepared on the day of our visit. We saw fresh fruit available and biscuits offered with refreshments. Meal times were a positive experience where people were encouraged to have their meals served in the dining room with some people choosing to have their meals at a portable table in the lounge, this was respected by staff. Records were kept of meals provided, people's weight was monitored with remedial action taken when any concerns regarding weight gain or loss referred to the health professionals. We heard how one person was recently referred to the speech and language therapy (SALT) team following assessed difficulties with swallowing liquids. The home caters for specialist diets including food and drink preparations. Any food allergies, likes and dislikes are clearly recorded. People told us they

enjoyed a glass of whiskey as a bedtime drink each evening before retiring to bed. This was monitored and respected by staff. This evidence shows that people's nutritional needs are assessed and met.

### **3. Environment**

#### **Our findings**

People who use the service are cared for in a safe, warm and well maintained environment. The home is set within its own extensive grounds. We looked around the communal areas on the ground floor including the kitchen and bathroom facilities. An ongoing maintenance programme for refurbishment and redecoration was in place. There was ample outdoor seating areas for people to utilise during fine weather. External grounds were maintained to a good standard with preparations in place to provide winter flower pots. People who use the service can feel valued because they are cared for in a comfortable, clean and personalised environment.

The service has systems in place to reduce risks to health and safety. People live in a generally safe environment, with safety and maintenance checks including electrical, fire safety, legionnaires and water temperatures. During the inspection of the premises we observed items of potential risk of harm to people; we found portable hand sanitisers located in bathrooms and disposable aprons and gloves were not locked away. These were shared with the RI who told us none of the residents were at risk of harm as a result of these issues. The RI told us they do not provide a service for people with dementia and any person showing signs of the onset of dementia or behaviours that challenge would be referred to social services for reassessment and relocation. We saw that the home was awarded a food standard rating of 4 from the Food Standards Agency (FSA), when discussed with the RI we were told that the temperatures of the fridges were not within the required temperatures at the time of the FSA inspection. New fridges were purchased following the FSA inspection and we found daily fridge temperature recordings within the recommended range. We found that personal emergency evacuation plans (PEEP's) were in place and included reference to any specialist assistance required to ensure the safe evacuation. Contracts were in place for the disposal of general, clinical and contaminated waste. Call bells were located around the building and people were provided with hand bells whilst sat in the lounge to alert staff if they requested assistance. Health and safety processes are in place to promote people's well-being.

Security arrangements were in place which ensure individuals were safe and secure without compromising their rights, privacy and dignity. Care records and employee personnel records were kept securely. The home operates an open door policy but people are requested to make themselves known to staff and sign the visitor's book on arrival. This was verified on our arrival where we were requested to sign the visitors book. People's privacy and personal information is well protected including being confident they are safe from strangers entering the building.



## 4. Leadership and Management

### Our findings

The service was clear about its aims and objectives. We viewed the (SoP) which provided information about the services available, where and how these services are provided and the arrangements to support the delivery of the service. The SoP also included reference to providing services in Welsh. The management have a visible presence at the service on a daily basis and spend time talking to residents, staff and any visitors to the home. People have access to information about the services that are provided.

Individuals are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide the levels of care and support required to enable the individual to achieve their personal outcomes. We looked at the records of four care workers. Checks were completed including obtaining references from previous employers and checks from the Disclosure and Barring Service, (DBS), before care workers started work. Such records and checks help to safeguard people using the service. Care workers told us they were supported by the managers and training was provided. We saw evidence in the staff training matrix that care workers had received mandatory and specialist training. Certificates of training undertaken were retained in staff files to verify attendance. Annual mandatory training for care workers was last taken in October 2018 and due for renewal with the management arranging for all care workers to undertake the refresher training. We spoke with a care worker who told us they had an induction programme and attended various training including complaints and safeguarding. One care worker told us they had completed their Qualifications and Credit Framework (QCF) level 2 training and was hoping to move forward to QCF level 3 of the award. They told us they had completed training in food hygiene, moving and handling, first aid and safeguarding stating that they would share with managers if they had any concerns or observed any abuse. They told us *“They enjoyed their work”* and *“X and Y (managers) were very supportive”*. We looked at supervision records and found care worker development plans contained details of reflection of practice. This evidence shows the management promote good recruitment process and people benefit from a service where the well-being of staff is promoted.

There is generally effective management of staff and resources. We discussed the management of the service and support provided to care workers. In addition to an open door policy the managers work alongside care workers as part of their working week. The weekly rota is produced ensuring there are a mixed team of varying specialisms of staff. We observed good working practices and team work with care workers altering their rota's to support a colleague during personal circumstances resulting in them having to take time from work. Both managers were included on the rota to ensure there was continued support to the staff team and well-being of the residents. Formal one to one supervision in

accordance to the regulations are not conducted. The managers work alongside care workers on a daily basis and will have informal discussions and observed practice which is recorded as a supervision record and signed by both care worker and manager. We looked at a selection of these records which included topics such as reduced hours, request for training and reflective practice. Care workers told us they received supervision and support on a daily basis. The managers demonstrated their awareness of General Data Protection Regulations 2018 (GDPR) and we found confidential information retained on individual staff and people's records were stored securely. People told us they could talk to the manager and staff and share their concerns and contribute to the development of the service. This shows that the management ensure people using the service and staff contribute to the development and improvement of the service.

The managers were seen to have oversight of the service and aware of the needs of people living at the home and staff. The statutory guidance for service providers and RI's on meeting service standard regulations were discussed with the manager. These included the six monthly quality care review. The guidance sets out how providers of regulated services are required to comply with the requirements imposed by RISCA. Consideration should be given to reviewing RISCA and associated guidance, their compliance; this will be considered further at future inspections. The manager is committed to promoting safe practices and a culture of safety, but this could be improved in accordance to new legislation.

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

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

None

### **5.2 Recommendations for improvement**

We recommend the following:

- For the RI to familiarise themselves with the statutory guidance. In particular:-
- Regulation 36 supporting and developing staff. Arrangements should be made for staff to undertake their refresher training in mandatory subjects.
- Regulation 80 Quality of care review to be completed by the provider.
- All over the counter remedies should be included on the MAR documentation and recorded when administered.
- Prescribed emollient barrier creams and residents personal care products should be kept in their bedrooms or in the case of people receiving day care in their day bag.

## 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 23 October 2019 between 10:05 a.m. and 4:50 p.m.

The following regulations were considered as part of this inspection:

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

The following methods were used.

- We met people living at the home. We spoke with six people.
- We held discussions with the managers and spoke with three care workers.
- We looked at a wide range of records. We focussed on:
  - Two people's personal care records;
  - Four staff records;
  - Health and safety records, including fire safety records;
  - Training matrix;
  - Personal emergency evacuation plans.
- We reviewed the SoP and compared it with the service we observed. The SoP sets out the vision for the service and demonstrates how, particularly through the levels and training of staff, and so on, the service will promote the best possible outcomes for the people they care for.
- We conducted a medication audit of the safe administration, recording and storage of medication.

CIW is committed to promoting and upholding the rights of people who use care and support services. In undertaking this inspection, we actively sought to uphold people's legal human rights. Further information can be found on our website:

<https://careinspectorate.wales/sites/default/files/2018-04/180409humanrightsen.pdf>

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

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

## About the service

Type of care provided	Care Home Service
Service Provider	Tirionfa Residential Care Home
Responsible Individual	Janet Foulkes
Registered maximum number of places	11
Date of previous Care Inspectorate Wales inspection	This was the service's first inspection following its re-registration under the Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016
Dates of this Inspection visit(s)	23/10/2019
Operating Language of the service	Both
Does this service provide the Welsh Language active offer?	Yes
Additional Information:	

Date Published 16/12/2019