



Inspection Report on

Ty Penrhos

**2 Beddau Way
Caerphilly
CF83 2AX**

Date Inspection Completed

08/08/2019

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Description of the service

Summary of our findings

1. Overall assessment

Ty Penrhos provides people with safe and comfortable accommodation. The home is reasonably well decorated and maintained to a good standard. The outdoor space is equally well maintained.

People receive a good quality of care and support from warm, friendly and attentive staff. Staff are well supported in their roles and thus confident meeting the needs of all individuals living there. Care documentation is in place to advise staff of the actions they need to take but some documents would benefit from review and revision.

The home is well managed and there is a commitment on the part of the service provider and the management team to be candid in their dealings with others as well as to learning from mistakes or issues. There is a well-developed system of auditing within the home and the service provider maintains oversight of the quality of care provided.

2. Improvements

The previous inspection identified non-compliance with section 11 (1) of the Care Standards Act because there was no registered manager in post. This is no longer applicable.

3. Requirements and recommendations

Please refer to section five of this report for full details of the recommendations made.

1. Well-being

Overall, people's emotional well-being is supported because they have opportunities to socialise and to make choices about their everyday lives. We saw people engaged in activities and heard laughter and jokes during this. The people we spoke to were very positive about the service and the care they received. People have the opportunity to meet with staff to express any concerns or issues they may have. Many plans of care gave an insight into the person they referred to and this ensured staff were able to interact with people in a meaningful way. The plans could be further strengthened and this is outlined in the body of this report. The service provider ensures people have access to things that matter to them and works with people so they have as much control as possible over their everyday lives.

The arrangements to support physical health and well-being are good. People have prompt access to their GP through an in-home surgery and other professionals are consulted as required. This was evident from the care files we reviewed. The service seeks to be proactive and we saw steps had been taken to address falls where this was identified as an issue. Drinks were plentiful throughout the home and the people we spoke to were complimentary of the food. Medicines received by the home are kept under review and managed appropriately. We are satisfied the service provider has in place processes which effectively support people's physical health care needs.

Those living at Ty Penrhos are protected, as far as is possible, from abuse and neglect. The home's management are aware of their duties in this regard and staff are informed of their responsibilities through training. There is a robust policy which underpins good practice in this area. People we spoke to commented on feeling safe. The manager has good oversight of safeguarding matters and identifies, where necessary, lessons that can be learned from any issues. We conclude the service provider takes the safeguarding of the vulnerable people it cares for seriously and has in place the necessary arrangements to ensure people's well-being is supported in this area.

Ty Penrhos provides people with a safe home. Entry to the home was appropriately managed with a visitors' book people must sign. During the day there was a staffed reception desk for added security. Full access to the home and each unit was only gained through an electronic key-fob system. The home had ample space for wheelchair users and others using mobility aids. Corridors were hazard free. There was hand sanitizing liquid placed throughout the home and protective gloves and aprons were in ample supply. In our judgement the service provider ensures care is provided in suitable accommodation thus supporting people to achieve a sense of well-being.

2. Care and Support

Overall, people receive the care they require because there are up-to-date plans detailing what action is required from staff to meet individual needs. However, we found some of these plans could be improved. We reviewed a sample of care files. We noted there were personal plans for all significant areas of need. Several plans contained personalised information which highlighted for staff the person's likes, dislikes, wishes and preferences. Other plans were though, more clinical in approach. Whilst these generally detailed the support staff should provide, they did not give a sense of the person as an individual. We would recommend these plans are updated to include more information about the person. The plans were reviewed regularly, ensuring staff had the most up-to-date information. This meant staff were always clear about what was expected of them. The review process could be strengthened by consideration of how effective the plan had been since the last review. We recommend this approach is adopted moving forward. Nevertheless, the service provider has a current understanding of people's needs through the development and review of personal plans.

Support is provided to ensure people are assisted to remain as healthy as possible. The staff we spoke to demonstrated a good understanding of individual physical and emotional health care needs. Good arrangements were in place with the local GP practice, with a doctor visiting the home on a weekly basis. This meant people had prompt access to medical advice or treatment when required. Discussions with staff highlighted people's medications were kept under review. We carried out a partial audit of medication management practices and were satisfied these were sufficiently robust. One minor error was identified, however the nurse explained there were processes which meant the home would have identified this promptly. We also saw the home was proactive in addressing issues that may pose a risk to health. For example, we saw the measures that had been put in place in response to falls and noted these had resulted in a significant reduction. We conclude therefore, the service provider ensures people receive the care and support required to help maintain their physical well-being.

There are processes in place to help protect people from harm, abuse and ill-treatment. We reviewed the safeguarding policy, which should outline the procedure staff should follow in the event of a problem, and found this to be robust. Training was provided to staff on safeguarding matters and generally this was kept up to date. A review of the safeguarding file demonstrated the manager kept issues under review to identify any potential learning. One person we spoke to told us they "feel safe" at Ty Penrhos. We are satisfied the service provider has in place mechanisms to safeguard the vulnerable individuals to whom they provide care and support thereby promoting a sense of well-being.

Overall, people receive a good standard of care and support. We observed people had opportunities to do things that made them happy. People also had opportunities to form and maintain relationships. On the day of the inspection we observed a number of people attending an activity. This involved a visit by people with exotic animals. We saw people laughing and joking together. One person told us how much they enjoyed this activity. We observed people receiving visitors and saw people were able to meet with family and friends in private if this was what they preferred. There were drinks available to visitors and one person told us they "*always feel welcome*". Family members we spoke to were complimentary of the service provided by Ty Penrhos. One person commented "*I've got*

nothing but praise for the staff, whilst another told us *“care-wise, it’s wonderful”*. People living there were equally positive about their care. One person told us he was *“very happy with the care”* and he *“wouldn’t change anything about the home”*. The interactions we saw between staff and individuals were warm, relaxed and caring. The service provider ensures people are provided with the quality of care and support they need.

3. Environment

Ty Penrhos offers people safe and comfortable accommodation. We viewed areas of the home to which people have access. Corridors were wide and hazard free. Comfortable seating and drinks were set out at various points. We saw people's rooms were functional and contained items personal to them. Each unit had its own communal lounge/dining area and these were appropriately laid out. Dining tables were laid with flowers and menus. The home was clean and free of malodours. There was well-maintained outdoor space we were told was used for various events although it was not in use on the day of the inspection. We are therefore satisfied that the service provider ensures that each individual's care and support is provided in an environment with facilities that promote achievement of their personal outcomes.

We did not find it necessary to look at this theme further and will consider it in more depth at a future inspection.

4. Leadership and Management

The home is well managed with clear leadership provided to staff working there. The previous inspection had noted non-compliance with legislation due to a lack of a registered manager. This is no longer applicable and compliance has been achieved. Staff we spoke to were positive about the management at the home, with one person describing the arrangements as “*very supportive*”. We also noted from the most recent visit by the responsible individual that staff had spoken to him in positive terms about the manager and the constructive changes the home had undergone. Speaking to the manager demonstrated he was enthusiastic about his role and the home. The service provider has in place robust arrangements for the management of the home, which help to support good quality care and support for the people living there.

There are arrangements in place to ensure oversight of the service. The home is visited regularly by a ‘Quality Team’ who review all aspects of the service. They also produce an action plan to address any issues they identify. The responsible individual (RI) had last visited the home on 04 July 2019 and we noted he considered progress against that plan. At the time of our inspection, the regional manager also visited the home. We saw from our review of management documents that the manager also audited aspects of the service and identified areas of learning for the service where necessary. The RI then considered the audit findings as part of his quarterly monitoring visits. We conclude there are appropriate mechanisms in place to ensure the service provider has governance arrangements that support the smooth operation of the service.

Generally, people receive care and support from staff who have been appropriately recruited, supported and trained. We were satisfied following discussion with the home and regional managers, where staffing issues do arise, these are appropriately addressed. The home is candid in sharing information about any issues with the relevant authorities, including CIW. The records relating to staff supervision demonstrated that, on the whole, staff received regular supervision as is required. Supervision refers to a one-to-one meeting with a more senior staff member to discuss any issues, development needs or support required to ensure people are confident in their roles. This, in turn, contributes to a good quality service for people living there. We found the supervision arrangements at Ty Penrhos were sufficient. We noted staff also received training commensurate with their roles and that the service was putting in place career progression opportunities for its staff. We were advised the service would soon be able to offer appropriately qualified staff the chance to train as nurses after developing links with the university. The regional manager explained this was one of the initiatives they were putting in place to ensure staff retention and therefore continuity of care for people. The service provider takes a positive approach to ensuring people are supported by sufficient numbers of staff who are suitably fit and have the knowledge, competence, skills and qualifications to meet the needs of individuals.

5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

The previous inspection identified non-compliance with Section 11 of the Care Standards Act for failure to have in place a registered manager. We found compliance was achieved and this was no longer applicable.

5.2 Areas of non-compliance identified at this inspection

None

5.3 Recommendations for improvement

We make the following service improvement recommendations:

- Review and revise personal plans as necessary to ensure they are fully person-centred and outline the likes, wishes and preferences of the individual
- Consider revising the review process so that progress towards personal goals and the effectiveness of the plan are considered during the review
- Further action should be taken to ensure the service is able to fully provide the Active Offer

6. How we undertook this inspection

We undertook an unannounced visit to the home on 08 August 2019. During the inspection we gathered the evidence for this report from the following sources:

- The information held by CIW about the service
- A review of a sample of care records (8 files)
- Observations of daily life within the home
- A partial medications audit
- Conversations with people using the service and their visitors where appropriate
- Staff training records
- Audits completed by the service
- A visual inspection of areas of the home used by individuals
- Consideration of the outdoor space available to people
- A review of the statement of purpose
- Consideration of records held about staff including the supervision matrix
- Review of the safeguarding policy and relevant records
- Discussion with the home manager and regional lead

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

www.careinspectorate.wales

About the service

Type of care provided	Adult Care Home - Older
Registered Person	Hafod Care Association Ltd
Manager	Geraint Morgan
Registered maximum number of places	83
Date of previous Care Inspectorate Wales inspection	25 May 2017
Dates of this Inspection visit(s)	08/08/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	Whilst some Welsh speaking staff are available at the home, further action is required to ensure the Welsh Language Active Offer is fully achieved.
Additional Information:	

Date Published 17 September 2019