



Inspection Report on

Ty Ffynu

**7 Hatherleigh Road
Abergavenny
NP7 7RG**

Date Inspection Completed

31 March 2022

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About Ty Ffynu

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	PARKCARE HOMES (NO.2) LIMITED
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Ty Ffynnu is a care home for adults, which is able to accommodate up to four people. The manager and deputy manager both oversee the day-to-day running of this home, along with another small home in the same area. The home is well run and has a team of dedicated care staff who are supported to carry out their duties by the management team. Care staff describe the management team as supportive and approachable.

People are happy with the support they receive; they are encouraged to learn new skills and increase their levels of independence at a pace which suits them. Individuals are supported to maintain stable mental health and are confident in the care staff if they need someone to talk to.

The home is clean, tidy and well organised. Infection prevention and control procedures are maintained to minimise the risk of spread of infection.

Overall, care staff are safely recruited but we saw some gaps in the records of those who had been employed for some time.

The Responsible Individual (RI) has overall responsibility for the service. They have good oversight of the running of the home; they visit regularly and produce detailed, robust reports on what is being done well and what improvements are being worked towards.

Well-being

The service promotes individual's rights and encourages them to have choice and control over their everyday lives. People told us that they are happy with the care and support they receive. People have autonomy over their own lives and care staff know their likes and dislikes. Care workers understand the importance of getting to know people as individuals and encourage them to engage in activities which are beneficial to them.

Individuals receive the support they need to maintain their health and wellbeing. The service assesses people's care and support needs and any associated risks. These are clearly documented in personal plans, which are regularly reviewed. Individuals are supported to access medical and specialist services, as required. Care workers recognise when people need emotional support and provide this with kindness and compassion. Individuals are encouraged to achieve their personal goals which helps to develop their skills and independence.

People are encouraged and supported to maintain meaningful relationships with those closest to them. Individuals have their own rooms, which are personalised to their personal tastes. People have family photos, cards and collectables in their rooms, which gives a homely feel to their surroundings. We saw that some communal areas had recently been decorated and individuals were making group decisions on which pictures and mirrors would be fitted on the walls.

The service helps to protect people from abuse and neglect. Care staff complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the Wales Safeguarding Procedures and is kept under regular review. People are encouraged to share their views about the service they receive.

Care and Support

People receive the support they require, as and when they need it. Individual's files contain all the required information including risk assessments and personal plans of care. These are reflective of each individual and include their preference of how to be supported in all relevant areas. The plans are person-centred and give clear detail to staff on how best to support each individual. Personal plans are kept under regular review and updated as required. Evidence of such reviews needs to be improved. Care staff interact well with people, which evidences positive relationships. Care workers are patient, respectful and encouraging when supporting people.

Referrals are made to external health and social professionals as and when required. People are registered with a local general practitioner (GP). Records are kept of previous appointments with health and social care professionals for reference as required. Specialist health professionals visit every week to review people. Care staff have frequent opportunity to discuss the support they are providing with the relevant health professionals. This allows for expert analysis and review of day-to-day support and gives the care staff confidence in dealing with any situations they may find difficult. Detailed daily notes for each person evidence that care staff are providing care and support in line with people's personal plans. Record keeping is accurate and consistent in all areas required to support people to maintain their health.

Key workers are allocated to each person, who are the main point of contact within the care staff team. Key workers know people well and efforts are made to find the most suitable member of care staff for each person. We saw some detailed reports which reflect a comprehensive review of people's goals and how they are progressing towards achieving these. The manager told us a new system had been introduced for these reports which not all care staff are yet familiar with.

Systems are in place for the safe management of medication within the service. People have their ability to manage their own medication assessed and receive appropriate support as required, which helps to maintain their health. We saw that care staff complete medication records accurately.

Infection prevention and control procedures are good. Care staff wear appropriate personal protective equipment (PPE) and wash their hands regularly. Temperatures of care staff and residents are taken daily and regular COVID-19 testing is carried out on staff. We were asked for evidence of a negative lateral flow test result before we entered the property.

Environment

The home is clean, free from clutter and spacious. The layout provides sufficient space to meet people's needs to spend time privately or communally. The communal bathroom and the kitchen are well sized for the number of people living at the home. The environment is homely and well maintained; some rooms had recently been redecorated and a new carpet laid up the stairs. People's bedrooms are decorated to their own tastes and contain personal items including pictures, and collectables. People are allocated a budget to choose their own décor in their rooms when they move in. Some rooms have en-suite bathroom facilities.

People told us they enjoy living at the home, they find the environment homely, and it meets their needs. Two notice boards are well organised; they contain minutes of house meetings, chosen Welsh words, a quarterly newsletter and 'get to know staff' section.

The rear garden is well maintained with a level patio and area laid to lawn. A spacious smoking shelter and outbuilding for storage. Garden furniture appears to be sturdy and in a good state of repair. We saw that one person had planted some vegetable for use in the home.

People benefit from a secure environment; the front door is kept locked. We viewed the maintenance file and saw that all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency. Increased cleaning is taking place due to the COVID-19 pandemic.

Leadership and Management

People benefit from effective leadership and management. The service's statement of purpose accurately reflects the service provided. The manager is supported by a deputy manager with the day-to-day running of the home. Care staff feel valued and supported in their roles. We were told that the management team are very approachable and always there to help or advise care staff when required. Communication between the team is good and care staff enjoy their jobs. Throughout our visit, we saw there was a sufficient number of care staff on duty to support people.

The RI has undertaken regular quality assurance checks by visiting the home to talk to individuals and care staff and review documents. The RI completes detailed and thorough audits of the quality of the support provided as well as the wider running of the home. The reports highlight where the home is performing well and areas for improvement. These reports include information on what individuals have achieved in that period. This evidences the person-centred approach at Ty Ffynnu. The provider has relevant policies in place, which are kept under review.

The provider makes necessary referrals to external agencies as required and keeps the regulator notified of relevant matters in a timely manner.

We saw that care staff personnel files are well organised; however, do not all contain the required information. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. We will follow this up at our next inspection. Care staff are confident and skilled in their roles. They complete a range of training courses, including regular refresher courses in important areas such as safeguarding people at risk of harm. Training compliance is good, and the manager told us about some more specialist training which had been arranged for care staff to attend.

Care staff receive regular supervision with their line manager. This one-to-one support provides opportunity for staff members to discuss any concerns or training needs they may have and for their line manager to provide feedback on their work performance.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
35	The required pre employment records for care staff are not all currently held by the service	New

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