



Inspection Report on

Ty Nant Care Home

**53 Brook Street
Tonypandy
CF40 1RE**

Date Inspection Completed

29 June 2022

29/06/2022

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About Ty Nant Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Newcore Healthcare LTD
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	20 May 2021
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People receive care and support from a knowledgeable team of care staff and nurses, who have a friendly approach and create a relaxed atmosphere in the home. The staff team support people to interact with each other and engage with them in a variety of ways. People and their visitors gave positive feedback about their experience of the service. Nurses and care home assistant practitioners (CHAPs) liaise with a variety of external health professionals and implement their advice to provide holistic care. Most personal plans and risk assessments are detailed, and person centred, however there is some inconsistency in storing documents whilst a new electronic care system is being set up. Monthly reviews are meaningful. Staffing levels are currently being met by using agency care staff, which staff report to be both positive and negative. Some vacant posts have been successfully recruited. The environment is well maintained and homely. Equipment and utilities are fit for purpose. Staff supervision is up to date and regular sessions must be maintained. Staff have completed all required mandatory training. There is oversight and monitoring of the service by the Responsible Individual (RI) on behalf of the service provider. Preferred language of communication is recorded in care files and documentation is available bilingually on request.

Well-being

People are treated as individuals. The statement of purpose and resident's guide outlines the nature of the service and what can be provided. There is a complaints process in place that people or their relatives/representatives can utilise if necessary. Care files include information into people's history and their likes and dislikes. Personal plans describe the best way to care for each individual. Special diets are recorded in care files and by kitchen staff, and on the day we visited we saw kitchen staff were familiar with residents and what meal option they could have or would like. We saw care staff and nurses sit and talk to people. Themed activities and events are held in the home, and all staff engage and encourage interaction in communal areas throughout the day. On the day we visited, people were encouraged to watch staff compete in a 'Wimbledon' table tennis contest, and then play themselves if they wished. Others were painting tennis designs on to t-shirts.

People are supported to be as healthy as they can be by getting the right care as early as possible. We saw evidence of regular input from GP and community healthcare team, alongside referrals and correspondence with professionals such as dietetic support, specialist mental health team and urology. Advice and guidance given is shown in care documentation. Nurses and CHAPs have daily handover summaries which note any clinical issues. On the day we visited, staff were concerned about one individual's physical health and called a paramedic to assist.

There are systems in place to protect people from harm or abuse. Risks to individuals' health and safety are included in specific risk assessments. A current safeguarding policy is in place and safeguarding training is up to date. Staff told us they know when and how to raise a safeguarding issue. Incidents, accidents and events in the home are audited to ensure the appropriate referrals and notifications are made to external agencies.

The environment at Ty Nant supports people's wellbeing. Most people come downstairs from their bedrooms to the large lounge, dining room, and activities room on the ground floor. They are then able to choose to come to and from their rooms throughout the day. There is an outside area which is decorated in bright colours and is well maintained. Bedrooms have en-suite facilities and are decorated in a homely, personalised way.

Care and Support

People and their visitors reported a positive experience of the service being delivered at Ty Nant. They told us: *“Everything is good here, they lay everything on for you”, “[staff name] is top class, he’s very patient with me”, “I can talk to everyone here and I think they would help me”* and *“they could do with a bigger garden, but that’s the only thing I can say could be different”*.

Most care documentation is detailed and contains the information required to provide people with the right care at the right time. Personal plans and risk assessments are individual and note personal preferences regarding delivery of care. At the time of the last inspection, it was identified that staff needed to make more meaningful evaluations of plans. These evaluations now contain relevant information which informs progress towards people’s outcomes. An electronic care planning system is being implemented in the home. Due to some technical difficulties, not all documents have been transferred from paper, and therefore some recordings are disjointed. Care staff complete supplementary charts online, but daily summary notes and handovers are still recorded on paper. Permanent care staff and nurses know people well and know where to look for certain notes. However, there are agency care staff used by the home most days and they do not have easy access to all the information they may require before they start their shift. The manager advised that the electronic care system is being looked at by the service provider as a priority to ensure it is fit for purpose.

Medication is stored safely in individual locked cupboards in people’s rooms. The manager advised that they felt this reduces medication errors. There are medication policies in place to guide staff if needed. PRN (as required) medication protocols are in place and effects of administration are recorded. The CHAP showed knowledge in explaining people’s specific medication needs and the processes in place to meet these. The home encourages people to keep their own routines in the home and medication rounds support this.

There are systems in place to promote infection control and good hygiene. All staff complete regular COVID 19 testing, and personal protective equipment (PPE) is being used in line with the home’s infection control policy. Visiting is being facilitated in line with current Welsh Government guidance. Visitors also complete lateral flow tests prior to entering the service. Domestic and laundry staff have thorough cleaning schedules, and on the day we visited, the home appeared clean.

Environment

Care and support is provided in a location and environment with facilities and equipment that promotes achievement of people's outcomes. The home is secure from unauthorised visitors, and areas that may pose a risk to individuals are not accessible. There is a lounge on the second floor of the home, but most people spend the majority of their time in the large lounge and dining room area on the ground floor. Some people spend time in their rooms throughout the day as they choose. Bedrooms contain people's personal belongings. There is a lift to enable people to move around the home. An accessible decked area outside is painted in bright colours and well maintained to be a pleasant space to be in.

We saw that there is a schedule of maintenance and servicing in place to ensure that hoisting equipment and the lift are functional and fit for purpose. Fire equipment is checked, and alarms and lighting are tested regularly. Water systems are checked for temperature regulation and legionella. People have individual personal evacuation plans that are easily accessed in case of an emergency. There is a maintenance man on site to complete small jobs five days per week.

Leadership and Management

Staff members are suitably trained and have opportunity for individual support and discussion with their line manager. Most staff spoke positively about their team, and their experience of working in the home. Some did not feel they had good communication with the manager. A deputy manager has recently been recruited. They told us that they would be working on the floor as well as in the office to understand issues nurses and care staff face and be able to respond. At the time of the last inspection, frequency of supervision sessions were not meeting the target set by the service. We found that most staff members are now up to date with their supervision sessions, which needs to be maintained. Most training completed by staff is e-learning. However, the manager advised that face to face training is starting to be held again now that COVID-19 restrictions are relaxing, and we saw a number of staff had been booked onto a manual handling training course the following week.

People are supported by a consistent core staff team who work well together. However, due to the demands of COVID 19 some staff members have left, and it has been difficult for the service to recruit new ones. We noted that staff morale was variable due to staffing levels and use of agency staff. At the moment, agency staff are being used consistently, and the knowledge and skills of these staff can vary. We discussed the ways the manager oversees the agency staff when on shift and gathers feedback from permanent staff about how well they are working to try and improve morale in this area. All required recruitment information is held on file, however, some staff are working without an up to date Disclosure and Barring Service (DBS) certificate. We told the provider this is an area of improvement and we will follow this up at our next inspection.

There are arrangements in place for the oversight of care and support being delivered in the home. There is a clear management structure for the home. The deputy manager has recently been recruited and recruitment for other staff members is ongoing. Management complete regular audits of multiple aspects of care such as incidents, accidents and medication. The RI undertakes monitoring visits to the home and attends general staff meetings every two months. The monitoring visits note consultation with people living at the home, staff and their families, however their feedback could be recorded in more detail. Six monthly quality of care reports are completed to analyse the home's progress towards its identified outcomes.

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	All staff members should be appropriately vetted to ensure fitness in their roles.	New

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