Arolygiaeth Gofal Cymru
Care Inspectorate Wales

# Inspection Report on

**Upper Tumble**
**Llanelli**
**SA14 6BZ**

## Date Inspection Completed

7 February 2022

# About Gwendraeth House

| | |
|---|---|
| Type of care provided | Care Home Service<br>Adults Without Nursing |
| Registered Provider | Ty Gofal LTD |
| Registered places | 2 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | Manual Insert |
| 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

Overall, this service endeavours to support people to maintain their independence and live their lives as they choose. Care workers support people to do things that are important to them. The staff team focus on each person's needs and want to make a positive difference to people's lives. Good communication channels are evident throughout the service and there are robust systems in place to monitor the quality of care provided. Care workers feel well supported by the manager and all employees attend regular training to remain up-to-date.


## Well-being

People appear more than satisfied with the service they receive. Care workers support people to speak for themselves. Personal plans reflect each person's support needs, hobbies and goals in life. Each person is as busy as they wish to be. As there have been restrictions on activities and trips out during the pandemic, care workers have adapted their support to meet Public Health Wales guidelines, arranging safe indoor activities instead. Care workers are aware of the importance of each person's well-being. They listen to people's opinions and have a good knowledge of each person they support. They are respectful and professional in their approaches.

Care workers invite people to be involved in decisions about their support. Senior staff members plan care and support in consultation with people and/or their representatives/families. People and their relatives know about any changes made to support plans because they are actively involved in all decisions made by the care team.

People are as active as they wish to be. Care workers encourage and support people to make choices and decisions about how they spend their time and care records describe activities people have said they enjoy. One person who loved to go out shopping, were out all day on the first day of the inspection.

People are safe and their privacy and personal information is well protected at all times. They say they feel safe with their care workers. Care workers are familiar to people. This gives each person confidence their needs and personal preferences are understood.

## Care and Support

Overall, there is an accurate and up-to-date plan for how care workers provide people's

support, to achieve their best possible outcomes. The provider considers a range of information to ensure they can meet people's needs before their support is put in place. This includes obtaining information from relatives and external healthcare professionals such as social workers. From this, senior staff develop care records to describe people's support arrangements and requirements. It is clear people can follow their own routines as they wish and say the staff team support them well. In order to remain current, all care records are regularly reviewed, more frequently wherever support needs changed. This means people can expect to receive the right support at the right time.

The provider has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the service and care workers may refer to infection management policies when necessary. Measures are in place to ensure people are kept safe from Covid-19 infections as far as possible: this includes the monitoring of all visitors and the appropriate use of personal protective equipment (PPE) by all care workers.

As far as possible, the service takes steps to safeguard people from neglect and abuse. Risks to people's health and well-being are clearly recorded and minimised, so people can maintain their independence as far as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They say they would go to the manager initially, but would be confident to go to external agencies such as the safeguarding team if they thought they needed to. Employee training records evidence safeguarding training has been completed.

## Environment

People live in a domestic-sized detached house, which meets their needs and supports them to maximise their independence. The home is safe, warm and clean. People say they feel comfortable and happy. We visited all communal areas. The home is clean, warm and

comfortably furnished. To the rear of the home, an enclosed garden area with a shelter is available for people to use.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front door bell before gaining entry and record their visits in the visitor's book when entering and leaving. Care records are stored securely and only available to authorised employees. Employee personnel records and other personal information is stored securely in the manager's office

Clear infection control procedures are in place and care workers use all relevant personal protective equipment when providing personal care. Fire exits are free of obstructions and we were shown evidence of weekly fire alarm tests. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002. There are clear instructions displayed in the home on what to do in the event of a fire and senior staff members complete regular audits of the environment.

## Leadership and Management

Overall, the provider has a clear vision of the support it provides, and a positive regard to each person receiving support. The service is committed to developing a culture which ensures the best possible outcomes are achieved for people. There are clear systems in place designed to monitor peoples' well-being and the quality of support each person receives. The Responsible Individual (RI) visits people as part of their responsibilities to

check the overall quality of support provided. Records of these visits show a variety of discussions with people and the staff team. Three-monthly employee supervision records show all care workers are regularly given the opportunity to discuss any issues they wish to raise, in a formal setting and have the conversations recorded. The RI identifies all actions needed to improve people's well-being into a six-monthly quality of care report.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work - these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to the 'All Wales Induction Framework for Health and Social Care.' Care workers undertake specific training relevant to the people they support. Care workers say this provides them with a good understanding of their roles and responsibilities and the best ways to support people. People and their relatives may complete surveys to ask for their opinions on the quality of support they receive. Responses from the most recent surveys were complimentary. All findings are summarised in a six-monthly quality of care report, which identifies all actions to be taken and all planned improvements for the service.

| 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 |
| | Regulation 36(2)(c)(d)(e)(f) Supporting and developing staff 36(2) The service provider must ensure that any person working at the service (including a person allowed to work as a volunteer):- (c) receives appropriate supervision and appraisal; (d) receives core training appropriate to the work to be performed by them; (e) receives specialist training as appropriate; (f) receives support and assistance to obtain such further training as is appropriate to the work they perform. | Achieved |
| 35(1)(a) | Regulation 35 (1)(a) 35(2)(d) Fitness of staff. The service provider must not employ a person under a contract of employment to work at the service unless that person is fit to do so and the person has provided full and satisfactory information or documentation, as the case may be, in respect of each of the matters | Achieved |

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| | specified in Part 1 of Schedule 1 and this information or documentation is available at the service for inspection by the service regulator. | |

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

**Date Published** 09/02/2022