



Inspection Report on

Llandaff House Care Home

**6 Mwrwg Road
Llangennech
Llanelli
SA14 8UA**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

03/12/2024

Welsh Government © Crown copyright 2024.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gov.uk You must reproduce our material accurately and not use it in a misleading context.

About Llandaff House Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Cathedral Care Limited
Registered places	21
Language of the service	Both
Previous Care Inspectorate Wales inspection	4 December 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Llandaff House Care Home provide good-quality care from motivated care staff, with whom people have developed positive relationships. People are happy and feel safe at the service. There is a relaxed atmosphere which helps people and visitors feel at ease. Each person is encouraged to make their own decisions in how they spend their time. People have choice and are treated with dignity and respect.

The environment is safe, secure and well-maintained. The service are currently reviewing their fire safety provision. A maintenance and renewal programme identifies areas that require improvement and these are addressed. The service uses the space to support peoples' wellbeing.

Arrangements for the effective management and oversight of the service are in place. The Responsible Individual (RI) is a frequent presence at the service and prepares a quality-of-care review which identifies areas for development at the service.

Well-being

People spoke positively about the care provided by care staff at the service. People using the service told us that the staff are ‘*nice*’, they are ‘*happy*’ and receive appropriate, kind, and caring support from care staff they know. People are treated with dignity and respect. Motivated care staff know people they support well and enjoy spending time with them. Meaningful interactions were observed, with care staff responding sensitively to any issues. People can communicate in Welsh with Welsh-speaking staff, ensuring they feel comfortable and understood. The service recognises the importance of Welsh-speaking care staff and has identified additional learning opportunities for staff to develop their Welsh language skills.

People's individual circumstances are considered in their care and support. People are happy and can do the things that make them happy. Empathy and care is shown to people, who have as much autonomy over their own lives as possible. People are supported to choose where and how they would like to spend their time. An activity co-ordinator organises individual and group activities. At inspection, we observed a clothes show where people updated their wardrobes according to their fashion choices. People are supported at mealtimes, with joyful catering staff taking steps to ensure people's preferred meals are on the menu. A person using the service told us, “*The food is lovely. I like the bolognaise*”.

Deprivation of Liberty Safeguards (DoLS) are in place for people who do not have the capacity to make decisions about their care and accommodation. We observed care staff sensitivity when supporting people about aspects of their care and support. A person using the service told us, “*The staff are very nice*”.

People are safe and protected from abuse. Care staff are safely recruited and well-supported. Staff are registered with or in the process of applying to register with Social Care Wales (SCW), the workforce regulator. All staff access safeguarding training in a timely manner, with the service being pro-active in identifying varied opportunities for staff to remain knowledgeable. Care staff have clear policies and procedures to guide them.

Care and Support

People are happy with the care and support they receive at the service. Personal plans are centred around the individual, detailed, and contain all necessary information for care staff to meet people's needs. Preferences are documented on how support should be provided. People's life histories are explored and used to support tailored care and support. Individuals and their representatives are involved in developing their personal plans, where possible. Personal plans are reviewed regularly and updated in a timely manner. Care staff are dedicated, kind, and caring, providing personalised support as outlined in personal plans. A member of care staff told us, *"I love my job. I get plenty of time to do the jobs I need to do. And I get time to have a natter with people, which I think is important"*.

People have the freedom to choose how to spend their time; in one of the communal areas, engaging in activities, socialising, watching tv or spending time in their own rooms. An activities co-ordinator is employed to support people in accessing individual or group activities of their choice. We heard about visits from a therapy dog, which is valued by people at the service. People benefit from a positive dining room experience and are encouraged to socialise together at mealtimes. The kitchen and care staff are knowledgeable of people's dietary requirements.

People's physical health and wellbeing is promoted. Care records show people receive support to access social and health care professionals when needed. The service understands people's health conditions, the support they require and can identify changes in the usual presentation of people they support promptly. People are encouraged to be as healthy as possible. A visiting health care professional told us, *"They really know the people they care for. It's a lovely service"*.

People are protected from harm and abuse. Care staff have completed safeguarding training and have a clear understanding of how to report matters of a safeguarding nature. Infection prevention and control procedures are good. Care staff have access to personal protective equipment (PPE) if required. Deprivation of Liberty Safeguards (DoLS) are appropriately in place for people who do not have capacity to make their own decisions about aspects of their care and support. These keep people safe.

Procedures for the safe management of medication within the service are in place. We saw that controlled drugs are accurately recorded, medication is stored safely and care staff complete medication records. Routine medication audits review the safe administration of medication, with any identified issues being addressed by management.

Environment

The environment supports people to achieve their personal outcomes. The home is welcoming, clean, and well-maintained. The home is spacious, with comfortable communal living areas. At the time of the inspection, Christmas decorations, trees and Christmas music was being enjoyed by people and staff at the service.

People have space for socialising, privacy and meeting with their family members. The home benefits from two large lounge areas, as well as spaces for smaller gatherings offering privacy and variety. There is a spacious courtyard to the rear of the property for people to enjoy some fresh air in warmer weather. Bedrooms are decorated to people's personal preferences, with photographs, ornaments and items of interest. The service ensures routine maintenance is carried out. At inspection, we saw areas being developed at the service, including refreshing a corridor and renewal of carpets. A new bath has also been installed at the service.

People benefit from a safe and secure environment. There is appropriate oversight of health and safety at the service, with measures in place to identify and address risks to individuals' health and safety. The home is free from hazards that would pose a risk to people. Unauthorised visitors are prevented from entering the building, as visitors must ring the doorbell to gain access. Regular checks are conducted around the home to promptly identify and resolve any issues. Recommendations identified following a recent Fire Officer's report are being addressed. Individuals living at the service have appropriate personal emergency evacuation plans (PEEP) in place. The service have a review of evacuation procedures commencing.

The service promotes hygienic practices and manages the risk of infection. Staff have access to Personal Protective Equipment (PPE). The home has a five-star rating from the food standards agency which means that hygiene standards are very good.

Leadership and Management

People receive accurate information about the service through a written service user guide. This guide provides essential details to those who use the service, their relatives, and others. A Statement of Purpose (SoP) accurately reflects what people can expect from the service.

The service has strong quality assurance arrangements in place. Effective oversight ensures a good-quality service, focussed on meeting the needs of individuals and promoting their wellbeing. The responsible individual (RI) is a frequent presence at the service and spends time talking to people and staff. The most recent quality of care review identifies areas for development and improvement and uses the views and experiences of people to develop and improve the care and support provided.

The manager is suitably qualified for the role and registered with Social Care Wales, the social care workforce regulator. The manager knows people well and demonstrates commitment to providing strong leadership, ensuring effective day-to-day management and oversight of the service takes place. Care staff told us that management are approachable and always there to help or advise. A member of care staff told us, *"The staff team here are great and management. We are a team"*.

The service has appropriate procedures in place for the safe recruitment of staff. Disclosure and Barring Security (DBS) checks are in place and current. Care staff are registered with SCW or the application is being processed. Staff personnel files contain information required by Regulations to ensure they are safe and fit to work at the service.

Throughout our visit, we saw there was sufficient care staff on duty to support people and the service does not rely on agency staff. Many members of staff are long-standing staff members. Newly appointed care staff complete an induction programme which includes training and shadow shifts. The service have strengthened oversight of care staff training needs, with training records showing care staff have access to a variety of mandatory and need-specific training opportunities. This ensures all staff have the required knowledge and skills. A member of care staff told us, *"We get the support we need. We get supervision and lots of training. I am happy here"*.

The service ensures that all staff are provided with support and development opportunities. Care staff are provided with formal one-to-one support, though care staff noted management are always available for support and guidance. 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.

Area(s) for Improvement		
Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A
16	The service provider cannot be assured that people and/ or their representatives have been involved in the review of the care and support being received at the service.	Achieved
36	The service provider cannot be assured that all care staff receive training which fully equips them with the knowledge and skills to undertake their role.	Achieved

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 06/01/2025