Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Llys y Tywysog Care Home

Llys-y-Tywysog
Clos Pengelli Grovesend
Swansea
SA4 4JW

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

11/10/2024

About Llys y Tywysog Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Barchester Healthcare Homes Limited
Registered places	54
Language of the service	Both
Previous Care Inspectorate Wales inspection	[10th March 2024]
Does this service promote Welsh language and culture?	This service anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

Llys Y Tywysog is a very welcoming and homely residential care service. People told us they are very happy and are complimentary of the care they receive. There are comprehensive, up to date personal plans in place which reflect people extremely well, are outcome focused and fully describe how they would like to be supported. People told us they and their advocates are always consulted about decisions regarding their care. The service employs a skilled staff team who are appropriately trained to meet people's needs. Staff are supported through formal and informal discussion and told us they feel fully supported and confident in their roles.

The service is very homely and offers lots of indoor communal space along with safe outdoor areas where people can choose to spend their time. There are robust maintenance procedures in place and the provider is very proactive in ensuring the environment continues to be safe and meet people's needs.

The Responsible Individual (RI) and management team have an exceptionally strong presence in the service. They work extensively with people, their families, and staff to gather feedback about the service which informs any required improvements. There are comprehensive quality of care oversight procedures in place to ensure a high-quality service is provided.

Well-being

People have a voice and are treated with dignity and respect. People told us they are supported to make decisions about their daily life and are fully involved in their care. They are regularly asked to submit anonymous feedback cards about their care, which are kept in a feedback file and routinely reviewed by the management team. There are 'resident ambassadors' in place who are elected by people living at the service to be their spokespeople. People can discuss any concerns they may have about the service and are invited to attend monthly meetings. People consistently told us they found the service to be outstanding and said, *"Staff are lovely, I can't fault them, they always treat us with respect"* and "*I can't believe I've landed in such a marvellous place".*

People's physical and mental health, and emotional wellbeing is consistently promoted. Where needed, assistance is sought from other healthcare professionals such as GPs, district nurses and physiotherapists. We saw detailed and informative records of people being supported to attend healthcare appointments. Visiting professionals told us they had excellent professional relationships with the service management, communication between themselves is highly maintained and they believe people are fully involved in decisions about their care. Visitors are encouraged and we were told there are no set visiting times.

People live in a homely, safe and well-maintained environment that consistently promotes their well-being. There are several communal areas within the service where people can spend time. We saw these areas being used for different purposes. People can choose to get involved in activities and socialise with others, or they can spend time relaxing in quieter communal areas. There is a hair and beauty salon within the service which people said they very much enjoy using. There is also a wellbeing area which people can access when they like. People have unrestricted access to a secure and accessible outdoor area. Bedrooms are decorated and personalised according to their individual tastes.

People are consistently protected from harm and neglect. There are excellent systems in place to keep people safe, including keypad operated doors, secure outdoor areas, sign in/ out procedures for visitors, and robust infection control procedures to minimise any risk of cross infection. Staff receive comprehensive safeguarding training and are confident in reporting any concerns they have in relation to this. The provider has clear policies and procedures in place that are reviewed routinely. There are robust checks in place to ensure the service remains homely and welcoming whilst being safe and clean.

Care and Support

People are supported in the way they prefer with personal plans and risk assessments that fully reflect their needs. A very thorough initial assessment is completed with people and their families prior to care being provided. This captures people's needs and aspirations and is used to develop the personal plan. Personal plans are reflective of the person, up to date and reviewed regularly. Very detailed risk assessments are available and correspond with these plans. People and their families or representatives told us they were fully involved in the review of their plans and regularly consulted about their care and support. "Getting to know me" booklets are kept in people's bedrooms and provide an in-depth description of the person, including their social history, photographs of the things that are important to them and their current likes and dislikes.

People can do a wide range of things that matter to them, and the service actively seeks new opportunities and positive, enriching experiences for people. We saw people getting involved in a wide variety of activities they enjoy, including a beauty session, bingo, quizzes and chit and chatter mornings. People told us *"there is always something going on that we can get involved in".* The service holds monthly meetings where people have time and are encouraged to give feedback on existing activities and make suggestions for others. Meeting minutes show a variety of proposals which were later added to the activity plan. People are asked during monthly meetings to make a wish that they would like to come true. This wish is then placed on a 'wishing washing line' and displayed in a communal area. Each month the service aims to make one wish come true and encourages other people to join in. To date, wishes achieved have been swimming, a visit to Folly Farm and a visit to a nearby motorcycle shop. People spoke to us fondly about their wishes coming true and we saw photographs and articles of these achievements in the service's newsletter.

The service actively promotes the Welsh language. The service employs Welsh speakers and there are weekly Welsh language lessons for those who would like to learn. People told us *"I've recently started the weekly Welsh lessons and I'm really happy about it".* There is a dedicated "Welsh corner" in one of the communal areas where people can access Welsh language materials and practice their Welsh language skills.

There are safe systems in place for medicines management. Medication is stored appropriately in designated locked areas. There is an appropriate medication policy and procedure in place which is reviewed annually. We saw a history of daily medication room and fridge temperatures, and these were within the correct range. Staff who administer medication are appropriately trained to do so.

Environment

Care and support is provided in a location and an environment that consistently promotes and enables people to regularly achieve their personal outcomes. We found all areas of the service to be spotlessly clean, pleasantly decorated and clutter free. The environment is maintained to an exceptionally high standard by a dedicated maintenance team. All bedrooms are personalised to the taste of the individual and each has an en-suite toilet. There are a wide variety of communal areas where people can relax and socialise if they wish. A wellbeing room is available as a dedicated area where people and staff can access when needed. Communal areas have hot and cold drinks and a selection of freshly made cakes on offer for people at all times. There is a well-presented spacious dining area which offers a very pleasant dining experience. A daily menu is displayed on entry and a menu placed on each table. The kitchen is separate from communal areas and well-established infection control measures seen.

There is a well-maintained, large, secure and accessible outdoor area which people can access unrestricted. People told us they often make good use of this space, and we saw ample sturdy seating areas along with raised flower beds. People told us they can get involved with gardening if they wish and can join the gardening club. There are a range of features in place to support people living with dementia. Adaptations and equipment are available where needed and we saw service records for these.

The environment is safe, secure and there are robust processes in place to ensure health and safety checks are completed and documented. The service has a keypad entry system in place and a visitors' book. This is to ensure the safety of people is maintained and to comply with fire regulations. We saw mandatory fire safety checks take place routinely and a fire drill had taken place recently. Required certificates were available and up to date including gas, fire detectors, fire extinguishers, electricity and electrical equipment. Water temperature checks are routinely taken and documented, and little-used outlets are flushed weekly. The service completes quarterly checks of water samples for legionnaires disease. Personal emergency evacuation plans (PEEPs) are in place for people. Laundry facilities are kept in a separate area and away from food preparation areas. The home has a current food hygiene rating of 5 (very good). We saw appropriate storage for control of substances hazardous to health (COSHH). These are kept in a designated locked area and corresponding safety data sheets are available. Staff wear appropriate personal protective equipment (PPE).

Leadership and Management

The provider has consistent and very strong governance arrangements in place to ensure the smooth operation of the service. The RI visits the service regularly and speaks to people, families and staff to gather feedback about the service. They place great importance on engaging with a range of stakeholders which informs their regulatory visit reports and their quality of care reviews. These are completed to a high standard and give a good picture of the performance of the service. Areas of improvement are identified and actioned promptly. The RI is supported by an experienced and dedicated manager who is committed to driving improvements within the service. This is achieved through regular auditing and swiftly addressing any shortfalls, along with seeking feedback from people, their families and staff and acting upon this.

There is very effective oversight of financial arrangements and investment in the service. The environment is very well maintained, and we saw there was ongoing refurbishment taking place at the service. We saw the downstairs bathroom being extensively renovated and the manager explained the plan for this area. The manager told us there is continuous investment by the provider to maintain the service to a very high standard. Staffing levels are sufficient and are kept under review as people's needs change. People told us staff have enough time to care for them the way they prefer. Staff told us overall they feel they have enough time to spend with people and they don't feel rushed.

People receive care and support from an experienced and highly competent staff team who have appropriate knowledge and skills. Recruitment is robust and necessary documents are in place. Staff files contain evidence of appropriate recruitment and background checks. Up to date Disclosure and Barring Service (DBS) checks are in place. All staff receive comprehensive induction training when starting in their roles followed by ongoing training. Records show staff receive a range of mandatory and service specific training through online and face to face sessions, which is delivered by the organisation's dedicated trainer. Staff told us they have excellent training and can ask the manager for further training if needed. The service adopts an innovative way of reducing the use of agency workers during staff shortages. This is through a 'whole house approach' where staff from each department are trained to work in other departments within the service, ensuring consistency of care as much as possible.

The service has a very committed staff team who feel supported in their roles. We saw that staff receive regular supervision, appraisal and wellbeing discussions. Team meetings are regularly held, and two-way discussions actively encouraged and promoted. We spoke with staff who consistently told us they feel highly valued and supported in their roles. They told us *"I feel really supported; the manager's door is always open"* and *"we have a good team here; we try to help each other as much as possible".*

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	N/A

	inspection	

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 10/12/2024

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	N/A

	inspection	

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 10/12/2024