



Inspection Report on

Tan Yr Allt Lodge Ltd

**Tan Yr Allt Lodge
14 Alltwen Hill
Pontardawe
Swansea
SA8 3AB**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

24/02/2025

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About Tan Yr Allt Lodge Ltd

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Tan Yr Allt Lodge Ltd
Registered places	26
Language of the service	Both
Previous Care Inspectorate Wales inspection	27 June 2023
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

People receive an excellent standard of person centred care and support at Tan yr Allt Lodge. People and their relatives told us they are extremely happy with the care and support provided. Nurses and care workers told us they receive a good standard of support from the management team. Care planning processes are robust and thorough. There are good staffing levels that correspond with the Statement of Purpose (SoP). A competent and well trained team of nurses and care workers work in the home. There are highly effective quality assurance processes for oversight of the service provided and a dedicated management team. The accommodation is purpose built, well maintained and presented to a high standard. There are well-kept grounds that people can safely access. Bedrooms are personalised to the taste of the individual. There are beneficial and rewarding organised activities people can participate in. People are safe and staff understand the importance of safeguarding and reporting any concerns. The building is secure with all entrances and exits locked and alarmed. There are robust infection control procedures in place and the home is clean, well-ordered and clutter free throughout.

Well-being

People's independence and choice is promoted and upheld in the service as far as possible. Managers, nurses and care workers listen to people's opinions about their care and support and are aware of the importance of each person's well-being. There are extremely well developed and established mechanisms in place to ensure people and their representative's choices, views and voices are heard and respected. For people who lack the ability to be fully involved and consulted, the service fully aligns with the appropriate legal duties and legislation.

People receive an excellent standard of care and support from dedicated, well trained and supported staff. All feedback gathered as part of the inspection is overwhelmingly positive about the care and support people receive. There are very thorough and detailed personal plans with related health care and risk planning documentation. The service has well established and strong links with local community health care providers. This is complimented by having an in-house team of experienced and skilled therapeutic professional practitioners who visit the service regularly. Care workers and nurses receive a wide range of core and specialist training aligned with the needs of people. There are extremely thorough quality assurance processes in place and associated detailed reports.

People are protected from harm as far as possible. There are very robust and detailed safeguarding and whistleblowing policies and procedures in place for staff to follow. Staff understand their duties to report concerns and receive regular safeguarding training. The provider notifies the relevant external bodies including Care Inspectorate Wales (CIW) of any concerns impacting on people or the service.

People engage in activities that matter to them and enhance their wellbeing. We saw activity schedules and photographs of recent and past organised events. The service is currently recruiting for a new full time activity coordinator which will further enhance opportunities for people. The service is complimented by having access to adapted vehicles to help support people to visit and participate in beneficial community activities.

Care and Support

People receive an excellent standard of care and support at Tan yr Allt Lodge. We completed observations and spoke to relatives during the inspection. A relative told us *"The manager is really good, no concerns or complaints...very happy with the care and support provided"*. Another relative stated *"they are highly supportive and constructive. The managers are very easy to relate to and I have no concerns at all"*. Positive, respectful and caring interactions were observed between care workers and people throughout the inspection.

People's care and support needs are clearly documented in a detailed, thorough and regularly reviewed online personal plan. A sample of personal support files viewed contain very strong personalised information regarding likes, dislikes, care and support needs and risks. Staff complete separate personal plan review forms that fully include the contribution of people and relevant others. A 'keyworker' system is in place this means there is an identified care worker for each person. This further enhances person centred care planning and outcomes for people. There is very comprehensive information regarding health care needs such as pressure area care and specific risk assessments for staff to follow. The service has highly effective links with the local GP surgery. There are thorough and robust pre-admission procedures to ensure the service can fully meet the care and support needs of people.

People are supported by a service that provides appropriate numbers of staff who are suitably fit and have the knowledge, competency, skills and qualifications to provide a very high standard of care. The provider has a well-established team of highly skilled professionals including physiotherapists, occupational therapists, behavioural practitioners etc. This enhances and compliments the care people receive. We observed good staffing levels aligned with the needs of people. There are always registered nurses in place with a varied range of expertise and professional backgrounds. This strengthens service delivery and enhances outcomes for people.

As far as possible, people are safe and protected from abuse. Care workers have been through the provider's rigorous recruitment process. All care workers can access policies and procedures to understand their responsibility to protect vulnerable people. They have regular safeguarding training updates. They told us senior staff members support them well and are always available for advice as necessary.

The home has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers can refer to infection management policies when necessary. All measures are in constant use to ensure people are safe from infections and the building is clean and odour free throughout. There are very robust and safe medication storage and administration practices.

Environment

Tan yr Allt Lodge consists of three separate floors, each catering for people with specific needs. All areas are very well presented, warm, clutter free, clean and well maintained. We observed people relaxing and enjoying various activities in the communal areas. The layout of the home meets people's needs extremely well, being purpose designed and built. Bedrooms are spacious and personalised to reflect people's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture. Facilities and equipment promote each person's independence as much as possible. The corridors are wide to help people with reduced mobility and accommodate the equipment people regularly use, such as hoists and standing aids. Externally, there is a patio, smoking shelter and an accessible garden with decking. We viewed the kitchen and food preparation areas and were informed there is a current food hygiene rating of five in place. This means there are very high standards in place regarding food storage, handling and cleanliness. The kitchen staff have a good knowledge of people's dietary needs including specialist requirements such as diabetes and swallowing difficulties.

The environment is safe, secure and there are very robust processes in place to ensure checks are completed and documented. Safety certificates for gas installations, lift operation, fire alarms, hoists and slings, portable appliance tests (PAT) are in place. We saw a very detailed comprehensive spreadsheet containing oversight of all maintenance, accidents, infection control, fire procedures and health & safety in the home. We saw cleaning products are stored safely, appropriately and according to control of substances hazardous to health (COSHH) regulations. There is a large, dedicated laundry room and soiled items are separated from clean, thus observing good infection control. Fire alarm checks are completed regularly and documented accordingly. The provider has a dedicated maintenance team onsite. This means any repairs can be addressed quickly and there is a system in place for staff to report any building maintenance issues.

Leadership and Management

There is highly effective oversight and governance of the service by the management team and Responsible Individual (RI). Policies and procedures are very detailed and robust covering areas such as safeguarding and complaints. All policies viewed are thorough and reviewed regularly. The RI and managers are active and visible in the service. We spoke to a range of staff working in the service who all gave extremely positive feedback about the support and training they receive. The service has very robust internal and external quality assurance procedures and processes to ensure the service provided is of a very high standard and safe. We saw written reports that confirm this and the manager informed us the RI is extremely supportive and regularly visits the home. At the time of inspection, the manager told us they are recruiting for a vacant deputy manager post. The current SoP accurately describes the service provided. We read very detailed reports such as quality of care reviews that cover areas such as consultation with people, staff, quality improvement, safeguarding and accommodation, with clear related actions. People and their relatives may complete surveys that ask for their opinions on the quality of support they receive. Responses are overwhelmingly positive about the service. Communication across the service is highly effective with newsletters, a detailed written guide to the service and regular planned staff meetings and handover arrangements.

People are cared for and supported by extremely well trained and managed staff. We spoke to care workers and nurses during the inspection. Feedback was overwhelmingly positive about the support received from managers, the culture in the service and quality of training received. A care staff member told us *"I like working here. I like the staff and people I support. I feel comfortable here it is a happy place."* A nurse told us *"Very well supported. I am on a learning curve and others are really supportive including the manager. The RI is very approachable."* Staff records are kept on a secure online electronic system. Records indicate new care staff receive a thorough induction aligned with the All Wales Induction Framework (AWIF). Staff receive thorough training in subjects such as dementia care, emergency first aid, safeguarding etc. Staff files contain the appropriate recruitment information and evidence of checks including current Disclosure and Barring Service (DBS) certificates. All staff are registered with Social Care Wales (social care regulator in Wales). There is good practice in relation to staff supervisions and appraisals taking place. The service provides the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it - some people in the home and some staff members speak Welsh. All policies and procedures, including the SoP are available in Welsh.

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	
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