Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Timothy House

Cardiff

Date Inspection Completed

19/11/2024

About Timothy House

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Gofal Cymru Care Ltd
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	21 June 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People are settled and happy with the service and share positive relationships with each other and care staff. The care team is stable and support people to achieve their daily outcomes. People spend their time doing things they enjoy which is important to them. The opportunities for people to lead active and busy lives is positively impacting their well-being, they enjoy holidays, weekly swimming sessions and some have work type activities. Care staff access care documentation which informs them of how a person chooses to be cared for. Carer training includes topics which are relevant to the needs of people living in the home.

Governance arrangements are suitable to ensure day-to-day management of the home is effective. Systems for monitoring the quality of the service are sufficient. The responsible individual (RI) demonstrates consistent oversight of the service and takes effective action when needed. Care staff access policies and procedures and regular staff meetings keep them informed of essential updates. People's care and support needs are documented in well-thought-out personal plans which mostly inform care staff of a person's routines, and choices.

Well-being

People's voices are heard, and their opinions valued by the service and are involved in day-to-day decisions about the service they receive. People meet monthly with key worker care staff to discuss their care, support and well-being. Key workers detail people's progress, well-being and things which are important to the person. The service supports people to achieve their goals. This includes attending work, getting involved in tasks around the home but also social outcomes such as holidays, hobbies and days out. Care staff facilitate monthly home meetings for people to get together should they choose to, where their opinions, and requests are noted. People told us "*Life is good here, I love my bedroom, it is the best place I have lived."*

People access the right information when they need it. Service information is available with some details in an easy read format. The service assesses people's communication preferences on admission. Most people's language needs are met. There is not a current requirement for the service to be provided through the medium of Welsh language. The service is not working towards the Welsh Active offer at the time of inspection.

The service understands people's individual circumstances. Those who require additional support to make decisions access advocacy services. The provider understands the importance of keeping others informed to ensure people's outcomes are consistently being met. Professionals and representatives can expect to be informed when reviews are being planned. We found records relating to people's rights and choices detail their day-to-day decisions, such as attendance at medical appointments, activity levels and engagement with care staff. The provider applies for Deprivation of Liberty Safeguards (DoLs) and completes best interest decisions for people who require additional support to keep them safe. The provider understands their responsibility to inform the regulator of applications made to protect people.

People are protected from harm and abuse. The service follows safe recruitment practices. Care staff attend safeguarding training and have access to up-to-date policies relating to safeguarding and whistleblowing which are in line with current legislation. Training for care staff includes core training in topics relevant to meet the needs of people living in the home. Overall, people are consistently achieving their daily outcomes in-line with their personal plan which positively impacts their well-being.

Care and Support

Information about the service is available to people and representatives. The statement of purpose (SoP) sets out what people can expect from the service. A service guide provides some information available in an accessible format. The service completes agreements with people when they initially move into the home. Risk assessments are in place and additional safeguards are applied for those who require them.

The service completes the personal plan to inform care staff of a person's care and support needs. The personal plan contains most key information, including people's likes and dislikes, what they like to do for themselves, and what is important to them. We found personal plans are reviewed on a regular basis but not all contain sufficient information and some guidelines require updating. The service includes people and their representatives to contribute to the review.

People receive the right care at the right time and care staff know people extremely well meaning their individual needs are catered for. Records relating to daily care are complete. People are achieving good outcomes because of the consistent approach to their care needs. We saw this in areas such as support to maintain a healthy diet, and representatives told us "*Health needs are always met, and their emotional well-being is cared for."* We found some care staff need further support to develop their understanding of certain health conditions and how to properly record medical occurrences. The RI is aware and is taking prompt action to ensure all care staff are confident in their record keeping and guidance is kept up to date.

The service supports people to access health care professionals. Care staff understand their roles and responsibilities to support people to maintain good health. People's choices around accessing health appointments are documented. We found essential health needs are met and their health is reviewed by appropriate professionals.

There are safe procedures for accepting incoming and recording medication to support people to maintain their health and well-being. Care staff complete daily temperature checks to ensure medication is stored appropriately but we did not see actions being taken when temperatures fall outside of the recommended range. We found medication is administered by experienced care staff, but training records and competency check records are incomplete. The RI is aware and is taking prompt action to address matters relating to records and competencies.

Environment

The home is well-maintained and decorated in a homely style. The provider identifies areas of wear and tear and makes repairs without delay. Since the last inspection, we found communal areas redecorated to a very good standard, ensuring a safe and pleasant environment for people. Up to date servicing records were not available to us at inspection from the electronic records however the RI reports provide us with reassurance essential checks are complete.

People's bedrooms are spacious and recently decorated with people's input to choose their theme. Furniture in all bedrooms is new. People have access to bathroom facilities suitable to meet their needs. We found bedrooms to be clean and pleasant places for people to spend time in. We observed some people did not have access to small items of equipment advised in their personal plan. Management was quick to address this during inspection.

There is a good standard of hygiene and infection control throughout the home and care staff complete daily cleaning routines. We found ample supplies of PPE. Weekly and monthly monitoring ensure systems such as water temperatures, fridge and freezer temperatures are within a safe range. People have a personal emergency evacuation plan. Care staff complete fire safety training and easy read guidance is visible in the home to tell people what to do in the event of an emergency.

The kitchen/diner is the heart of the home and a very social area. We saw people enjoying each other's company, eating together and chatting with care staff through-out the day. People have easy access to a large outdoor space; the large patio offers people a safe and pleasant area. People told us they like being in the garden and it is a well-used social area in the summer, where their friends visit for BBQs. There is ample seating in the garden for people and care staff.

There are effective procedures in place to monitor the environment to keep people safe. Items that could cause harm to people are securely stored, such as cleaning fluids and medications. The manager has oversight of the day-to-day operation of the service and the RI completes environmental audits during formal visits to the home.

Leadership and Management

There are stable governance arrangements and a clear organisation structure with suitable support for the day-to-day management of the home. The RI formally visits the home and speaks with people and staff, and people confirmed visits are regular and they can share their views. The RI evaluates the quality of the service people receive and values their input. They consider care documentation, records relating to accidents, safeguarding matters and the environment. They clearly document actions to take on issues identified during audit activities. The RI informs the provider and produces a quality-of-care review which documents what the service is doing well, and what they will focus on to continue to deliver a good quality service to people. The statement of purpose (SoP) accurately describes the service, which is a regulatory requirement. Representatives told us "*Management is approachable, professional and friendly."*

We found the service has developed a consistent team of care staff since the last inspection, and the provider values care staff learning and development. Most care staff told us they feel their well-being is important to the service. There are safe recruitment procedures and audit records show most documents are complete. All care staff hold a current Disclosure and Barring Service (DBS) certificate, and are registered with Social Care Wales, the workforce regulator. Some care staff have a recognised qualification, and others are working towards attaining a suitable qualification for their role. We found minor gaps in records relating to training, supervision and annual appraisal. The RI is aware and is supporting management to keep records to reflect the training, supervision and support of care staff.

We observed systems for electronic record keeping, auditing, and monitoring of the service which are suitable and most quarterly audits are complete. This system allows the RI to identify areas of need and is effective in directing guidance and resources where needed.

There is a culture of effective and positive teamwork and care staff consistently told us teamwork is a strength of the service. Representatives told us the provider has "*The best interests of people at the heart of the service."* Throughout the inspection we found the RI to be open, honest, and keen to develop the service based on the findings of the inspection and the feedback from stakeholders.

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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