



Inspection Report on

Ty Nant Care Home

**53 Brook Street
Tonypandy
CF40 1RE**

Date Inspection Completed

20/05/2021

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About Ty Nant Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Newcore Healthcare LTD
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Ty Nant provides residential and nursing support for up to 33 older people, many of them living with a diagnosis of dementia. The home is situated in the community of Williamstown in Tonypany. The Responsible Individual (RI) for the service is Bikram Choudhary and the home has a manager who has registered with Social Care Wales (the workforce regulator).

The residents at service appear happy with the support they receive. Staff are compassionate and respectful; they seem to enjoy working at the home and appear dedicated to their work. They know the needs and preferences of the people they care for well. The home is comfortable, well maintained and has many features supporting people living with dementia. Management is visible and engaged in the day-to-day running of the service. The service has established systems to ensure the care and support provided at the home is of a good standard. Up-to-date policies and procedures help to protect people from harm or abuse. There is a focus on quality and improvement.

At the time of inspection, the service did not meet all legal requirements regarding the reviewing of personal plans and staff supervision.

Well-being

At Ty Nant, people live in an environment that improves their well-being and supports their specific needs. The service involves the individuals in the planning of their care and the personal plans reflect peoples' needs and wants. Care and support is adjusted to suit individual circumstances. Risk assessments identify resident's particular vulnerabilities, and strategies for protecting them from harm. These are reviewed regularly and when required, for instance to reflect a change in care needs.

We had positive feedback about the standard of care in the home and residents spoke well of the staff, saying care workers are "*lovely*" and "*very good to me*". People say their choices are respected and the service supports their individual preferences.

The service communicates well with staff, people and their loved ones, and liaises appropriately with relevant stakeholders. The service also offers formal and informal opportunities for people and their representatives to ask questions and to give feedback, so it can reflect on the quality of care and make improvements.

There are systems to safeguard from harm and abuse. The building is secure and access is only for authorised persons. The environment is kept free from hazards and equipment is well maintained and serviced. Staff are trained to recognise signs of neglect, abuse and poor health; they know their safeguarding responsibilities and can act appropriately.

Ty Nant claims to be working towards providing the Active Offer of the Welsh language. Currently there are two Welsh-speaking staff members at the home and no residents have requested their care delivery in Welsh.

Care and Support

The service provides a good standard of care and support to people. We spoke to some residents and their opinion of the service is very positive. The service identifies and discusses people's needs with them before they move into the home and then develops personal plans and support systems. People also have relevant risk assessments with routine reviews, as well as updates following an incident. They identify a person's vulnerabilities and set out ways to keep people safe.

We viewed a number of residents' personal files and records; they give a detailed picture of the persons' needs, likes, and what matters to them. Reviews of plans and risk assessments take place monthly. At the time of inspection, the reviews are not fully meeting legal requirements, but the service is currently developing a better, electronic system to show how people are participating in their care. To record the support provided, nurses and care workers make daily notes, which could be more person centred and reflective, to improve care further.

The service has appropriate infection control measures in place and staff use suitable personal protective equipment (PPE) to reduce the risk of infection. Staff say there are sufficient supplies of PPE and they know what to use when, and how. The visiting procedures are according to guidance and help to keep people safe in the home whilst having important social contacts.

Policies and staff training for medication management are in place to ensure safe practice. The medication administration records have regular audits and shortfalls are noted, so the service can take appropriate action, for example by retraining or updating staff. Medication files have the required photo identification, and the ones we saw were complete and in order.

The service assists people with timely access to health services, for example by making doctor appointments for them or referrals to other health services such as the occupational therapist.

Staff know the residents well, can recognise deterioration in their health and well-being, and act accordingly. Turnover of care workers is quite low which also ensures continuity of care. The service uses very little agency staff. People seem to feel comfortable with staff who provide their support. They speak well of the staff, saying they are "*so kind and patient*" and "*just wonderful*".

Staff encourage residents to participate in various group activities but individual activities and meaningful occupation should also be recorded in a way to make it useful for reflection and improvement.

Environment

Ty Nant offers a clean and pleasant environment on three levels and is set in the centre of a lively community.

Residents have a choice of lounges, bedrooms and bathrooms on all levels; a lift connects them for those unable to use the stairs. Features like a pub corner in a lounge, a café set up in the foyer and a train experience add variety. There are also specialist rooms, such as for hairdressing, visitors and medications, as well as various spaces for quiet time, training or confidential conversations. A patio garden with seating is available for residents. All parts are accessible with a wheelchair.

The home is clean, tidy, and decorated so it feels welcoming. There are a number of features which make it easier for people living with dementia, for example differently coloured room doors and memory boxes. All bedrooms have en-suite facilities and there are a number of additional toilets and bathrooms on each level. Residents personalise their rooms with photos, keepsakes and furnishings, which promotes a feeling of belonging.

People benefit from the service's commitment to ensure safe practice; the overall standard of cleanliness and hygiene appears to be good. Substances hazardous to health are stored safely. Files and medications are locked away to ensure confidentiality and safety.

Equipment is well looked after and the maintenance records show that utilities, equipment and fire safety features have regular checks and servicing. All residents have a personal emergency evacuation plan specific to their individual support needs, and fire drills are frequent and regular. The service has a current indemnity insurance certificate. The home is secure from unauthorised access.

Leadership and Management

The service makes sure staff are fit to work with vulnerable people. Staff files indicate correct recruitment and contain the legally required information. Staff do not start work until

all their pre-employment checks and vetting are completed. Care staff have relevant qualifications and are supported to gain higher levels. New and agency staff go through a respective induction programme, and all staff have on-going mandatory and specialist training. Staff are positive about their training, saying they feel competent and comfortable in their roles.

Management is hands-on and has an open door policy, and staff say the management is supportive and they feel valued. They told us *“I enjoy working here”*, and *“this is a good team”*. At the time of the inspection the provider did not meet legal requirements fully in regards of providing staff with regular supervision to reflect on their performance, identify support they might require and discuss any issues. We looked at a selection of relevant reports and documentation. Policies and measures such as for complaints, incidents, medication and safeguarding are in place, and have regular reviews and updates. Appropriate governance, auditing and quality assurance arrangements ensure the home runs smoothly and delivers good care. These systems also help the service to self-evaluate, and identify where improvements are required and there is a strong motivation on quality and improvement. The RI appears to have good oversight of the service and to have met all regulatory requirements of the role, including three monthly service visits and quality of care review records.

Up-to-date written information about the service and access to advocacy is available for the interested public. A Statement of Purpose sets out the service’s aims, values, and delivery of supports. A written guide contains practical information about the home and the care provided.

Areas for improvement and action at, or since, the previous inspection. Achieved**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None

Areas where priority action is required

None

Areas where improvement is required

Regulation 16 (3) and (4): Review of personal plan: (3) Reviews of the personal plan must include a review of the extent to which the individual has been able to achieve their personal outcomes and (4) The provider must involve the individual, the placing authority (if applicable) and any representative when carrying out a review of the personal plan.

Regulation 36(2)(c): staff supervision: The provider must ensure staff receive appropriate supervision

The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

Date Published 15/06/2021