



Arolygiaeth Gofal a Gwasanaethau Cymdeithasol Cymru
Care and Social Services Inspectorate Wales

Inspection Report on

Ty'n Y Coed.

**Big House Farm
Front Street
Rosemarket
Milford Haven
SA73 1JT**

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Description of the service

Ty'n y Coed Care Home is registered to provide personal care and accommodation for up to eight people aged 18 years and over who have a learning disability and/or physical disability (including sensory impairment). The service is situated in the village of Rosemarket. supported living service at Big House Farm and to one person living in the community. The Directors of Ty'n-Y-Coed Care Ltd are Mark Beveridge and Colin Picton and the responsible individual is also Colin Picton. The registered manager is Gareth Bevan.

Summary of our findings

1. Overall assessment

People were very settled within the home and appeared comfortable with staff who knew them well. People participate in a wide variety of activities which are tailored to individual people and are meaningful to them. Systems for reviewing the quality of the service need to be strengthened in order to demonstrate that people are safe and that the service is committed to ongoing improvement.

2. Improvements

No areas of non compliance were identified at the last inspection.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service and the areas where the care home is not meeting legal requirements. These include the following:

The registered person is not compliant with regulation 18(2) because staff supervision records evidenced that all staff had not received supervision on a one to one basis with their line manager at least once every two months. The registered person acknowledged this to be the case and processes had been implemented to rectify this.

The registered person is not compliant with Regulation 27 because the registered provider has not carried out and recorded the required regulatory visits at least every three months.

The registered person is not compliant with Regulation 25. This is because there was no evidence to demonstrate that there was a system in place for reviewing, at appropriate intervals, the quality of the service and personal care which the agency arranges to be provided.

These are serious matters and non compliance notices were issued to the registered person in relation to the above.

The registered person was also advised that they were not compliant with Regulation 18(1). This is because training records evidenced that staff required updated training in a number of areas.

A non compliance notice was not issued on this occasion as we did not identify any significant impact for people using the service.

1. Well-being

Summary

Overall, we found that people were content and treated with respect. They were engaged in constructive and positive relationships and lifestyles and felt confident and positively about themselves.

Our findings

People living at Ty'n y Coed feel a sense of belonging and are able to establish positive relationships with one another and with staff members. People indicated that they enjoyed living in the home. Communal areas such as the lounge, dining room and conservatory were homely and comfortable and individual bedrooms were furnished and decorated in accordance with individual needs and preferences. There was a relaxed atmosphere within the home and people appeared comfortable and content in the company of staff.

People living in Ty'n y Coed are enabled to do things for themselves and to have their individual identities recognised and valued. We saw that people were supervised and supported by staff according to their individual needs and that staff were aware of and encouraged individuals in pursuit of their particular interests. On the day of the inspection people were supported by staff to engage in a range of activities both within the home and in the community. One person told us how he enjoyed attendance at a work placement in a local café and another was keen to accompany staff to the shops. Staff we spoke with told us about individual people's interests and the activities they enjoyed and we saw that this was reflected in the care records we examined.

People are supported to take part in activities of their choice. Discussion with people and staff and observation of care records evidenced that people were regularly engaged in activities which were meaningful to them. This included bowling, trips to the cinema, a recent visit to a disco, visits to local cafes, walks, trips in the car and visits to local towns and beaches. We saw that the interaction between people and staff was friendly and respect was being shown on both sides. This indicates that people are given opportunities to do things that matter to them.

People are able to make choices. We saw that they were involved in the planning of the menus, purchasing of the food and cooking the meals. We were told by staff that the meals are discussed and agreed between people and staff. We saw one person helping to wash up in the kitchen during the inspection. Mealtimes are considered an opportunity for people to socialise and people are encouraged to eat together in the dining room whenever possible. We saw reference in care records and heard discussions between staff and service users around the benefits of healthy eating. Menus demonstrated that a wide variety of meals were provided to people. Staff said that they were aware of people's individual preferences and gave examples of this. Menus were therefore constructed around people's specific needs, likes and preferences. We concluded therefore that people are provided with opportunities to feel involved in life at the home and to participate in social and recreational activities in order to enhance their overall well-being.

2. Care and Support

Summary

Staff are enthusiastic and are motivated to make a positive difference to people's lives. Staff have a good knowledge of the people they care for and support and are familiar with their needs and preferences. People benefit from care that is planned and delivered in a person centred manner. People's needs are anticipated and they receive help when they need it.

Our findings

Staff have a good understanding of the needs of the people they support. We observed staff members speaking with people in an informed manner. Staff knew how to communicate with people who found it difficult to express their wishes verbally. Four staff members had enrolled on a British Sign Language course in order that they could communicate effectively with a service user. They described how the ability to communicate had enhanced the daily living experience of the person who was able to express herself in a manner in which she had been unable previously. People therefore receive the right care at the right time and in the way they want it.

People are supported to be as well as they can be because their individual needs and preferences are understood and their care needs are anticipated. We examined three care files and found that care plans and risk assessments had been reviewed and updated regularly. We saw that care files detailed essential information in relation to people's preferences, personal care needs and medical requirements. A written plan of care provided guidance on personal likes and dislikes, social interests, daily routines as well as all the aspects of life the person needed support with. Staff we spoke with were aware of people's individual care needs. This was consistent with care delivery we observed and with the information in we saw in care records. This told us that people receive person centred care which is focussed on individual needs.

People are treated with warmth and sensitivity in their day to day lives. We observed positive interactions between staff and residents. Throughout the inspection we saw staff consistently responding to people's care needs in a kind and caring manner, providing encouragement and reassurance appropriately using a range of skills such as touch, British Sign Language and speech. We observed that interactions between care workers and residents were friendly and relaxed. We saw staff interacting and communicating with residents in a manner appropriate to people's individual needs. We concluded that people have good relationships with the staff who are caring and familiar to them.

People living at Ty'n y Coed are encouraged to socialise and are supported to have friends and relationships. We saw that care records detailed the family and social relationships that were important to people. Staff we spoke with were aware of the relationships which were important to people and they described their understanding of their role in enabling people to safely build and maintain positive relationships. For some residents this included visiting family and friends in the community and arranging visits to people within the home.

We concluded that people living at Ty'n y Coed have a sense of belonging and are encouraged to enjoy safe and positive relationships.

3. Environment

Summary

Ty'n y Coed provides a safe and secure place for people to live. People can socialise or spend time in private if they wish to. People live in a warm and welcoming environment. People are safeguarded by the health and safety checks and measures in place.

Our findings

People live in a safe, clean and secure environment, the layout of which enables them to easily move throughout the home. People can spend time in communal areas or in private if they wish to. We saw that the home had a spacious lounge, a separate dining room and a pleasant conservatory. The home's décor was comfortable and homely. People living in Ty'n y Coed have their own individual bedrooms. These were decorated in accordance with people's needs and preferences. We saw that there were sufficient washing and toileting facilities for the people that live and work at the home. General housekeeping, cleaning and cooking was undertaken by staff members and service users were encouraged to assist with these tasks where possible. We found the home to be clean and tidy. We saw people using the environment safely and freely. People using the service therefore have access to a clean, tidy and safe living environment which is suitable for their needs.

People are protected and their safety is maintained. We found entry to the home was secure as visitors must pass through a gate which is locked via a keypad system. Outside areas and car parks are monitored by CCTV. Visitor identity was checked before entering the property. Medications are stored securely. Health and safety checks and measures were in place in relation to fire certificates and PAT testing had been carried out. All confidential files including care and staff files were stored securely. People's right to privacy is therefore respected within a secure environment.

4. Leadership and Management

Summary

Care is provided by sufficient numbers of skilled and competent staff. At the time of the inspection the registered manager had not worked at the service for approximately a month. The deputy manager was employed as acting manager and was being supported by the Responsible Individual. The acting manager and staff are people focused and committed to ensuring that service users receive the care and support they need. The home has systems in place to promote safe practice.

Our findings

Generally people are supported by a stable and dedicated team of staff who are employed in sufficient numbers to meet their needs. We saw that interactions between staff and residents were relaxed and friendly and we overheard a significant amount of good natured banter. Staff said that they felt supported by the responsible individual, who is present at the home daily, and by the acting manager. At the time of the inspection the registered manager had not worked at the service for approximately a month. The deputy manager was employed as acting manager and was being supported by the Responsible Individual.

People receive care and support from staff who are appropriately appointed and supported. We examined three staff employment files which contained the required information to ensure their suitability and fitness. Staff we spoke with said that they had sufficient training to undertake their role competently and we saw that the staff files we examined contained certificates of qualifications and training relevant to the care needs of residents in the home. The training matrix identified that a number of staff required updated training in several areas. Assurances were given by the responsible individual that all training updates had already been scheduled. Overall we concluded that there is a robust process in place to ensure that staff are recruited and sufficiently vetted and trained in a way that improves outcomes for people.

Although the Responsible Individual visits the agency offices very frequently and is well known to staff and to service users there was no evidence that the service had been audited on a regular basis or that a system was in place for regularly reviewing the quality of the service. The registered provider is not compliant with Regulation 27 (1-5) because there was no evidence that the required regulatory visits had been carried out and no records were available.

Overall people cannot be confident that staff receive effective supervision because records showed that all care staff had not consistently been supervised at least every two months in accordance with Regulation 18(2). A non compliance notification has been issued in regard to this. We were told that a new process for supervision has been introduced and that this will ensure compliance in the future.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

There were no areas of non compliance noted at the previous inspection.

5.2 Areas of non compliance identified at this inspection

The registered person is not compliant with regulation 18(2) because staff supervision records evidenced that all staff had not received supervision on a one to one basis with their line manager at least once every two months. The registered person acknowledged this to be the case and processes had been implemented to rectify this.

The registered person is not compliant with Regulation 27 because the registered provider has not carried out and recorded the required regulatory visits at least every three months. The registered person had commenced processes to meet this requirement.

The registered person is not compliant with Regulation 25. This is because there was no evidence to demonstrate that there was a system in place for reviewing, at appropriate intervals, the quality of the service and personal care which the agency arranges to be provided.

These are serious matters and non compliance notices were issued to the registered person in relation to the above.

The registered person was also advised that they were not compliant with Regulation 18(1). This is because training records evidenced that staff required updated training in a number of areas.

A non compliance notice was not issued on this occasion as we did not identify any significant impact for people using the service.

6. How we undertook this inspection

We carried out an unannounced inspection to the home on 8 September, 28 September and 5 October 2017.

The following methods were used:

- We examined CSSIW data held about the service and gathered since the last inspection
- We reviewed the home's last inspection report
- We examined the care plans for three people living at the homeWe spoke to people living at the homeWe spoke to the Responsible Individual, the deputy manager and staff membersWe observed interactions between residents and staffWe examined the care documentation of three people using the serviceWe examined four staff filesWe reviewed the home's training matrixWe examined the home's service user guide and statement of purpose We had a tour of the premises.

Further information about what we do can be found on our website www.cssiw.org.uk

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Type of care provided	Adult Care Home - Younger
Registered Person	Ty'n-Y-Coed Care Limited
Registered Manager(s)	Gareth Bevan
Registered maximum number of places	8
Date of previous CSSIW inspection	13 April 2017
Dates of this Inspection visit(s)	11/09/2017
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No This service does not provide an 'Active Offer' of the Welsh language. We recommend that the service provider considers Welsh Government's ' <i>More than just words: Follow-on strategic framework</i> ' for Welsh language in social care.
Additional Information:	



Care and Social Services Inspectorate Wales

Care Standards Act 2000

Non Compliance Notice

Adult Care Home - Younger

This notice sets out where your service is not compliant with the regulations. You, as the registered person, are required to take action to ensure compliance is achieved in the timescales specified.

The issuing of this notice is a serious matter. Failure to achieve compliance will result in CSSIW taking action in line with its enforcement policy.

Further advice and information is available on CSSIW's website
www.cssiw.org.uk

Ty'n Y Coed

Big House Farm
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Leadership and Management	Our Ref: NONCO-00004921-CNTH
Non-compliance identified at this inspection	
Timescale for completion	31/12/17
Description of non-compliance/Action to be taken	
Regulation number	
The registered person is not compliant with Regulation 27 . This is because the registered provider has not made arrangements for visits to be undertaken at least once every three months to include all aspects identified within the Regulation.	27 (2) (a) 27 (2) (b) 27 (2) (c) 27 (3) 27 (4) (a) 27 (4) (b) 27 (4) (c) 27 (5) (a) 27 (5) (b)
Evidence	
<ul style="list-style-type: none"> - The registered person is not compliant with regulation 27: - This is because the registered provider had not made arrangements for visits to be undertaken at least every three months to include all aspects identified within the Regulation. - The evidence for this is that there were no written records available to evidence that the service had been audited on a regular basis; The last quality report was dated January 2017 <ul style="list-style-type: none"> - The impact on people using the service is that the services they receive have not been audited or reviewed in order to ensure that they remain safe and effective. 	

Leadership and Management	Our Ref: NONCO-00004922-XJGM
Non-compliance identified at this inspection	
Timescale for completion	31/12/17
Description of non-compliance/Action to be taken	Regulation number
The registered person is not compliant with regulation 18(2).	18 (2)
Evidence	
<ul style="list-style-type: none"> - The registered person is not compliant with regulation 18(2). - This is because care staff had not received supervision on a one to one basis with their line manager at least once every two months. - The evidence is that records in staff files showed that supervisions had not been carried out with their line manager at least every two months. - The Responsible Individual said that all care staff had not received supervision at least every two months. - The impact on people using the service is that they are receiving care and support from staff who are not supervised in a manner which ensures that that care and support is delivered effectively. 	

Leadership and Management	Our Ref: NONCO-00004953-NWKY
Non-compliance identified at this inspection	
Timescale for completion	03/12/17
Evidence	
Description of non-compliance/Action to be taken	Regulation number
The registered person is not compliant with Regulation 25 because there was no system in place for reviewing, at appropriate intervals, the quality of the service and personal care which the agency arranges to be provided.	
<ul style="list-style-type: none"> - The registered person is not compliant with regulation 25. - This is because there was no system in place for reviewing, at appropriate intervals, the quality of the service and personal care which the agency arranges to be provided. - The evidence for this is that the last quality of care report was dated January 2017. The Responsible Individual said that a quality of care review was carried out annually. - The impact on people using the service is that people cannot be assured that they receive a safe service which is committed to on-going improvement. 	