

## **Care and Social Services Inspectorate Wales**

Care Standards Act 2000

**Inspection Report** 

**Liwynalit Care Home** 

Wernddu Road Alltwen Pontardawe SA8 3HY

Type of Inspection – Focussed Date(s) of inspection – 23 July 2013 Date of publication – 23 August 2013

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#### **Summary**

#### About the service

Llwynallt Residential Care Home offers support and accommodation for up to 31 older people with a variation in place to accommodate 1 younger adult within the total. At the time of this inspection 26 people were living at Llwynallt and steps were being taken to review the current business model and promote the service more widely.

Llwynallt is a modern, purpose built home situated in the village of Alltwen in the Swansea Valley. It is approximately five miles north of the M4 motorway and eight miles north of Swansea city centre. There is a wide range of services and facilities to be found locally – the town of Pontardawe is nearby. Many people living at the home are from the surrounding area, as are their relatives.

The provider is Mayflower Care Ltd. The Responsible Individual (RI) is Alan Sheldon and the Registered Manager (RM) is Karen Lemmon.

#### What type of inspection was carried out?

A focussed inspection was carried out so that the changes which have taken place since the last inspection could be seen and reflected upon.

The inspection consisted of an unannounced inspection visit on 23<sup>rd</sup> July 2013 lasting approximately three hours – this visit was concerned primarily with discussions with the responsible individual, registered manager and with looking through residents' and staff files.

Inspection methods -

- Inspection of the self assessment forms submitted to CSSIW by the registered manager.
- One unannounced visit to the home.
- Discussions with the people living at the home.
- Observation of care practices.
- Inspection of documentation.
- Tour of the premises.

#### What does the service do well?

Llwynallt have a very comprehensive admission form used when a hospital admission takes place. The information provided on this form is very useful to the recipient being person centred and includes likes/dislikes and behaviours.

#### What has improved since the last inspection?

The lounge on the third floor has been refurbished.

Work is underway to complete the driveway resurfacing and landscaping of gardens.

The registered persons at Llwynallt have started to produce a three monthly newsletter

which will be given to users of the service and their families.

The staff room now has lockable cupboards for staff's personal items.

#### What needs to be done to improve the service?

There were no issues of non-compliance identified at this inspection.

We recommended that:

Activities and purposeful interaction need to be provided for the people living at the home in line with their identified needs.

Staff files should contain up to date supervision records. We did not, on this occasion issue a non-compliance notice but this will be a focus for the next inspection as we found in some files that supervision had not been carried out

The daily logs could be improved and be more person centred.

An audit of staff records was required as the files were disorganised and some documents were missing.

Health and Safety Executive should be contacted for advice to ensure that correct window restrictors are fitted.

## **Quality of life**

The inspection focussed on the quality of life of the people using the service. CSSIW did

not consider it necessary to look further at the quality of the environment on this occasion as no concerns have been noted since the last inspection.
However, we noted that window restrictors may not be Health and Safety Executive approved, and discussions with the RI indicated that he would check immediately and take any appropriate action necessary. In addition, we noted that there are ongoing works currently being undertaken to improve the grounds of the property.

### **Quality of staffing**

The inspection focussed on the quality of life of the people using the service. CSSIW did not consider it necessary to look further at the quality of staffing other than supervision as this was an issue raised in the previous inspection.

Generally, people can be confident that they are supported by staff who receive regular supervision. However, although we saw some evidence of regular, recorded supervision not all staff files seen contained up to date supervision minutes. The registered manager should develop a system to audit supervision to ensure they take place in accordance with National Minimum Standard 24.3 and that this is sustained on a two monthly basis.

# **Quality of leadership and management**

The inspection focussed on the quality of life for the people using the service. CSSIW did not consider it necessary to look further at the quality of leadership and management on this occasion as no concerns have been noted since the last inspection. However, increasing occupancy has been identified as a priority for the coming year and marketing				
and developmental strategies are being designed in relation to this issue. Llwynallt management are holding a Re-Launch/Summer fair on 10 <sup>th</sup> August 2013.				

## **Quality of environment**

The inspection focussed on the quality of life of the people using the service. CSSIW did not consider it necessary to look further at the quality of the environment on this

occasion as no concerns have been noted since the last inspection. However, we noted that window restrictors may not be Health and Safety Executive approved, and discussions with the RI indicated that he would check immediately and take any appropriate action necessary. In addition, we noted that there are ongoing works currently being undertaken to improve the grounds of the property.

**How we inspect and report on services** We conduct two types of inspection; baseline and focussed. Both consider the experience of people using services.

**Baseline inspections** assess whether the registration of a service is justified and whether the conditions of registration are appropriate. For most services, we carry out these inspections every three years. Exceptions are registered child minders, out of school care, sessional care, crèches and open access provision, which are every four years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

**Focussed inspections** consider the experience of people using services and we will look at compliance with regulations when poor outcomes for people using services are identified. We carry out these inspections in between baseline inspections. Focussed inspections will always consider the quality of life of people using services and may look at other areas.

Baseline and focussed inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

Talking with people who use services and their representatives

Talking to staff and the manager

Looking at documentation

Observation of staff interactions with people and of the environment

Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, <u>Improving Care and Social Services in Wales</u> or ask us to send you a copy by telephoning your local CSSIW regional office.