



Inspection Report on

Ty Pentwyn Care Home

**Ty Pentwyn Nursing Home
Pentwyn Road
Treorchy
CF42 6HD**

Date Inspection Completed

29/11/24 & 10/12/2024

Welsh Government © Crown copyright 2024.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gov.uk You must reproduce our material accurately and not use it in a misleading context.

About Ty Pentwyn Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Quality Care (Surrey) Ltd
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	25 May 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People living at Ty Pentwyn are happy with the care they receive. Care staff are inclusive, warm and friendly to people. The building and environment are continuing to have investment and maintenance, and the staff team are celebrating 100 years of Ty Pentwyn in the new year. Personal plans provide the information needed for care staff to provide them with the right care at the right time. Care workers are appropriately trained in both mandatory subjects and subjects specific to the people they support. There are policies in place to underpin practice. The manager has been at the service for a long time and is a consistent presence within the team. Staff feel supported in their roles. The Responsible Individual (RI) has good oversight of the service, and visits regularly to consult with staff, people living at the service and their relatives. Information about the service is available to the public.

Well-being

The service employs measures to keep people safe. Policies and procedures are in place to provide guidance to staff and promote safe practice. Care staff have safeguarding training and know how to identify potential safeguarding concerns. Risk assessments identify possible harm to individuals and outlines steps to mitigate those risks. Staff are supported by their manager, but some require more consistent formal supervision.

People are encouraged to engage and interact with care staff and each other. There are two activities co-ordinators who job share across the week. During our visit, we saw the activities co-ordinator work with people in small groups and chat with people individually if they did not want to participate in the activity being held. They also organise for external entertainers to visit the home. The RI talks to people, and their visitors, to gather feedback about what they feel is going well in the home and what needs improvement.

People are supported to be as healthy as they can be. The manager and nursing staff liaise daily with GPs and community nurses. Referrals are made to external health and social care professionals, such as speech and language therapists or dieticians. Medication is ordered and booked in by nursing staff every month. We found it to be stored appropriately and is administered by nurses as prescribed. We sampled medication charts and found them to be in line with administration. The manager audits medication process and recordings monthly to identify if any errors or oversights have been made.

Care and Support

People can be reassured their health and well-being will be prioritised in an emergency. During a recent storm, a tree fell and took out the electricity line to the home. The staff team worked to a plan, prioritising people whose care was compromised by the lack of electricity, for example those at risk of pressure damage and using air flow mattresses in bed. They were able to have food delivered to the home, and ensure people stayed warm, comfortable and reassured.

Feedback about the care provided by the staff team at Ty Pentwyn is positive. One person told us: *“the best thing about being here is the people”*. One person’s spouse, who visits daily, said: *“I never have any complaints, I go to [manager] with any questions, but they’ve normally already done something about anything I ask about”*.

Personal plans contain all the required information to ensure people get the right care at the right time. They detail communication needs, health needs and interventions, and evidence decisions made in people’s best interests when they are unable to make those decisions themselves. Personal plans and risk assessments are reviewed monthly and updated with relevant information. Daily charts note personal care, pressure relief and monitoring health checks by nurses.

There are systems in place to promote good infection control practices. The domestic and laundry team work to keep the environment clean and tidy and ensure people have clean clothes and bedding daily. Personal protective equipment (PPE) is available and used appropriately for close contact care. Some staff require further infection control training. There is a policy in place regarding infection control, which is reviewed annually, and underpins good practice.

Environment

Ty Pentwyn is a safe and secure environment. The building is 100 years old this year, and the service provider invests money in the maintenance of the building. One of the bedrooms required work to fix a leak, and the person living in that room agreed to be moved to a different room whilst the work was being carried out. The outside space is also being landscaped to make it safe and useable. There is a maintenance man employed to complete small repair or replacement jobs and who undertakes regular fire alarm, water and lighting checks. External companies are also contracted when necessary. We saw up to date safety certification for utilities, equipment, and fire safety. People have personal evacuation plans in place, so care staff know the level of support needed in an evacuation situation. Areas of the home that contain items that could be hazardous to health, such as the laundry, kitchen or medication room are locked to minimise risk to people. Visitors have to ring the doorbell to be greeted by staff and enter, and they record their visits in a visitors' book.

People's environment supports their wellbeing. Bedrooms are decorated in an individualised and homely way and contain people's personal belongings. There is a large communal lounge and separate dining room where people can interact and spend time together should they wish to. There is a lift in the home so people can access all floors, and an accessible and safe garden area. People in the communal areas appear comfortable and relaxed and had their preferred areas where they like to sit, which was known and facilitated by care staff. Facilities such as bath aids and hoists are available and fit for purpose to support those with mobility issues.

Leadership and Management

Feedback from nurses and care staff is that they enjoy working in Ty Pentwyn. They told us: *“The staff are really good here, we all work well together”, “you can ask [manager] about anything”*. Staffing levels appear sufficient, with one vacancy being recruited for. A staff member told us: *“we hardly ever work short staffed; the staff are all good at picking up shifts”*. We saw there were some gaps in the frequency of supervisions being given, meaning not all staff have had regular, formal 1:1 sessions with their line manager. However, nurses and care staff report that they feel the manager is always supportive and approachable with any questions or issues. The manager advised they will ensure all staff have regular supervisions.

Staff are recruited, vetted and trained to ensure they are suitable for their roles. We sampled staff personnel files and found they contain all the required recruitment information, including references and right to work in the UK. All staff are working with a current Disclosure and Barring Service (DBS) check to ensure they're fit to work. Most staff are up to date with all mandatory training and training specific to the people they are supporting. A couple of staff are due refresher training, which will be organised by the manager.

Quality assurance processes are in place to monitor the quality of care being provided and improve areas of the service where needed. The manager completes regular audits in many aspects of care such as infection control, medication, and accidents and incidents. The RI visits regularly and completes their quarterly monitoring reports including feedback gained from people living at the service and visitors that are there on the day. This information feeds into biannual quality of care reports, identifying the strengths of the service and the ongoing improvement work required. There are policies and procedures available to staff that are reviewed annually, and an up-to-date statement of purpose outlining the nature of the service and the type of care they can provide to people.

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	
--	------------	--

Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

Date Published 24/01/2025