



Inspection Report on

Treforys Care Home

**Treforys Care Home
School Road
Morriston
Swansea
SA6 6HZ**

Date Inspection Completed

27/09/2024

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About Treforys Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Padda Care Homes Ltd
Registered places	38
Language of the service	English
Previous Care Inspectorate Wales inspection	9 March 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

Treforys care home is a homely and welcoming service sitting in the heart of the community. Up to date personal plans are in place that reflect the current needs of people well. These plans are supported with personalised risk assessments. Various activities take place in the service that people can participate in.

There has been a recent extension to the service, a new lift has been installed and there is clear ongoing investment in the service by the provider. Maintenance people are employed who maintain the building and ensure the facilities continue to meet the needs of people. There are four communal lounges on the ground floor and a secure outside area for people to choose where to spend their time.

People are supported by care staff who are dedicated and feel valued in their roles. Care and nursing staff are recruited safely, receive regular training and effective support to carry out their roles. There is a respected manager and deputy in post who are approachable and held in high regard by people, relatives and the staff team. The responsible individual (RI) visits the service regularly and has daily contact with the manager. There are good oversight tools in place to ensure the service is effective and any actions are addressed.

Well-being

People have a voice and are treated with care and respect. People appear happy in the service and feedback from relatives and visiting professionals is very positive about the care delivered. Care documentation is stored electronically and gives a good, personalised overview of the individual and how best to support them to meet their needs. The RI visits the service regularly and speaks with people, staff and relatives to obtain feedback about the service to drive improvements. We observed warm and kind interactions between care staff and people during the inspection and comforting gestures that people appreciated. There are clearly good friendships and a strong feeling of family in the home.

People can do things that matter to them. There is a well-being coordinator in post who organises group and individualised activities as well as entertainment in the service. The service has accessible vehicles to take people out into the community with support. However, at present one of these vehicles is being repaired. There are several communal areas in the service so people can choose where to spend their time. There are also smaller rooms for more private space and meeting should people choose. There is a small room currently being redeveloped into a sensory/ activities room.

People are protected from neglect and harm. There are safe systems in place to enter and leave the premises and a signing in book for visitors to complete. Policies and procedures are in place to ensure the safe running of the service. There are good maintenance plans in place to ensure the building and equipment is safe for use. Care workers are recruited safely and receive good levels of training and support to carry out their roles efficiently. Safeguarding training is mandatory for all staff and those spoken with have a good understanding of their responsibilities to report any concerns.

People are encouraged to maintain good relationships with others. During the inspection several visitors were in the premises, this is always welcomed in the service. Relatives praised the management of the service for their level of communication and understanding. We saw good friendships between people in the service as well as staff members who clearly make people smile.

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. Welsh cultural events are celebrated in the service. However, there is no real demand for the service to be delivered in Welsh at present. Despite this, the service is happy to embrace the use of the Welsh language should the demand change in the future, through recruiting Welsh speaking care staff and organising the translation of key documents.

Care and Support

People have up to date personal plans in place for staff to follow to ensure their needs are met. We looked at three care files on the electronic system. All were reviewed recently and reflected the current needs of individuals. We saw good detail about peoples support needs and how staff can support them to meet these needs. There is good history information about people which helps to understand what is important to them. Personal plans seen are written from the persons perspective. We observed care workers providing support to people and it was clear that they know the people they support well. We spoke with relatives during the inspection and feedback was very positive, comments included: *"I'm happy with the care here, the communication is really good. they listen to me and always sort any issues straight away"*, *"If anything happened, they are on the phone straight away maybe over cautions sometimes"* and *"I can leave here, and I don't worry about X"*.

Medication is managed well in the service. There is a designated medication room in the service, and we found all cupboards within were locked as were the medications trolleys. We looked at a sample of medication administrative records (MAR) and saw these are completed correctly with no gaps visible. Signatures of staff responsible for medication support are visible. Appropriate temperature checks are carried out in the medication room and medication fridges to ensure medication is stored appropriately. There are good procedures in place for ordering and returning medication. We saw audits of medication routinely taking place and any discrepancies are investigated promptly.

There are good systems in place to protect people from harm and neglect. All care staff complete safeguarding training. Those spoken with during the inspection understand their responsibilities to report any concern they have. The service completes Deprivation of Liberty Safeguards (DoLS) requests for people lacking capacity to make decisions about their care, support, and accommodation. These are appropriately notified to CIW at the time of application.

People enjoy activities in the service and have opportunities to do things that matter to them. There is a well-being coordinator in post who organises and undertakes individual and group activities with people. On the day of inspection, people were having their nails painted, some were enjoying craft activities, and some were laying the table for food. Music was playing in the main lounge and people were singing along. Relatives are complimentary of the welcome they get in the service and of the food available for people. Comments included, *"I can't think of anything they can do to make things better they even make me food and always offer me a cup of tea, its wonderful here,"* and *"Everything is home cooked here its wonderful, X enjoys their full English every day"*.

Environment

People are supported in a homely environment that meets their needs. Treforys is a purpose build service, and every room has en-suite facilities. There is limited parking available on the premises and more available on the adjacent street. The service is set out over three floors with the bedrooms and a smaller lounge on the first and second floor. There are two lifts in the service. Visitors access the service via the main entrance at the front of the building which is locked and is opened from inside the building. There is a small foyer with a sign in book and a second secure door before entering the building. The ground floor has a large dining/ lounge room which is adjacent to the kitchen, three smaller lounges, offices, locked medication room and locked laundry room which also has an adjacent locked room for the safe control of substances hazardous to health (COSHH). There is a welcoming garden to the rear of the property for people to enjoy some fresh air in warmer weather. Bedrooms are personalised with people's own belongings, clean and homely. The laundry room is well organised, and all machines seen in good working order. The most recent visit by environmental health in the kitchen awarded the service a 3 rating which is satisfactory, however the manager confirmed that the actions required to return to a 5 rating had been completed and this was evidenced in the action plan..

There are good procedures in place to identify and mitigate risks to health and safety in the service. The provider employs two maintenance staff to oversee the works and checks required to keep people safe in the service. We looked at the maintenance file and saw logs of weekly and monthly checks are up to date. These include manual handling equipment checks, fire safety and hot/ cold-water checks. We saw all utilities and servicing of utilities are up to date including, gas and electric. Certificates seen evidenced this. Environmental checks are also carried out by the RI during their routine visits.

Leadership and Management

The provider has good systems in place to recruit, support and develop the care team. All personnel files are stored electronically in the service. Five of these personnel files and training records were viewed and we found all required documentation for safe recruitment in place. This includes, Identification checks, work permits and up-to-date Disclosure and Barring Service (DBS) checks. Training records indicate that care and nursing staff complete sufficient training to carry out their roles successfully, although some told us they would appreciate more training in dementia care. We looked at supervision and appraisal records and found these take place routinely. This was also confirmed by all the care staff spoken with who told us they felt very supported in their roles especially by the manager. Most care staff are registered with Social Care Wales (SCW), the workforce regulator or working toward registration.

There are effective oversight arrangements in place for the service. The manager of the service is held in high regard by the care team, relatives and visiting professionals and this was evident in the feedback obtained. Care staff comments included *"The management are very helpful"*, *"this is the best manager I've ever had"* and *"the manager is very encouraging and is marvellous here"*. A visiting professional said, *"the Manager has a sound and in-depth knowledge of the residents"* and *"communication between the home and my team is excellent"*. The manager conducts routine audits in the service to maintain oversight and detect any actions needed promptly. Audits seen included infection control, nighttime spot checks, health and safety, dip sampling of files and more. The RI visits the service regularly and speaks with the manager daily to check in on the home. The RI completes quarterly reports of their findings following visits which also includes feedback from people, staff and relatives. Quality of care reviews are completed as required bi-annually and there is an ongoing drive in the service to continue to provide a good service and strive for excellence.

The provider invests in the service to ensure it continues to meet the needs of people. Since the last inspection the service has been extended to accommodate eight additional bedrooms and redecoration has been carried out in many areas of the service. The manager told us that there are plans for a new roof to be installed next year due to a leak in the stairwell. We spoke with the chef on duty who confirmed that budgets for food etc in the service were good and sufficient to provide balanced and nutritional meals to people. Staffing levels on the day of the inspection were also good and call bells are answered promptly and staff visible in communal areas.

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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