



Inspection Report on

Gwyddfwr

**Bodedern
Holyhead
LL65 3PD**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date of Publication

6 April 2017

Welsh Government © Crown copyright 2017.

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.gsi.gov.uk You must reproduce our material accurately and not use it in a misleading context.

Description of the service

Gwyddfor is situated in Bodedern on the Isle of Anglesey. It provides a service to people requiring personal care and accommodates up to 28 people aged 50 years and over. The home can provide care for one person with a learning disability and up to 19 people with dementia. Gwyddfor Residential Ltd is registered as provider with an appointed responsible individual. Mary Williams is the registered manager.

Summary of our findings

1. Overall assessment

People live in a safe and comfortable environment which has benefited from continued and substantial financial investment. They are encouraged to maximise their independence, express their views and whenever possible, are involved in their care planning. The home is run by pro-active management and has a dedicated team of care workers who are committed to their role. A robust recruitment system is evident and care workers receive regular training opportunities and feel valued and supported. The home provides a bilingual service and considers itself as working towards the provision of an 'active offer' of Welsh.

2. Improvements

The home has made a significant financial investment since the previous inspection. A new extension accommodates up to nine people and an atrium has been added and will include plants and a water feature.

The fire alarm and sprinkler system have been upgraded following recommendations by North Wales Fire Service.

Thermostatic mixing valves have been installed and the home benefits from a computer software programme that provides alerts when water temperatures increase.

Immediately following the inspection, the home updated all service user plans and they were written in a person centred manner. They also conducted a detailed investigation of the administration of medication and how they could improve this process. Written evidence of these changes were provided before the completion of the inspection report.

3. Requirements and recommendations

Section five of this report highlights recommendations to improve the service. These include the following:

- Reviewing care plans and risk assessments in a timely manner.
- Care workers receiving formal, timely supervision.
- Reviewing how the person responsible for administering medication can do so uninterrupted and ensuring how the audit of medication charts could be further improved.
- To ensure people's dignity, laundry must be returned to its' rightful owner on each occasion.
- Possible introduction of additional Welsh signage within the home.

1. Well-being

Summary

People are happy and receive care from care workers who understand their care needs. They have an opportunity to participate in a variety of activities and receive care in the language of their choice. People are encouraged to be independent and to express their views and opinions.

Our findings

People are comfortable and happy and their rights are respected. People we spoke with stated they were *“well looked after”* and felt *“very happy”* at the home. They informed us the registered manager and responsible individual were *“kind”*, *“approachable”* and *“very helpful”*. People told us requests were dealt with promptly, stating, *“you don’t have to wait or hardly ask for anything here, things get done”*. Some people informed us they were unhappy that items of their clothing had not been returned following laundering. The home acknowledged this and stated this was an ongoing issue which required addressing. They had introduced iron-on labels which had not been successful and were in the process of utilising a ‘kwik tag’ system which would be reviewed. This was seen as an area for improvement in order to further ensure people’s dignity. People stated their rights and independence were respected and they chose what they wanted to do. Their personal choices and preferences were recorded in daily plans and we saw evidence of this in practice. Care workers interacted with people in a respectful manner and were friendly and attentive. We witnessed people being comforted when anxious and care workers were patient and tactile in their approach. People were complimentary about the care they received, describing care workers as *“wonderful”*, *“friendly”* and *“excellent”*. We also spoke with visitors who highlighted they felt *“confident”* their relatives’ needs were being met and believed people were *“very happy”* at the home. One visitor described the home as *“a home from home”*. People are happy and content with the care they receive.

There are opportunities for people to participate in various activities and to keep as healthy and active as they can be. We saw people participating in a programme of organised activities at the home which included arts and crafts, jigsaws and hand and foot massages. People had access to portable tablet computers used with an interactive SMARTboard which encouraged individual and group activities. Dementia friendly interactive applications were also available to encourage movement and co-ordination. People also told us they enjoyed visits from external facilitators such as a harpist and singers. We saw care workers actively encouraging people to attend activities as guided by daily care records. Those who chose not to participate were not pressurised and stated they were happy to observe or remain in their rooms. The home’s ‘Facebook’ social media webpage evidenced seasonal themed parties and birthdays were celebrated. The home did not own a minibus, however an external fee paid befriending service was accessed. Those who utilised this service visited places of interest and stated they were pleased with the arrangements. It was noted that some people were unable to access the service due to their financial position and expressed their disappointment regarding this. Despite this, people told us the home would *“do their best”* to accommodate visits and outings when requested. It was noted that the

home arranged monthly outings for those wishing to participate. People were complimentary of the varied activities they could participate in at the home. This shows people are encouraged to keep healthy and can choose to be as active as they can be.

Whenever possible, people are encouraged to express their opinions and feel they are listened to. People stated their views were listened to and believed the home kept them informed of any changes and improvements being made. We viewed written records of residents' meetings and people confirmed they decided if they wanted to participate or not. A range of topics such as staffing, menus, requests, activities and laundry were discussed. People also told us they were aware of the advocacy service available and stated they felt comfortable approaching the home's management if they had any concerns. This shows that people are able to express their views and opinions when possible and feel involved.

People's individual identities are recognised and respected. The home provided a bilingual service that ensured people's cultural preferences were met. There was evidence of Welsh speaking care workers on each shift and people who spoke Welsh stated they were pleased about this arrangement. People told us this was important for them as it made them feel comfortable as they could express themselves in their first language. Despite the positive provision of Welsh on a daily basis, the home did not consider itself as providing an 'active offer' of Welsh. The home viewed itself as continuing to work towards this proposal and felt further improvements could be made. The Service User Guide was available in Welsh and staff felt other key documents could be made available in order for the service to truly consider itself as providing an 'active offer'. It was noted that the provision of additional Welsh signage would benefit the environment and the home stated it would look into this further. This shows that people are able to receive a service and express themselves in the language of their choice.

2. Care and Support

Summary

People are supported by care workers who understand their care needs. Prompt referrals are made to professional services and whenever possible, people are encouraged to contribute to their care plan. Care plans contain detailed information regarding people's needs and care is delivered in a person centred manner. Some improvements need to be made to ensure care plans and risk assessments are reviewed in a timely manner.

Our findings

People are cared for within a caring environment and care workers provide responsive care and support. During our observations, care workers responded quickly to call bells and were alert to the home's internal call system. We used the Short Observational Framework for Inspection (SOFI 2) tool observing the type of interactions and support people received. It highlighted care workers interacting with people in a jovial, friendly, warm and respectful manner. They offered encouragement when people required assistance and patience when people were anxious. A high proportion of positive interactions were observed. People told us their individual needs were being met and that care workers "*know what I like*". They also told us their dignity was "*always respected*" and were complimentary of the care provided. Discussions with care workers demonstrated they were aware of people's preferences and how they liked their care delivered. The home's daily care delivery schedule also informed care workers of people's preferences and the duties of care that required completing. The visitors we spoke with complimented the way in which care workers delivered care and believed their relatives were being treated with respect. People present as having a positive relationship with care workers who are aware of their individual preferences and are treated with dignity and respect.

People receive appropriate person centred care and this could be improved by timely review of the care plans. During our visit we viewed a sample of care records. The care plans viewed contained detailed information and person centred information such as the 'This is Me' document. They explained the type of care and support people required and evidenced people and their relatives' input. People and visitors confirmed they had contributed and that their views were obtained. Care plans contained people's preferences and information relating to their general health and well-being and assisted care workers in the delivery of care. They also contained updated end of life documents which were signed and dated by people or their representative. Not every copy of the care plans or risk assessments viewed had been reviewed in a timely manner. This was highlighted as an area for improvement. The registered manager displayed openness and honesty and informed us care plans and risk assessments were scheduled to be reviewed. We saw evidence that monthly service delivery plans were in the process of being reviewed and were given assurances they would be completed as soon as possible. The information was subsequently provided before the completion of the inspection report and documents were written in a person centred manner. It was noted that the registered manager had a 'hands

on' approach and this was appreciated by the people living at the home. People stated they liked this approach as it "*feels personal*" and described the support as "*brilliant*". Despite the lack of timely review of some care plans, we did not find evidence that the quality of care people received had been negatively affected. People at the home had benefitted from continuity from a consistent pool of care workers who understood their needs. The daily care delivery schedule also evidenced that care was being delivered to people in a timely manner. Therefore, people continue to receive the right care at the right time and in the way they want it.

Pre-admission assessments are undertaken whenever possible to ensure people's individual needs can be met. The care files we looked at contained signed pre-admission assessments which evidenced people's care and support requirements and their individual needs and preferences. They also contained evidence of family members' involvement and discussions with visitors confirmed their views had been considered at the time of assessment. This shows that people's needs and preferences are understood and anticipated prior to admission.

Prompt referrals are made to local health specialists when required to ensure people's individual health needs are met. Care records clearly displayed evidence of contact with various professional services. We saw written evidence of recent reviews conducted by a local GP service and people stated they were pleased they received a prompt service. People told us they were kept informed of any developments relating to their well-being and stated they were "*well looked after*". They also stated they were accompanied to appointments and care workers confirmed this arrangement. The home had a current Food Hygiene Rating of 5 (very good) and people were complimentary of the meals stating they were "*brilliant*" and "*too good*". A varied menu offered healthy, nutritious choices which were freshly prepared. We saw people enjoying their meals and some informed us they looked forward to each mealtime and viewed it as a social occasion. They also told us alternative meals were available if they did not like what was being offered. Visitors told us their relatives complimented the choice of meals and believed the portion size to be "*just nice*". People accessed fruit and fluids anytime they wanted and told us they were happy with this arrangement. Discussions with care workers highlighted they were aware of people's different dietary needs and preferences. This shows that people are supported to be as healthy as they can be.

3. Environment

Summary

People live in a safe and well maintained home which incorporates dementia friendly features and encourages independence. The home has benefitted from substantial financial investment resulting in internal and external improvements. People are happy with their rooms and the home's facilities. Detailed maintenance records are kept and there are plans to further develop the environment.

Our findings

People's needs are being met and they are cared for in a safe and secure environment. The home was secure upon our arrival as we were unable to enter the building until greeted by staff. We were asked to sign the visitor's book, provide a reason for visiting and had our identification checked. We also signed the home's confidentiality and awareness policy. People benefitted from an internal call system which safely maintained their freedom of movement and they told us they felt "*safe*" at the home.

Records evidenced that the home had reviewed its' fire risk assessment and relevant fire system safety checks had been completed. We saw evidence that dates for future reviews were planned. Personal emergency evacuation plans had also been completed and signed by each person. The home had a robust system of monitoring various environmental health and safety checks such as water and refrigeration temperatures. The home utilised an external company to record information and accessed the records via the internet. We saw detailed, comprehensive records of the monitoring system in place. We also saw evidence that a legionella test had been carried out and that regular internal maintenance checks of the home had been completed. People stated that any issues they had regarding their rooms were dealt with promptly and they did not "*have to wait for things to be done*". During the inspection we did not witness people accessing the extensive outdoor area due to the adverse weather. People and visitors told us the area was "*lovely in the summer*" as they could sit "*in quiet surroundings*". The outdoor area contained seating and raised planting areas for people with gardening interests. People also stated the area provided an opportunity to socialise with relatives and to enjoy privacy.

The home was well maintained and improvements were being made to the environment during our visit. Significant financial investment had been made and a new extension was built in 2016. Purpose built extensions had been added to the property enabling 22 rooms to be situated on the ground floor; a further five rooms were situated on the first floor of the new extension. An atrium was in the process of being developed to provide a light, spacious area for people to utilise. People's rooms contained dementia friendly features such as brightly coloured bedroom doors and personal memory boxes. Their rooms also contained personal belongings and memorabilia such as photographs, ornaments and their own furniture. Information contained within questionnaires following the inspection highlighted some people felt the cleanliness of the home was "*satisfactory*". It was noted care workers were responsible for cleaning duties as the home did not employ a designated domestic. The home presented as being clean and presentable on the day of inspection and people did not express any concerns regarding its' cleanliness.

Many people benefitted from the use of innovative and modern equipment such as laptop and tablet computers and the homes' interactive SMARTboard. If desired, people could have a direct telephone line to their rooms and utilise the homes' WI-FI internet connection. Some people had their own Facebook page and used the internet to maintain contact with distant relatives. People told us they were *"very happy"* with their rooms and amenities at the home. They stated that they had sufficient space to welcome guests while also having their own privacy. The home provided sufficient internal space to meet people's needs and contained a lounge bar and various sitting areas. People informed us they felt their needs were being met *"perfectly well"*. The space offered people opportunities to socialise and people told us they especially liked the lounge bar and dining area because of its décor. Visitors we spoke with commented that the responsible individual had *"put such a lot of money into it"* and described the environment as *"lovely"*. Care workers believed people had benefited from the improvements made as it had enabled them to maximise their independence. As well as the numerous positive changes made, the home had plans to further enhance the environment. The atrium area was scheduled to be completed over the forthcoming months and there were plans to change the location of the laundry room and hairdressing facilities. Despite ongoing environmental improvements, people's well-being needs are being met within a well maintained and comfortable environment.

4. Leadership and Management

Summary

The home benefits from a pro-active and dedicated management team who are committed to ensuring people receive quality care and support. Care workers are safely recruited and receive regular training opportunities. The home is committed to quality assurance and care workers are well lead and supported. Some improvements could be made in providing care workers with timely formal supervision and ensuring care workers administering medication are not interrupted.

Our findings

The home creates a positive ethos and culture whereby people and care workers feel valued. People were complimentary of the registered manager and stated they felt valued and respected as individuals. They informed us they were well cared for and that the registered manager was *“very approachable”* and *“understanding”*. Visitors were also complimentary of the home’s management stating *“nothing’s too much trouble”* and appreciated the financial investment which had been made. People stated they were happy with the home’s resources. The home’s innovation was evidenced through their use of creative dementia friendly applications, upgraded environmental changes and the use of computer software to record information. Care workers spoke positively about the registered manager, stating they felt *“very well supported”*, *“respected”* and *“appreciated”*. They informed us the registered manager had a ‘hands-on’ approach to care and people we spoke with also confirmed this. Care workers stated they could approach the management if they had concerns and were confident they would be listened to. Some care workers had been employed at the home for a long time which meant people received continuous and consistent care. Care workers presented as being friendly, caring and committed. They displayed an understanding of people’s individual care needs and we saw care delivered with patience and respect. The home did not use agency care workers as they had a large pool of bank care workers. The home informed us they could contact them anytime through the use of a mobile telephone messenger service. The responsible individual told us this ensured shifts could be covered at short notice by familiar care workers. People told us they preferred having familiar care workers stating *“they know me”* and know *“what I like”*. Care workers informed us they felt the messenger system was beneficial as it meant shifts would be covered and there would not be an increase in their work demand. This shows that people benefit from an efficient, resourceful service which is committed to innovation and is informed by best practice.

People receive support from care workers who are trained and securely vetted. The home employed care workers with appropriate qualifications and experience of working with people. We looked at three care workers’ files which evidenced the home followed robust recruitment processes. All new care workers received DBS checks before commencing employment. We viewed how the home securely accessed DBS information through a paid online service which could be accessed at anytime by the registered persons. Pro-active approaches to staff learning and development were apparent as care workers informed us they received regular and varied training opportunities. We viewed records confirming their attendance on compulsory core and individual needs specific courses. The home liaised

with external providers to provide training and also conducted their own in-house practical training. Practical 'on the job' training involved the registered manager observing care workers' core skill competence as part of their induction and development. Care workers stated they enjoyed the varied training and were pleased they had opportunities to obtain qualifications. As a result, people benefit from an efficient service where best use is made of care workers' skills and knowledge.

The home is managed in a pro-active manner by owners who ensure people receive care and support by care workers who understand their roles and are aware of the home's strategic aims and responsibilities. Care workers told us they were clear about their roles and responsibilities. They stated they felt involved when management kept them informed of any changes made to people's circumstances and to the environment. They also told us they felt "*supported*" and "*appreciated*" by management and confirmed they received supervision and annual appraisals. The supervision records indicated that regular formal supervision sessions had not been completed in line within the National Minimum Standards' suggestion of every two months. This was seen as an area for improvement. Despite this, care workers stated they had not felt unsupported during this period as they had direct contact with the registered manager on a daily basis. People and visitors also informed us the registered manager actively involved themselves in daily shifts. It was noted that this allowed the registered manager to supervise care workers' practice on an informal basis and we saw evidence of this during the inspection. There was no evidence suggesting people's care and well-being had been negatively affected due to a lack of formal staff supervision. The inspection also highlighted gaps within some sections of the medication charts which had not been signed by the person administering the medication. This was also seen as an area for improvement. Medication audit chart checks were conducted at the end of each month. As the month had not ended, the errors had not yet been identified. However, the home conducted an immediate medication count and everything was found to be in order. They also spoke to people at the home to confirm if they could recall receiving the medication. The home promptly identified who had administered the medication on the days in question and informed us how they planned to address the issue. We received a swift and detailed written response outlining how they dealt with the matter. The home stated they would review the process of how care workers could safely administer medication without interruption in order to minimise potential errors occurring again. Despite this issue, there was no evidence to suggest people's care and well-being had been negatively affected; the home also dealt with the issue in a professional and diligent manner. As a result, people can be confident that the well-being of care workers is prioritised and they are well lead and supported by management.

Documents such as the statement of purpose, service user guide and quality of care report are comprehensive and provide an accurate reflection of the setting. The statement of purpose and service user guide contained detailed information regarding the home's aims and objectives. The documents highlighted people could receive a service in the language of their choice and people confirmed they had received copies of the documents. People clearly knew who the responsible individual was and told us they felt supported and could comfortably share any concerns if deemed necessary. The quality of care report had incorporated feedback from people living at the home, visitors, care workers and external professionals. People told us their views had been obtained and it was noted that no formal complaints had been made. The quality of care report was embedded in operational

planning and included a detailed report regarding environmental improvements completed by the facility manager. People also informed us that they had been kept informed of changes being made to the home through discussions with care workers and management. This shows that people can be confident of receiving care from a service which is committed to quality assurance and constant improvement.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

There are no outstanding areas of non compliance from the previous inspection.

5.2 Areas of non compliance identified at this inspection

There are no areas of non compliance resulting from this inspection.

5.3 Recommendations for improvement

The following are recommended areas of improvement to promote further positive outcomes for people:

- Care plans and risk assessments need to be reviewed in a timely manner to ensure care workers are kept informed of any changes to a persons' situation. We saw evidence on the day that the documents were in the process of being reviewed and were assured they would be completed as soon as possible. During the inspection we provided feedback to the registered manager about this. We subsequently received information from the home before the completion of the inspection report highlighting documents had been updated; they were also written in a person centred manner.
- It is important for care workers to receive regular timely, formal supervision. It is noted that the registered manager has a 'hands on' approach during shifts which results in the direct supervision of care workers. Care workers also felt well supported by the registered manager. Improvement could be made in providing formal supervision on a more regular basis. This would ensure care workers received further consistent support in relation to operational issues.
- In order to minimise potential errors, the person responsible for administering medication should be able to complete the task without being interrupted. An audit of the medication charts is completed on a monthly basis and the home is reviewing ways in which this process could be improved. The home provided CSSIW of a verbal plan of action during the inspection which was deemed satisfactory. Written confirmation of the outcome was received thereafter which corroborated what was discussed on the day.
- To ensure people's dignity, laundry must be returned to its' rightful owner. Information received during the inspection and post-inspection questionnaires highlighted some people were unhappy that some items of their clothing had been mixed up with fellow residents. It is important people receive their correct

items of clothing at all times. It is noted that the home is currently trialling a 'kwik tag' system in an attempt to address this ongoing issue.

- Additional Welsh signage could be introduced within the home. Signs within the home could be bilingual as it would further strengthen the service's position in regard to providing an 'active offer' in relation to the Welsh language. It is noted that the home has introduced some signage and are currently reviewing this.

6. How we undertook this inspection

We, Care and Social Services Inspectorate Wales, (CSSIW), carried out a full unannounced baseline inspection at the home on 16 February 2017 between the hours of 09:30 am and 19:45 pm.

The following methods were used:

- We spoke with people living at the home, two visitors, the registered person, the responsible individual and on duty care workers.
- We viewed the communal areas, kitchen, bathroom, toilet areas and various bedrooms.
- We looked at a wide range of records. We focused upon three people's care records, three care workers' files, statement of purpose, service user guide, the recruitment process, medication records, staff training, fire risk assessment and maintenance plan.
- We used the Short Observational Framework for Inspection (SOFI 2) tool which enables us to observe and record life from a person's perspective and the care provided by care workers.
- Information contained within returned questionnaires.
- Additional information received by the home before the completion of the inspection report which highlighted changes made as per verbal recommendations on the day of inspection.

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

About the service

Type of care provided	Adult Care Home - Older
Registered Person	Gwyddfor Residential Ltd
Registered Manager(s)	Mary Williams
Registered maximum number of places	28
Date of previous CSSIW inspection	10/02/2016
Dates of this Inspection visit(s)	16/02/2017
Operating Language of the service	Both
Does this service provide the Welsh Language active offer?	No
Additional Information:	