

Care and Social Services Inspectorate Wales

Care Standards Act 2000

**Inspection report
Care homes for older people**

Ty Coch Nursing Home (Llanishen)

Ty Coch Nursing Home
105 Station Road
Llanishen
Cardiff
CF14 5UW

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Care and Social Services Inspectorate Wales

Mid & South Wales
 1 Alexandra Gate
 Ffordd Pengam
 Tremorfa
 Cardiff
 CF24 2SA

029 2047 8600

029 2047 8614

Home:	Ty Coch Nursing Home (Llanishen)
Contact telephone number:	029 20 747575
Registered provider:	Passcrystal Limited
Registered manager:	Gaynor Hayes
Number of places:	71
Category:	Care Home Nursing - Older
Dates of this inspection episode from:	10 th April 2010 to: 27 th May 2010
Dates of other relevant contact since last report:	None
Date of previous report publication:	24 th September 2009
Inspected by:	Victoria Davies

Introduction

Ty Coch is situated on the border of Llanishen and Lisvane villages close to the railway station. The home is operated by Passcrystal Limited and the registered manager is Mrs Gaynor Hayes. Ty Coch has provided care to older people for many years. The home opened a new wing last year, which created more single rooms all with spacious en-suite facilities. The new communal areas are light, spacious and welcoming to use. The home has been extended sensitively so that it remains in-keeping with surrounding properties.

The rest of the home has also been subject to refurbishment and re-decoration and it offers 55 single rooms with en-suite facilities. There are 8 shared rooms of two person occupancy.

Facilities within the home are well maintained, in good decorative order and are suitable to meet the needs of the service users.

Since the extension has been completed the main garden area has been landscaped with raised borders and paved areas. It is a very pleasant garden. Everyone living in the home has access to it. The garden is enclosed by the main wings of the home.

Ty Coch care home has maintained consistent standards of care over recent years. Inspection reports show that there have been no regulatory requirements made by the CSSIW since 2007. Management arrangements for the home remain stable and have been effective during this time.

The registered persons at the home have achieved and maintained the quality standard ISO 9001-2008. The registered persons are committed to continually improving the service that they deliver.

Comments from service users and their families during this period have been consistently positive and indicate effective consultation at a service delivery level.

Summary of inspection findings

The home was found to be compliant with all the regulations.

What does the service do well

The inspection identified the following positive aspects of the service provided:

- Information about the home
- Needs assessment and care planning
- Positive working relationships with local healthcare teams
- Pleasant internal and external environment including commitment to building maintenance and continued refurbishment of the original build
- Continued commitment to staff training and development
- Maintaining a stable team
- Maintaining the home's Investors in People status and ISO: 9001/2008.

What has improved since the last inspection?

- The extension to the home has been completed. This has meant the commissioning

of 23 additional beds all with en-suite facilities. The rooms are finished to a very high standard.

- The new extension has a specialised spa bath that any of the people who live at the home can use.
- There is a purpose built laundry that has been designed to meet all aspects of controlling cross infection.
- The garden has been completely re-landscaped.

What needs to be done to improve the service?

a.) priorities

- Review and improve the provision of activities within the home.

b.) other areas for improvement

- Review safe storage for staff's personal belongings while they are on duty.

Inspection methods

Information from this inspection was gathered from the following sources:

- Pre-inspection information provided by the registered persons
- Information gathered from announced inspection
- Discussions with service users and their representatives
- Interviews with the registered manager and the staff team on duty
- Examination of a sample of records maintained within the home
- Visual inspection of the building and its facilities
- Six questionnaires were completed by relatives of persons living at the home
- Two questionnaires were completed by staff working at the home.

A thematic inspection on infection control standards was undertaken during this inspection. A separate section for the report on this thematic inspection will be found at the end of the report headed Infection Control.

Choice of home

Inspector`s findings:

This part of the inspection report looks at whether all prospective and current people living in the home have access to the correct information about life within the home. It also looks at how the home would assess prospective service users to ensure that the home was able to meet all the nursing needs of that person.

The inspector found that the home had produced a statement of purpose and a service user guide that described all aspects of living at the home. Both documents contained all the required information that the regulations state should be there. The documents are very easy to read.

The registered manager or the deputy assesses every prospective person who wants to live at the home. At this assessment the home's administrator also accompanies them to explain about financial aspects of moving into the home with the person they are assessing.

The registered manager will confirm with any prospective person that they have assessed their needs and that the home can meet them. This is done in writing.

Arrangements to help people choose whether they want to live at Ty Coch are satisfactory and the inspector does not need to make any requirements or recommendations.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

Planning for individual needs and preferences

Inspector`s findings:

This section of the report looks at how the people living at Ty Coch have an individualised plan of care written for them. This plan describes how their health, personal and social care needs will be maintained by the staff at Ty Coch. This section also looks at how well this information is kept.

The inspector scrutinised a sample of eight sets of individualised care documentation throughout the care home.

The inspector found that the home has pre-printed risk assessments and care-plans that address every aspect of a persons` life within the home. They are completed at the time of pre-admission assessment by the manager or the deputy and thereafter they are regularly reviewed by a named registered nurse.

The risk assessments that are undertaken include the following:

- Activities
- Personal profile
- Barthel Activities of daily living score
- Psychological
- Diet
- Control of Infection
- Manual Handling
- Mobility

Any changes to care are updated by the nurses and they are reviewed regularly.

The care plans are thorough and they pay close attention to how care should be delivered as well as describing what care is needed.

It was evident that the registered manager takes a very keen interest in ensuring that all care plans are completed and reviewed at regular intervals. The manager regularly audits all the care documentation.

The home ensures that all information is stored securely and confidentiality is maintained.

Arrangements for ensuring that people`s individual health, personal and social care needs are set out in an individual plan of care are satisfactory and the inspector does not need to make any requirements or recommendations.

Requirements made since the last inspection report which have been met:

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Requirements which remain outstanding:

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New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

Quality of life

Inspector`s findings:

This part of the report looks at how a person's autonomy and choice is exercised while living at Ty Coch. It also looks at how a person's lifestyle preferences are upheld in the home and how contact with family, friends and the community is maintained.

The inspector directly observed the nurses and the care staff carrying out the care for the people living at the home.

The inspector observed the following:

- While carrying out care, the staff would be encouraging people to exercise choice and control over how that care activity should be completed. No-one was rushed.
- Every care activity observed was completed whilst maintaining the person's dignity.
- Everyone living at Ty Coch has had their room personalised with their belongings
- The home is clean and orderly
- There is a menu choice for all meals. The food served on the day looked very appetising. Everyone living at the home has a choice of where they would prefer to have their meals. The home caters for specialised dietary needs. Responses from five of the questionnaires relating to the food were very positive including a rating from one relative as "Excellent". However one response felt that the portions served could be improved as well as the timing between meals could be altered.
- The inspector found that records were completed accurately and related to the care plans. Any fluid or dietary sheets were completed correctly.
- Everyone has access to a landscaped garden that is the central focus of the home.
- The home has a dedicated activities person who organises social and community events based upon what the people living in the home have said they would like. However these do not cover every day of the week.
- The home ensures that individual religious observances are maintained as per the preferences of that person living within the home.

Through the information supplied through the self-assessment form the registered persons are seeking to review and improve on the activities within Ty Coch over the next year.

The questionnaires completed by the relatives indicated that they are able to visit any time and are always made to feel very welcome.

A response from one of the questionnaires states the following:

"This is an excellent home with a very good standard of nursing care. It also has a lovely environment with excellent privacy and very comfortable communal areas."

Another response from a questionnaire states:

"(My relative) is genuinely settled and happy. Thank you Ty Coch."

Arrangements for ensuring that the people living at Ty Coch have a good quality of life are satisfactory and the inspector does not need to make any requirements or recommendations.

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Requirements which remain outstanding:

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New requirements from this inspection:

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Good practice recommendations:

None.

Quality of care and treatment

Inspector`s findings:

This part of the inspection report looks at how people are treated while living at the care home. In particular how staff ensure that they uphold a persons dignity and respect while they are living in the home.

Ty Coch has eight double bedrooms and the rest of the rooms are for single. All rooms have en-suite facilities. The inspector viewed two shared rooms and saw that there were curtains that surround the person's bed area with room for care staff to carry out care procedures, thus maintaining privacy and dignity.

The inspector directly observed the nurses and care staff carrying out care procedures and found that every member of staff was respectful towards the person. It was also found that all the staff were very diligent in ensuring that a person's privacy and dignity was upheld in any daily care activity that was carried out. The inspector observed staff knocking on doors before entering and explaining the reason for entering the room. The inspector observed that staff did all care activities at a pace that the person was observably comfortable with. Staff respected the choices made by the persons living at Ty Coch, such as individual preference for waking; getting dressed and engaging with others.

The care home has maintained excellent relationships with the local GP practices and accesses all sources of local healthcare services. The inspector noted that in the sample of care documentation scrutinised that the staff were very quick in picking up a change in a person's health presentation and reporting it to the nurse in charge and then onto a relevant health professional.

The home has two lead nurses in moving and handling who ensure that all the staff know and are able to use the specialised mechanical aids to assist persons in moving and re-positioning in a comfortable and safe way.

The inspector observed a meal being served in the dinning room in the new extension. The tables were all laid and the atmosphere was calm for all persons who were eating their meal to do so in a relaxed manner. The home offers a varied menu specific to individual choice. It also provides specialist dietary requirements. There are two main dining areas at Ty Coch and they are very congenial to social dining. However the focus of meal times is individual preference therefore some people living at the home have their meals in their rooms. The food served during the inspection looked very appetising and the people at the home commented on how much they enjoyed their meals.

All medication is dispensed by the registered nurses and the home has thorough policies concerning all aspects of medication administration.

Arrangements for ensuring that people's quality of care and treatment is satisfactory and the inspector does not need to make any requirements or recommendations.

Requirements made since the last inspection report which have been met:

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New requirements from this inspection:

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Good practice recommendations:

None.

Staffing

Inspector`s findings:

This part of the report looks at staffing arrangements at Ty Coch.

From the information contained in the self-assessment form, Ty Coch has been successful in retaining its registered nurses and carers.

During the inspection activity the inspector observed that there were enough staff members on duty to be very responsive to all care needs of the people living at the home. The staff spoken with explained that staffing during the inspection activity was at the same level as a usual day at Ty Coch.

There is a very stable staff group at Ty Coch and there has been a steady recruitment drive to increase the staff team numbers due to the recent increase in room capacity at the home.

The registered manager explained that they still have not been able to appoint all staff that they would like and do use agency staff. When the home uses agency staff they are supplied with the details of the staff member who is attending and a record of their experience, which is kept on site at the home.

The inspector scrutinised three sets of staff notes and found that the home had completed all necessary pre-employment checks.

There is a good system of staff supervision. All staff have an induction into the home that covers safe working practices and covers mandatory training. All care staff are encouraged to enrol on NVQ courses. Currently there is less than the 50% of the carers trained to NVQ level 2, as required by the national minimum standard. However this is due to the recent increase in staff numbers and the registered persons are actively addressing this so that the home does meet this minimum standard. The registered manager and the nurses are proactive in maintaining their professional practice and they regularly access specialist seminars.

The staffing arrangements at Ty Coch are satisfactory and the inspector does not need to make any requirements or recommendations

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Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

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Good practice recommendations:

None.

Conduct and management of the home

Inspector`s findings:

This section of the report looks at how the home is managed and what arrangements there are for reviewing and developing the service. It also looks at the policies and procedures used by staff to ensure a responsive service to the needs of people living at the home is promoted.

The manager is appropriately qualified and proactively maintains her professional knowledge by attending specialised courses. The manager has an open style of management and the staff feel very well supported by her. The manager spends regular periods of time working alongside the care team delivering nursing care. This approach maintains the standards of care that the manager expects from all the team.

The persons living at the home clearly relate to the manager well. The manager has a thorough approach to administration and on the evidence at the inspection Ty Coch is operating to a high standard.

The registered persons at Ty Coch use ISO: 9001/2008 for its quality assurance system and employs a quality co-ordinator who audits specific themes to a pre-determined plan throughout the year.

The manager is very proactive in consulting with the persons living at Ty Coch and their representatives about the quality of care. This is done through the home’s own questionnaire, direct communication with the persons living at the home, meetings and a concerns book. The registered manager explained that she is in constant dialogue with the persons living at Ty Coch and other stakeholders on a regular but informal basis.

There are regular meetings held by the registered persons and the management team to discuss service improvement. The responsible individual, who is the director of the home, visits regularly and gives feedback directly to the registered manager.

The registered manager ensures that every room has a copy of the service user guide, which has relevant information about the home.

The home is well run and the inspector does not need to make any requirements or recommendations.

Requirements made since the last inspection report which have been met:

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Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

Concerns, complaints and protection

Inspector`s findings:

This section of the report of the report looks at how people living at Ty Coch are able to express any concerns or make complaints. It also looks at how people living at Ty Coch are protected from abuse or neglect.

The home has a satisfactory complaints procedure.

Arrangements for dealing with complaints and concerns and for protecting people from neglect or abuse are satisfactory and the inspector does not need to make any requirements or recommendations.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

The physical environment

Inspector`s findings:

This section of the report looks at the building, the way it is furnished and decorated and any specialist equipment.

- The new extension is finished to a high specification
- The laundry is purpose built
- The home has service contracts in place for maintenance of specialised systems and care equipment.
- There are plans to continually improve the remainder of the home so that the high specifications in the new extension are continued throughout the home.
- The home has a welcoming homely feel
- The sensory gardens are well maintained and all service users can have access to them
- The home has its own domestic team, laundry team, catering team and maintenance team.
- It was observed that all the teams work cohesively together to ensure that the home`s environment is maintained to a very comfortable standard.

The premises are satisfactory and the inspector does not need to make any requirements or recommendations.

Requirements made since the last inspection report which have been met:

Action required	When completed	Regulation number

Requirements which remain outstanding:

Action required (previous outstanding requirements)	Original timescale for completion	Regulation number

New requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

A note on CSSIW's inspection and report process

This report has been compiled following an inspection of the service undertaken by Care and Social Services Inspectorate for Wales (CSSIW) under the provisions of the Care Standards Act 2000 and associated Regulations.

The primary focus of the report is to comment on the quality of life and quality of care experienced by service users.

The report contains information on how we inspect and what we find. It is divided into distinct parts mirroring the broad areas of the National Minimum Standards.

CSSIW's inspectors are authorised to enter and inspect regulated services at any time. Inspection enables CSSIW to satisfy itself that continued registration is justified. It also ensures compliance with:

- Care Standards Act 2000 and associated Regulations whilst taking into account the National Minimum Standards.
- The service's own statement of purpose.

At each inspection episode or period there are visit/s to the service during which CSSIW may adopt a range of different methods in its attempt to capture service users' and their relatives'/representatives' experiences. Such methods may for example include self-assessment, discussion groups, and the use of questionnaires. At any other time throughout the year visits may also be made to the service to investigate complaints and to respond to any changes in the service.

Readers must be aware that a CSSIW report is intended to reflect the findings of the inspector at a specific period in time. Readers should not conclude that the circumstances of the service will be the same at all times.

The registered person(s) is responsible for ensuring that the service operates in a way which complies with the regulations. CSSIW will comment in the general text of the inspection report on their compliance. Those Regulations which CSSIW believes to be key in bringing about change in the particular service will be separately and clearly identified in the requirement section.

As well as listing these key requirements from the current inspection, requirements made by CSSIW during the year, since the last inspection, which have been met and those which remain outstanding are included in this report. The reader should note that requirements made in last year's report which are not listed as outstanding have been appropriately complied with.

Where key requirements have been identified, the provider is required under Regulation 25B (Compliance Notification) to advise CSSIW of the completion of any action that they have been required to take in order to remedy a breach of the regulations.

The regulated service is also responsible for having in place a clear, effective and fair complaints procedure which promotes local resolution between the parties in a swift and satisfactory manner, wherever possible. The annual inspection report will include a summary of the numbers of complaints dealt with locally and their outcome.

CSSIW may also be involved in the investigation of a complaint. Where this is the case CSSIW makes publicly available a summary of that complaint. CSSIW will also include within the annual inspection report a summary of any matters it has been involved in together with any action taken by CSSIW.

Should you have concerns about anything arising from the inspector`s findings, you may discuss these with CSSIW or with the registered person.

Care and Social Services Inspectorate Wales is required to make reports on regulated services available to the public. The reports are public documents and will be available on the CSSIW web site: www.cssiw.org.uk

Thematic Inspection: Infection Control

Summary of inspection of infection control findings

- The registered persons adopt appropriate arrangements to protect service users from the risk of infection.
- The building throughout was clean and well maintained.
- Infection control measures are supported by a range of procedures that support staff activities in areas presenting risk.
- The home has achieved ISO 9001-2008 and as a result all aspects of infection control are regularly audited.

What does the service do well?

All the staff work in a way that actively promotes good control of infection within the home.

The registered manager regularly works alongside the staff to ensure that the standards expected for control of infection within the home are maintained.

What needs to be done to improve the service?

a.) priorities

There are no regulatory requirements or good practice recommendations

b.) other areas for improvement

None identified

Inspection methods

Information for this thematic inspection was obtained by the following methods:

- Review of the information contained within the completed self-assessment documentation
- Information gathered from the announced inspection
- Discussion with service users and their representatives
- Interviews with the manager and the staff
- Examination of records maintained within the home
- Visual inspection of the building and its facilities
- Direct observation of practice.

Quality of care and treatment

Inspector`s findings:

- Hand hygiene- every member of staff was observed to wash their hands after every care activity. There are hand-washing facilities in every service user’s room, clinical areas, bathrooms and toilets.
- Personal protective equipment-the staff wear uniform and have access to aprons and gloves.
- Prevention of occupational exposure- the home has risk assessments completed for every potential hazardous situation involving such exposure
- Management of blood and body fluid spillage-the home has polices and procedures to manage such a situation
- Decontamination of care equipment-the home has policies and procedures to manage this.
- Cleanliness of the environment-there is a team of regular domestics who keep the home clean.
- Handling of linen-the home has policies and procedures for the management of all laundry items. There is a purpose built laundry with a ‘dirty’ area and a ‘clean’ area. The home has its own laundry staff
- Disposal of waste-the home has a policy and procedure for managing clinical waste and household waste.
- The home has regular audits that cover all aspects of its control of infection policy and procedures.
- Every service user has a risk assessment completed that covers their unique needs of control of infection.
- Any clinical procedures are clearly communicated through the service user care plans.

The inspector does not need to make any requirements or recommendations.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

Staffing

Inspector`s findings:

- All the staff have a personal learning plan and part of this includes regular training on control of infection. The training materials are on site and easy for staff to access. The manager ensures that staff have time allocated to them to complete control of infection training.
- All the staff have uniforms and access to gloves, aprons and cleaning materials as needed.
- All new staff complete control of infection training as part of their induction.
- There are dedicated domestic staff, that have their own cleaning schedules and have had training in control of infection.
- The home has its own laundry and dedicated laundry staff who are trained in infection control procedures.
- The staff are regularly supervised and the registered manager is very approachable. The registered manager regularly works alongside the staff.

The inspector does not need to make any requirements or recommendations.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

Conduct and management of the home

Inspector`s findings:

- The registered manager is proactive in ensuring that the expected standards for control of infection are adhered to by regularly working alongside the staff team.
- There has been one outbreak of an infectious disease since the last inspection. The registered manager then closely liaised with external professional agencies to contain and resolve the outbreak effectively.
- The control of infection policy is regularly audited.
- The home is managed effectively in that staff have access to all equipment and training required to maintain an effective standard of control of infection.

The inspector does not need to make any requirements or recommendations.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

Concerns, complaints and protection**Inspector`s findings:**

There have been no concerns, complaints or protection issues in the home with regard to control of infection.

The inspector does not need to make any requirements or recommendations.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.

The physical environment

Inspector`s findings:

- The home is very well maintained. The new extension is completed and finished to a high specification.
- Throughout the rest of the building the home is also well maintained and kept in excellent decorative order.
- All the furnishings throughout the home are in good order. Any repairs are completed quickly.
- Bed frames were noted to be clean and dust free as were all working surfaces.
- All specialised care equipment is cleaned and decontaminated after each use.
- Mattresses are wiped down and cleaned regularly.
- The smaller kitchenettes on each unit are clean and functional.
- All the clinical areas were clean and kept in an orderly manner.
- There are hand-washing facilities available in every service user`s room and at critical points throughout the home.
- All rooms have en-suite facilities.

The inspector does not need to make any requirements or recommendations.

Requirements from this inspection:

Action required	Timescale for completion	Regulation number

Good practice recommendations:

None.