



## Inspection Report on

**Clynsaer House**

**Clynsaer House  
Llandovery  
SA20 0LP**

## **Date Inspection Completed**

18/01/2024

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## About Clynsaer House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Oakview Care Limited
Registered places	11
Language of the service	English
Previous Care Inspectorate Wales inspection	13 December 2022
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 are happy at Clynsaer House. An established staff team promote a relaxed atmosphere which helps people and visitors feel at ease. Each person is encouraged to make their own decisions in how they spend their time. People lead happy and fulfilling lives and do a wide range of things that are important to them.

All employees demonstrate a good knowledge of the people in the home and care records clearly describe how care workers are to meet each person's individual needs. The enthusiastic staff team want to make a positive difference to people's lives and ensure people are invited to be fully involved in all discussions about their support. Care workers say they are well-supported by the manager and other senior staff. Good communication channels are evident, with robust monitoring of the quality of care people receive. The Responsible Individual (RI) regularly talks to people who live in the home, their relatives, other healthcare professionals and care workers to obtain feedback about the service.

### Well-being

People at Clynsaer House have as much control over their day-to-day lives as they wish and know what opportunities are available to them. Care workers invite people to become involved in their support arrangements: the manager ensures that each person meets with their keyworker each month to make plans for their social lives and to discuss any anxieties they may have. Personal plans contain personal preferences and backgrounds of the people they describe. The manager gives people a copy of the service user guide when they arrive; this provides details of what they may expect as well as details of the complaints process should they need to use it. In addition, people have access to independent advocacy services when they want support in issues that affect them. People are encouraged to personalise their surroundings in line with their interests and hobbies. Care workers have good relationships with people and work alongside them in positive ways, with good-humoured conversations.

People are relaxed, comfortable and know what opportunities are available to them. They do things that make them happy and each person is as active as they wish to be. This includes partaking in their hobbies, arts and crafts. There are two activity coordinators who plan and evaluate people's plans for their leisure time. People have visited safari parks in England, regularly go to the cinema and recently, a holiday in Spain. The provider has also developed the land around the main building into a woodwork shop, an arts and crafts room and a sensory room. We spoke to some very excited people about their projects in these areas: one person showed us their artwork and proudly said, "*I did that.*"

The service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort in promoting the use of the Welsh language and culture. There is a communication board in the main area of the home that contains bilingual information and a minority of the staff team speak Welsh, together with one person in the home who does converse in Welsh occasionally. However, while there is no demand currently for exclusively Welsh speaking support, the manager agrees with the necessity of providing an Active Offer in the event that the home supports anyone who does prefer to communicate in Welsh. To this end, the manager is considering having the home's statement of purpose and written guide to be made available bilingually so that people will not have to ask for them.

Overall, people have accurate plans for how the service provides their support. The provider considers a range of information to ensure they can meet people's needs. A detailed electronic recording system is currently being introduced, with the staff team inputting information onto the system via handheld devices. This is providing a clear and up to date record of people's support arrangements. Assessments of each person's physical and mental health help to maintain people's independence. We also saw care workers regularly giving people the time they needed to talk about any anxieties.

Care workers are supportive and engage with people in positive ways, to remain positive and healthy. People say they feel safe, and employees protect their privacy and personal information at all times. Care workers have been through the provider's thorough recruitment process. Senior staff oversee care workers to ensure they are meeting people's needs as directed. All care workers receive support and training and access policies and procedures to understand their responsibility to protect the people they support.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Care records clearly state any risks to people's health and well-being, and detailed risk management plans help to keep people safe and as independent as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach any of the senior staff team but would also contact external agencies such as the local safeguarding office if they thought they needed to.

## Environment

Overall, people receive support in a good environment. The home is safe, warm and clean and located in a rural area. People say they feel comfortable, happy and can choose different areas to use: there are various communal areas, as well as extensive grounds where people can spend time working, or relaxing with friends and relatives. The manager has made attempts to develop the outside lawn area but people seem to prefer it as it is – without any planting. As the location is rural, with woodland and a stream nearby, the grounds have been made secure by the use of strong wooden fencing throughout the premises. All rooms are spacious and personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture. Communal areas are well decorated with peoples' artwork.

Good infection control procedures are in place. Fire exits are free of obstructions and maintenance records evidence weekly fire alarm tests. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002 and the manager completes regular audits of the environment.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry. Everyone records their visits in the visitor's book when entering and leaving. Care records are only available to authorised members of the staff team. Employee personnel records and other personal information, such as Deprivation of Liberty Safeguards (DoLS) records, are stored securely in the manager's office. People who are not restricted by DOLs have key fobs to exit the premises independently whenever they wish.

Overall, the provider has a clear vision of the support it provides, and a positive regard for each person receiving support. There is good management oversight of the service and the RI is in regular contact. Audits monitor all aspects of people's lives and any issues that arise are promptly resolved. Regular discussions take place with people in the home, their family members and healthcare professionals involved in their care. People know how to make a complaint if they need to.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. There is very good staff retention, which means the staff team are well-known to people in the home. Pre-employment checks take place before new employees start work: these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to individual learning outcomes and the 'All Wales Induction Framework for Health and Social Care.'

Care workers are up to date with their essential training, together with specific training relevant to the home. Care workers say this provides them with a good understanding of their roles and responsibilities and the best ways to support people. Regular staff meetings give care workers the opportunity to discuss their work and to keep current with all developments in the home. All aspects of the service are summarised in three-monthly visits from the RI and six-monthly quality of care reports. Employees discuss any issues they wish to raise in confidential three-monthly supervision meetings.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

### Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
36	The provider does not consistently provide quarterly individual supervision for staff. All staff are not fully up to date with core training.	Achieved



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