

Clynsaer House  
Cynghordy  
Llandovery  
SA20 0LP

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South West Wales  
 Government Buildings  
 Picton Terrace  
 Carmarthen  
 Carmarthenshire  
 SA31 3BT

01267 245160  
 01267 245140

Home:	The Clynsaer Care Home
Contact telephone number:	01550 750224
Registered provider:	Oakview Care (Llandeilo) Limited
Registered manager:	Martin Pask
Number of places:	10
Category:	Care Home - Younger Adults
Dates of this inspection from:	10 September 2010 to: 18 January 2011
Dates of other relevant contact since last report:	
Date of previous report publication:	29 January 2010
Inspected by:	Lynne Beech

The Clynsaer was owned by Oakview Care Ltd and managed by Mr Martin Pask. The home offered personal care and accommodation for up to ten adults between the ages of 18 and 64 whose need for care arose primarily from a learning disability. The Clynsaer was a detached property situated in rural surroundings some six miles from the town of Llandovery.

- ♥ The service continues to meet the needs of service users in a flexible manner
- ♥ Record keeping was undertaken to a high standard
- ♥ Emphasis was placed on staff training and supervision

- ♥ Record keeping has continued to improve since the last inspection
- ♥ The activities offered within the care home have been further extended with the development of the on- site workshop and appointment of an activities co-ordinator

One bathroom requires re-furbishing. This is on the development plan and will be addressed over the forthcoming months.

The methodology of the inspection process included:

- ♥ One unannounced inspection visit on 8 December 2010
- ♥ Time spent speaking to service users at the home
- ♥ Time spent speaking with staff members
- ♥ A discussion with the registered manager and assistant manager
- ♥ Case tracking of service users, involving scrutiny of all documents and records for the last twelve months
- ♥ Examination of medication records
- ♥ Examination of staff files
- ♥ Supervision and appraisal records
- ♥ Examination of the complaints records and accident / incident records

## ♥ Tour of the premises

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.

A clear and informative Statement of Purpose and Service User Guide had been produced. These documents had been reviewed and updated appropriately in order that they continued to provide relevant information for current and prospective service users and their representatives.

Six service users' files were selected for inspection. Files inspected evidenced that a comprehensive assessment of need had taken place prior to service users entering the care home. Extensive consultation had taken place with all relevant professionals and family members in addition to the service user. In instances where service users had been referred through the care management system a copy of the assessment and care plan was kept in the files of service users alongside those of the care home.

Training records demonstrated that staff at The Clynsaer had the skills and experience necessary to deliver the service and care outlined in the Statement of Purpose.

A letter to confirm that staff at the care home can meet the assessed needs of the prospective service user was forwarded, a copy of which was kept in the file of the service user.

Prospective service users were invited to visit the home, together with family members and representatives if appropriate, in order that they could meet with staff and service users. Service users were admitted to The Clynsaer on a three month trial basis before a decision to stay on a permanent basis was made.

A written contract or statement of terms and conditions was issued to all service users, a copy being kept on individual files.




Service user files were maintained in very good order and contained information which was clearly presented and easy to locate. Assessment and care planning documentation was informative and demonstrated a good recent knowledge of each service user. This was assisted by the fact that a key worker system was used. Records clearly identified the assessed needs of the service user, the means by which these needs would be met and the persons responsible for this.

Specialist and professional advice, for example, from the medical services, dietician, physiotherapist and social services, was sought appropriately and noted clearly in assessment and care planning documentation. Care plans which were developed by the funding authority were kept in service user files alongside those developed by the care home in order to ensure consistency of care.

All service user files examined demonstrated that risk assessment had taken place. These included personal and environmental risk and had been reviewed regularly in order to ensure their continued relevance.

Service users were encouraged to participate in the daily running of The Clynsaer with support from staff members as needed. Service user meetings, which were minuted, were held regularly and offered an opportunity for individual or collective views to be expressed regarding the service and to contribute to its development.

A policy on confidentiality had been developed and was included in the induction training which all new members of staff undertook. Records kept within the care home were held securely and confidentially.




The registered persons continued to ensure that service users had opportunities to maintain and develop social, emotional, communication and independent living skills. A wide variety of leisure and therapeutic activities was offered to service users, as documented in individual service user files. Many of these were offered within the specifically designated arts and crafts building situated in the grounds of the care home. Emphasis continued to be placed on assisting service users to lead a busy and meaningful lifestyle. The workshop, located in the grounds of the home, had been further developed and offered an opportunity for service users to participate in a wide variety of activities, for example, cooking and kitchen skills, menu management, budgeting, woodwork, arts and crafts, photography, music and computer skills. Plans had been made for service users to participate in horticultural activities during the forthcoming summer months. Service users were assisted to identify new areas of interest and these were discussed at the residents' meetings. Links have been made with the local colleges and service users were encouraged and assisted to attend relevant training courses.

Staff at the care home supported service users to maintain and develop family links and friendships both within and outside the home. Service users were assisted to visits family members where appropriate. Family and friends were welcome to visit at any time in line with the wishes of the service users.

Daily routines within The Clynsaer continued to be relaxed and informal. Service users were expected to keep their own rooms clean and tidy and to assist with daily tasks within the home where possible. Staff were observed treat service users with respect throughout the inspection visit and knocked on all bedroom doors prior to entering. Staff used the means of address preferred by service users and this was recorded on individual service user files. Service users were able to access all areas of the care home freely.

Mealtimes continued to play an important part in the social life of the home. The dining room had been re-located and offered a spacious and bright environment enabling service users to take meals in a relaxed and unhurried atmosphere. Special dietary needs were catered for if required and individual preferences were well known to staff members and documented in service user files. Service users assisted in shopping for and preparing meals and discussion with the activities co-ordinator indicated that this area would be further developed in future.




Personal care was provided at The Clynsaer. An effective key worker system was in operation and the manager had developed documentation which fully described the means by which this was to be implemented. Throughout the inspection visit staff members were seen to be sensitive in their approach to service users. Staff knocked on all bedrooms doors prior to entering and addressed service users by their preferred names as noted in care plans. Service users received visitors privately if they wished and medical consultations were carried out in private within the care home.

All service users were registered with a general practitioner. Specialist health and social care professionals were consulted appropriately and a record of contact made and visits to the home was maintained in the files of service users. Optical, dental and chiropody services were accessed appropriately as documented in individual service user files.

Policies and procedures for the safe storage, administration, recording and disposal of medication had been developed. The registered manager confirmed that although senior staff members were responsible for the administration of medication, all staff received training on medication issues in case they were called on to administer it. Medication was supplied by Boots pharmacy, in a pre-packed system for each service user.




A clear staff structure continued to operate within The Clynsaer. The registered manager had a good knowledge of the needs of the service users and was well supported by the assistant manager. Staff spoken with on the day of inspection indicated that they had good knowledge of their roles and responsibilities. When employing staff the management were mindful of the impact which a prospective staff member might have on the service user group as a whole.

A robust staff recruitment procedure continued to be in place. All six staff files which were viewed were maintained in good order and contained the required information which was easy to locate. All files examined contained two relevant references and evidence that current enhanced CRB checks had been undertaken. Once appointed staff members undertook a comprehensive induction training programme which was signed when each identified area had been completed.

The staff team was made up of sixteen staff members in addition to the registered manager and assistant manager. Care staff also undertook catering and cleaning duties. Staff rotas demonstrated that sufficient staff were on duty both during the day and at night to meet the assessed needs of the service users. The manager and assistant manager demonstrated through discussion that they were aware of the need to monitor the dependency levels of service users in order to ensure that the numbers of staff on duty remained appropriate. A dedicated staff sleep-in room was available. Both male and female staff were available within the home.

Staff training had continued to receive attention over the past year and records evidenced that the majority of staff had received training in all key areas. Specialist training was also offered appropriately, for example, in the management of epilepsy and autism.

The registered manager had attained NVQ level 4 and the assistant manager NVQ level 4 in Care and Management. A commitment continued to be made to supporting staff to undertake relevant NVQ awards with well over 50% of staff having achieved at least level 2 or equivalent.

The assistant manager continued to demonstrate a very responsible attitude towards staff supervision and training. Staff received supervision every two months with a senior member of staff and signed records were maintained. Annual staff appraisals were undertaken by the manager.




The registered manager had considerable experience in the care of younger adults with a learning disability, having been the manager of The Clynsaer prior to its acquisition by Oakview Care Ltd. He had achieved NVQ level 4 in 2007.

The manager and assistant manager continued to have a good working relationship and managed the home well between them. Lines of accountability within the home remained clear and were understood by those members of staff spoken with.

The manager and assistant manager continued to be very visible within the home and knew the needs of service users well. The responsible individual continued to visit on a very regular basis and continued to be involved in overseeing the running of The Clynsaer. The manager, assistant manager and responsible individual liaised closely by telephone and e mail communication.

Quality assurance within the home continued to be comprehensive and informative. Information was based on the findings of questionnaires which were distributed throughout the year and on direct discussion. Observation of development plans evidenced that the information gained from quality assurance, together with that gained from frequent visits to the care home, was used by the registered persons to inform future development within The Clynsaer.

Policies, procedures and guidelines were examined prior to and during the inspection episode. These continued to be clearly written and informative and had been reviewed on a regular basis in order to ensure that they were up to date and relevant. Policies and procedures were available to staff members at all times, master copies being maintained in the office in a central file.

Accidents and incidents continued to be appropriately recorded and reported in accordance with Regulation 38 of the Care Homes (Wales) Regulations 2002.






A clear complaints policy and procedure had been developed. This was very specific, outlining the means of handling the means of handling oral and written complaints which might be made about the service and included timescales involved and alternative sources of contact, for example, the CSSIW. A whistle-blowing policy was in place. Service users appeared to be comfortable in reporting any concerns which they had to staff members or to the manager.

Two complaints had been received by the manager since the previous inspection. Both had been managed internally and had been concluded at the time of inspection.

All but recently appointed staff had received training in the area of adult protection. No referrals had been considered under adult protection over the past twelve months. A copy of the local authority Adult Protection Procedures was kept in the office and was accessible to all members of staff.




The Clynsaer was located just outside the rural village of Cynghordy, approximately five miles north of Llandovery, on the Carmarthenshire/Powys border. It was a large old mansion house set within its own spacious grounds. Accommodation for service users was in the main house but some of the outbuildings had been converted into workshops to be used by service users for activities during the day.

Oakview Care Ltd purchased The Clynsaer in 2006. Since this time there had been a major investment of time and money in upgrading the premises. The refurbished areas had been completed to a high quality resulting in a marked improvement in the environment for service users.

A continual programme of refurbishment was in place with several areas within the care home being painted and decorated over the past twelve months. Service users' rooms were comfortably furnished and had been personalised with individual belongings. Shared areas within the home were well maintained being decorated to a good standard and homely in character.

The workshops situated in the grounds of the care home had been further developed over the past year providing service users with facilities in which they could pursue a varied number of activities. The appointment of an activities co-ordinator ensured that service users proactively maintained and furthered the activities in which they participated.

The premises were kept clean, hygienic and free from offensive odours throughout. Systems were in place to control the spread of infection. A dedicated laundry room was located within the home.




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](http://www.cssiw.org.uk)

Service user's rooms appeared to be clean and all communal areas were clean and free from offensive odour. Policies and procedures were in place to control the spread of infection. Cleaning schedules were in place.

- ♥ A visual inspection of the home, including bedrooms, bathrooms, communal areas and staff offices evidenced that all areas were kept clean and tidy
- ♥ A strong emphasis was placed on staff training in the area of infection control

One bathroom was in need of refurbishment. This was included in the annual development plan for the home and will be addressed during the forthcoming year

- ♥ The Inspection list Aid Memoire
- ♥ Observation of documentation including policies and procedures
- ♥ Discussion with staff
- ♥ Feedback from service users
- ♥ Visual inspection of the building and equipment used

Protective clothing such as disposable gloves and aprons was available to staff to ensure that any care provided would be given safely. Appropriate risk assessments were in place. These had been reviewed regularly to ensure they remain appropriate to the service users' needs.


Care staff also provided domestic and kitchen services. An infection control policy was in place which all staff had access to.

The self assessment documentation indicated that all but recently appointed staff members had attended training in infection control. This also formed part of the induction process for all new staff. All staff had access to the Infection Control Policy.


Policies and procedures, which were regularly updated, were available for the control of infection.

Food was stored appropriately and records were maintained of the fridge and freezer temperatures.

Cleaning schedules were in place.


There were no issues regarding the service


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The workshops situated in the grounds of the care home had been upgraded over the past year providing service users with facilities in which they could pursue a varied number of activities.

The premises were kept clean, hygienic and free from offensive odours throughout. Systems were in place to control the spread of infection. A dedicated laundry room was located within the home.
