



## Inspection Report on

**Ty Canol**

**Neath**

## **Date Inspection Completed**

10<sup>th</sup> October 2022

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## About Ty Canol

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	National Autistic Society
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	09/01/2020
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

Ty Canol is a community-based service which supports adults over the age of eighteen with autism. This is an excellent service well situated in the local community and having access to resources through the National Autistic Society. Individuals are engaged through active support and person-centred planning to enable them to meet their outcomes, wishes and aspirations. This is achieved through good governance, strong quality personal planning and well thought through risk assessments. People are supported by a staff team who understand their needs and the importance of keeping the person at the centre of what they do. Staff are appropriately recruited and have the necessary skills, knowledge, and training to support people to achieve their goals.

## Well-being

Peoples physical and emotional well-being is supported well. People receive very good quality care and support which is person centred and tailored to meet their needs. We saw people actively supported and engaged in activities. Consistently supported by good quality, informed risk assessments and well written personal plans encouraging the voice of the individual to be heard. People and families are supported to be involved in the planning and review process. A professional told us. *"I wish this service was a flagship for others of its kind. A lot could be learned! Excellent!"*

We saw strong governance and oversight of the service. The Responsible Individual (RI) and management team have effective communication and good quality monitoring processes in place to safeguard vulnerable people. There is consistently good communication through team meetings and constructive quality monitoring reports involving staff & people.

People feel safe, secure, and protected from abuse and neglect. People are supported by skilled staff who have received safeguarding training and who understand their responsibilities. People who have limited capacity have safeguards in place supported by advocates, and relatives. There are safeguarding policies and procedures in place regularly reviewed by the provider.

Peoples physical and mental health is maintained. People are supported by a core of staff who can recognise any deterioration or change with the individual. Documents seen show consistent recording and reviewing of changes in health or behaviour and are supported by staff to access local healthcare professionals. Relatives told us; *"I was always concerned about their teeth, but you know staff made sure that they got treatment and went to the dentist regularly"*.

People are supported to maintain and strengthen family and personal relationships. We saw the service promote family involvement through conversations with relatives, and their inclusion in the care planning and review process. Relatives told us the service provider offers opportunities for families to meet within and outside the service.

People live in accommodation that suits their needs and supports them to achieve their outcomes. We saw admission processes and assessment documentation in place to reflect this. The service is well situated and maintained with good community access and the support of the National Autistic Society Day service. The property and decor reflect the individuals and supports their choices.

## Care and Support

The provider considers a wide range of views and information to confirm their ability to meet the needs of the people they support. A summary of the admissions process is included in the service's Statement of Purpose (SoP). We saw personal planning and assessment documentation in place for people that shows the involvement of families and advocates in the process. Staff told us; *"I understand, and I am confident with the plans in place, they support you and remind you of what you're supposed to do"*. We saw the service user guide which is an excellent document and explains what people can expect from the service and how it is tailored to the individual needs of people.

People are supported with well written accurate and up to date personal plans that reflect their needs. We looked at two files and saw processes in place to encourage goal planning with aims and objectives for people to strive for. Goals are clearly set out and easy for staff and people to follow. There is an "about me" document in place which gives history and information of importance about the person, underpinning their care and support needs. We saw personal plans are reviewed regularly to support the well-being of people. Relatives told us; *"they keep me involved when they have a review"* and *"they tell me what's happening, and I attend the reviews"*. Standards of care and support are very good and some of the people with communication needs are supported through advocacy. We saw pictorial communication tools being used to support people to make choices. A professional told us; *"I feel that people are supported, and their families are involved in all aspects of care and support planning. Communication is excellent between the staff, and all involved"*.

The provider has mechanisms in place to safeguard people they support. The service has safeguarding policies and procedures which are regularly reviewed. Staff are aware of the safeguarding process and feel confident to raise a concern if they have to. Staff receive safeguarding training. Staff told us; *"I would say the National Autistic Society are very good at embedding safeguarding within the training for all of their staff"*. We saw Deprivation of Liberty Safeguards (DoLS) are in place for people who lack the capacity to make decisions about their accommodation, care, and support.

There are safe systems in place for the management of medication in the service and to help maintain people's health. The provider has policies and procedures in place around the safe storage of medication. We saw medication stored securely with appropriate temperature checks. The provider has documents showing regular auditing of medication administration records (MAR) which are completed correctly

## Environment

The property meets the needs of people. It is a large three-bedroom spacious home with a huge garden looking out over hills. People and staff are friendly and welcoming. There is good access to the local community and there is opportunity for people to socialise with people from other homes within the National Autistic Society. We saw people are comfortable in their surroundings and communal space is more than enough to meet their needs. We saw the interior of the service is in need of some updating. This has already been highlighted by the provider and there is a schedule of work and budget in place for completion. A professional told us; *“I found the service to be clean and comfortable. There was evidence of recent updating of the home environment and care, and attention was taken to ensure the safety of its residents whilst ensuring they had choice in decoration”*. We found all bedrooms reflect the individual’s personal taste.

The provider has systems in place to identify and mitigate risk to the health and safety of people. Risk assessments around fire Control of Substances Hazardous to Health (CoSHH) and water are in place. All safety checks including fire, water and gas are carried out regularly. The service is secure with a lockable gate and a key code entry system. The provider has considered individuals wishes and preferences in the furnishing and decor of the property promoting their independence. A business continuity plan is in place and reviewed regularly to safeguard individuals in the event of an emergency. A professional told us; *“I believe that the service is excellent and, with the current updates being put in place, there is nothing that I would change about the service at this time”*.

## Leadership and Management

The provider has consistently good governance and quality monitoring arrangements in place, which supports the smooth operation of the service. The service has a new manager in post who has the relevant skills and qualifications to support people with autism. The provider has a small core of well trained and skilled staff, supported by an internal relief team of staff. Staff and relatives told us the manager is very supportive, knowledgeable, and approachable. There are policies and procedures in place which are reviewed on a regular basis. The guide to services is tailored to the needs of the individual and the SoP is well presented and fully reflects the service being provided. A professional told us; *“This service is without question the best in the area of its kind”*.

The service has good systems in place to monitor and review the quality of care and support being provided. The Responsible Individual (RI) takes an active role in the service which is evidenced in the three-monthly reports they produce following their visits. The report shows the manager has clear guidance on their role and responsibilities and actions to be taken for improvement of the service. The provider has oversight of financial arrangements and invests in the service. We saw suitable staffing levels on the day of inspection this was confirmed by staff and daily schedules.

The service provider operates a culture of openness honesty and candour throughout all levels of the service. Team meeting documents show that staff are encouraged to be open about the service and their well-being is supported. Relatives told us the manager is approachable and will listen.

Individuals are supported by a service that meets their needs. There are suitably qualified staff who have the knowledge, training, and experience to support people to meet their individual needs and outcomes. Staff told us; *“I’m very happy with the training that was supplied from the National Autistic Society with regards to being care staff, I have done quite a lot of training including training for career progression. I’m very happy and feel supported by National Autistic Society”*. An overall training plan supports this statement, and all staff are registered with Social Care Wales or working towards this. We looked at three staff files, all recruitment documentation is in place along with supervision records. Staff told us *“The manager is great, very supportive, helping me with my qualification.” and registration with social Care Wales”*.

### 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
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