



Inspection Report on

Ty Anwen

**Ty Anwen
The Bryn Trethomas
Caerphilly
CF83 8GL**

Date Inspection Completed

29/11/2022

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About Ty Anwen

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Pobl Care and Support Limited
Registered places	16
Language of the service	English
Previous Care Inspectorate Wales inspection	22 June 2021
Does this service provide the Welsh Language active offer?	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

Ty Anwen is registered to provide care and support for up to 16 people. The service focusses on the rehabilitation of people with mental ill health to prepare them to live more independently when they are ready to do so. People living at the service told us they feel safe and well supported.

Personal plans are clearly written and instruct care workers on how best to support people. Plans are reviewed regularly to make sure they reflect people's current needs and aspirations. Care records are kept accurately and consistently.

The service benefits from a strong management team, who have created a positive and therapeutic culture to support people in. Each person has their own studio flat, with kitchen and bathroom facilities, the home also benefits from pleasantly decorated and furnished communal rooms.

The Responsible Individual (RI) visits the service regularly and is supported by a senior management team to have an effective oversight of the running of the service. Complex care project workers are the care workers who provide the day-to-day support to people. The care team feel very well supported in their roles and appreciate the positive and inclusive way in which the service is managed.

Well-being

People have control over their day-to-day lives as much as possible. We saw people socialising with each other and engaging with care workers. People choose where to spend their time. We saw some people spending time in their flats, others being supported with daily chores and going into the local community. The service employs an enablement and engagement coordinator who organises group trips and activities as well as consulting with individuals how they would best like to spend their time.

People have regular house meetings to give their views on the running of the home. The home welcomes visitors in line with current guidance and the providers risk assessments. People we spoke to were very complimentary about the home and care staff. One person told us *“It is absolutely amazing here; the staff are very supportive and there are always plenty of them around. We do loads of events like the summer beach party we had. The manager is fab, she is very involved. They have all helped me to improve my skills and confidence, above all they are nurturing.”* Another person told us *“This is the best place I have ever been the staff help me a lot and are always around to talk to if I am feeling low.”*

People are encouraged to engage in voluntary work or educational courses in the local community, although some of these opportunities have been restricted during the pandemic.

People receive the support they need to maintain their health and well-being. The service completes a range of risk assessments and personal plans, which identify each person's care and support needs and how these can best be met.

The service helps to protect people from abuse and neglect. Care workers complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the current guidance and is kept under regular review.

Care and Support

People receive outstanding care and support as and when they require it. We observed care workers to be attentive and supportive to people. The care needs and preferences of each person are clearly documented, and care staff access this information to inform their daily routines. Plans contain a detailed social history of each person so care staff can get to know them and their lives before coming to the home. Plans are regularly reviewed with people to ensure they are up to date and reflect people's current needs and aspirations. Some information is duplicated which the manager assured they are working towards rectifying to ensure care staff know where to find the required information. Accurate records are kept with excellent detail by care staff to evidence people are supported as described in their personal plans and support the review of those plans.

Each person has an allocated key worker, who is the main point of contact for them. They discuss the person's progress with them and any difficulties they are experiencing, before agreeing on the course of action they would like to take and how they would like to be supported to achieve their current goals. People gave us some specific examples of how this worked well for them, such as some important information they were happy to discuss with their key worker but did not feel comfortable discussing this openly with the whole staff team. They are reassured by their wishes being respected.

Referrals are made to health and social care professionals as and when required. People are registered with a local General Practitioner (GP). Records are kept of all appointments and outcomes for review as required within the daily notes. The service works closely with each person's external care team.

The enablement and engagement coordinator arranges group activities, trips and events. People told us they enjoyed a range of activities, including film nights, karaoke and mocktail nights, Christmas present wrapping and fundraising events for charities of their choice. There is a beauty salon within the home where people enjoy 'pamper' sessions with staff. People are encouraged and supported as required to complete their own food shopping and cooking, with a communal meal provided on Sundays.

Systems are in place for the safe management of medication within the service. People are encouraged to manage their own medication as much as possible when it is assessed they are safe to do so, with support provided as required. Records we checked were mainly completed accurately, the manager assured us some gaps in temperature recording would be addressed. Infection prevention and control procedures are good at the home.

Environment

The home is maintained to a good standard. The environment is light, bright and homely throughout. Each person has their own studio flat which is personalised to their tastes and contains kitchen and bathroom facilities. People told us they like having their own space and staff support them to clean their flats if required.

Since our last inspection improvements have been made to communal areas and facilities. The shared lounge and dining rooms have been redecorated and some new furniture has been provided. People enjoy socialising with others for film nights, to watch TV and for Sunday dinners. The home also benefits from a beauty salon, games and activities room, gym, kitchen, and laundry room.

The outdoor space includes a central courtyard area which has some raised planters, a covered outdoor seating area, various seats and benches, outdoor games and a 'Tiki' bar for non-alcoholic drinks. A further garden area is at the rear of the property which has vegetable beds for people to use in the planting season.

People benefit from a secure environment; the front door is kept locked. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency. The home has a five-star rating from the food standards agency which means that hygiene standards are very good.

Leadership and Management

People benefit from highly effective leadership and management. We saw the home manager and team manager interacting warmly with people throughout our inspection visits. Care workers told us the management team are very approachable and supportive. Staff also appreciate the encouragement they are given to learn and develop in their careers.

The statement of purpose accurately reflects the service provided. There are a sufficient number of care workers on duty to support people in a relaxed and unrushed manner. We viewed four weeks of staff rota's which reflects sufficient staff numbers are consistently deployed.

Care workers receive regular supervision with their line manager. This one-to-one support provides opportunity for staff members to discuss any concerns or training needs they may have and for their line manager to provide feedback on their work performance. Regular reflective practice sessions are held for the team to discuss how support is going and any difficulties together with the clinical lead. Communication between the team is good and care workers enjoy their jobs. We observed a highly effective daily head of departments meeting where key issues are discussed between the management team and actions agreed to take back to the relevant areas.

The service introduced a new staffing structure this year after a review. The day-to-day support is now provided by complex care project workers who are experienced and qualified to a high level. This is a positive introduction which reflects the nature of the service. Care workers personnel files are well organised and contain all of the required information.

The RI has undertaken regular quality assurance checks by visiting the home to talk to individuals and care staff and review documents. The RI completes detailed, thorough, and comprehensive audits of the quality of the support provided as well as the wider running of the home. The reports highlight where the home is performing well as well as areas for improvement.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	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.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	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
35	Ensure that the required information for staff pre employment checks are kept at the service for inspection	Achieved

Date Published 23/01/2023