



# Inspection Report on

**Windy Ridge**

**Pontypridd**

## **Date Inspection Completed**

24/01/2024

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## About Windy Ridge

|   |   |
|---|---|
| Type of care provided                                 | Care Home Service<br>Adults Without Nursing   |
| Registered Provider                                   | Values in Care Ltd  |
| Registered places                                     | 6   |
| Language of the service                               | English   |
| Previous Care Inspectorate Wales inspection           | <a href="#">This is the service's first inspection since RISCA Registration</a>   |
| 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

Windy Ridge, soon to be named Swyn Y Nant provides support to adults with personal care and learning disability needs. People receive excellent care and support from staff who are suitably trained and supported. Personal plans detail their individual care needs and personal outcomes. These are reviewed on a regular basis to monitor people's progress in meeting their personal goals, whilst enabling them to participate in positive risk taking but remain safe. People are complimentary about the positive relationships they have with support workers and the management team. Staff feel well supported and are happy in their roles. A good standard of hygiene and infection control is maintained to reduce risks of cross infection. Support workers can access personal protective equipment (PPE) easily and supplies are evident at the service. The Responsible Individual (RI) has Quality assurance procedures in place and carries out their regulatory duties.

## Well-being

The service supports people's rights and choices consistently and to a high standard. People's individual needs inform their personal plan, and changes are recorded. The service asks people and their relatives about their wishes, involves them in the planning of their care, and supports them to have meaningful outcomes. People are supported to pursue individual interests/hobbies and maintain relationships and networks that are important to them. People have access to excellent resources such as the provider's HUB and Horticultural resource where people can gain vocational qualifications, develop life skills, participate in individual interests, and socialise with others. People's needs, and risks to safety and well-being, are monitored and documented. Risk assessments include thresholds for support workers to intervene. Key working sessions with individuals and care plan reviews are being carried out to monitor people's progress in meeting their goals and aspirations.

Feedback about the standard of care and support is exemplary. People and their families have positive relationships with staff who are familiar and know them well, following a thorough and flexible admission and transitional process into the service. Up to date written information about the service and advocacy access is available to people in a variety and easy read formats.

The service safeguarding systems reflect current government procedures and protect people from harm. There is a safeguarding policy to provide guidance to staff. Support workers receive specialist training in addition to core training to support them to meet people's individual needs. Support workers know their responsibilities and are able to keep people safe and well supported.

People's wellbeing is further enhanced by the nicely decorated, appropriately furnished, warm, secure and safe living environment. People can spend time in their own bedrooms or in the home's indoor and outdoor communal areas. People's bedrooms are personalised and have en-suite facilities for them to use. There are suitable arrangements in place for the staff team to report any maintenance issues/repairs so these can be addressed. A very good standard of hygiene and infection control is being maintained to reduce risks of cross infection with people encouraged to participate in cleaning and household tasks. Support workers can access personal protective equipment (PPE) easily and we saw good supplies available at the service.

## Care and Support

The quality of the care and support provided to people living at Windy Ridge is outstanding. The service considers a wide range of information about people prior to them moving into the service. Information is gathered through a thorough and flexible admissions process involving the person, family, and relevant professionals to develop an initial support plan. Personal plans are detailed and provide clear guidance to support workers as to the needs and planned outcomes for individuals. These are reviewed with people, their relatives, and other professionals involved in their care to monitor progress and make changes as required.

Plans are clear, reflect individual needs and give the information needed to support people. Where possible people and or their relatives are involved in developing their plan. Risk assessments are in place to ensure people are supported to make their own choices as much as possible and remain safe. The service works closely with specialist health and social care professionals such as learning disability teams and occupational therapists.

Support workers commented positively on the quality of the training and induction they received, giving them the knowledge and skills needed to provide effective and safe support to people. One staff member told us *'I really enjoy working at the service...I feel really valued.'* And of the management team *'Amazing...approachable...very supportive.'*

People and their relatives have positive relationships with support workers and the management team. Interactions between support workers and people are extremely positive, warm, familiar and friendly. One person told us *'Staff support me and listen to me.'* Another relative said *'We're over the moon...it's a real team effort...they genuinely care about him...we're blessed he's got such a lovely home.'*

People are supported to access the community, maintain relationships with family and other networks, or participate in hobbies, educational, or work opportunities. They are encouraged to take part in meal preparation, laundry and housekeeping to develop independence and daily living skills.

People can have support with medication if they require. Support workers have training and regular monitoring to assess their competency in the administration of medication. There is also a policy in place to provide guidance to staff. Regular medication audits are undertaken to identify any issues and address any actions.

## Environment

The service consists of a purpose-built property with a number of bedrooms and communal areas, with a self-contained flat to the side and parking to the front. On arrival, we found external doors secure to prevent unauthorised access.

There are spacious indoor and outdoor communal spaces for people to use. The outdoor area is accessible and secure with patio and grassed areas, and lovely views across the mountains. We saw people's personal space is set out in a manner which reflects their individual preferences and care needs.

Medication and other confidential information is stored securely. Restricted areas are locked and are only accessible to authorised people.

Support workers have sufficient PPE available to reduce the risk of infection. The service has appropriate infection control measures and visiting procedures.

Procedures are in place to ensure people's health and safety at the service. Records relating to health and safety such as gas and electricity certificates are in place. Tabletop fire evacuation drills are carried out with simulated drills planned. People have personal emergency evacuation plans (PEEPs) in place, so staff have the knowledge of what to do in such circumstances. Internal safety checks in relation to fire safety are mostly maintained and a fire safety risk assessment is in place. Regular internal and external Health and Safety audits are carried out with action plans in place.

## Leadership and Management

There are good systems in place to support the smooth operation of the service and ensure the care and support of individuals enables them to achieve their personal outcomes. Policies and procedures are in place to provide guidance to staff and are regularly reviewed. The service is delivered in line with the statement of purpose (SOP). The service produces a written guide to provide people with information about the service in an easy read format. This includes information about the complaints procedure and advocacy services.

Regular Quality audits and checks are in place to ensure the service continues to meet people's needs. Communication with relatives is very good. This is regular to update them on developments and gain feedback about the service and share ideas for possible improvements.

The vision, values and purpose of the service are clear and actively implemented. The RI carries out three monthly visits and the service's first six-monthly quality assurance review has recently been carried out. These visits involve meeting people and support workers to gain their views on the service provided. The six-monthly quality assurance review also involves a detailed look at a range of aspects of the way the service is delivered such as environmental assessments, safeguarding and other incidents. It also sets out any areas of improvement.

Support workers at the service have a mix of face to face and online training to ensure they have the skills and knowledge to support people to achieve their personal outcomes. In addition, they receive specialist training such as learning disability, autism, and positive behaviour support. Workers feel well supported and have regular 1:1 supervision that enables them to consider their own wellbeing and professional development. Team meetings keep them up to date with changes and address any issues. Support workers are aware of, and understand, the Wales Safeguarding Procedures, and a policy is in place. Recruitment documents are up to date with appropriate Disclosure and Barring (DBS) checks in place.

The service is working towards providing an active offer of the Welsh language. There are currently no Welsh speaking staff or residents living at the service, however people's communication needs are considered during pre-admission assessments. The manager told us that if a person wants the statement of purpose or service user guide in Welsh this is available. The service are in the process of changing their name to Swn Y Nant and there is a Welsh Language Policy in place.

### 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 |
|------------|---------|--------|
|------------|---------|--------|



|     |  |     |
|-----|--|-----|
| N/A | No non-compliance of this type was identified at this inspection | N/A |
|-----|--|-----|

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