

# Inspection Report on

Tyn Y Wern

Ynysybwl Pontypridd CF37 3LY

## **Date Inspection Completed**

11/04/2024



### **About Tyn Y Wern**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Values in Care Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	20 April 2023
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 at Tyn y Wern are supported to live their lives to their full potential, benefiting from an excellent standard of care and support. Care staff have detailed knowledge of people's needs. A healthy, active lifestyle is promoted. People live in a safe environment which supports their well-being. Systems are in place to help protect people from abuse and harm. Infection control measures help reduce the risk of transmission of potential sources of infection. Systems are in place to ensure people have their prescribed medication safely. The service is well run and has effective governance, auditing, and quality assurance arrangements. Staff training and recruitment is safe and effective. Care staff feel supported in their role and enjoy working at the service. The service provides good information to the public.

#### Well-being

People at Tyn y Wern are supported with their well-being to live their lives to their full potential. Support documentation, such as personal plans and risk assessments, promote independence and positive risk-taking. Staff know the people they support well, understand how best to support them, and know how to respond to any changes in their health and well-being. People lead busy and active lives, regularly accessing meaningful and engaging activities in the community. Care staff draw on resources both within the organisation and the wider community to help develop people's networks and friendships. Care and support is tailored to people's needs, is person-centred, and they are treated with dignity and respect. Care staff use various skills and methods to support people's communication, which promotes inclusion and aids their well-being. Where a person needs help to make their voice heard, people's families and representatives are supported to do this, being involved in reviews. The service has very good relationships and lines of communication with relatives, who tell us staff keep them informed and updated.

A healthy, active lifestyle is promoted. People are supported to regularly take part in appropriate activities that encourage movement, such as long walks in the countryside or cycling. Routine health appointments, timely referrals, and close working with health and social care professionals ensure people can be as well as they can be. Meal options offer balance and variety. Appropriate infection control measures are in place to ensure the home environment is as clean as it can be. The management of medication is safe, in line with the medication policy, and people receive their prescribed medication as directed.

People live in an environment which supports their well-being. Tyn y Wern is a converted house that supports people who have a learning disability and associated needs. Bedrooms are comfortable. The home is in a quiet rural location, with transport available to access local amenities. The home is clean and well-maintained.

Systems are in place to help protect people from abuse and harm. The service identifies potential risks to people or care staff and how to manage these. Care staff know their safeguarding responsibilities and how to report issues if they are concerned for a person's well-being. Care staff feel confident if they raise an issue with the management team, it will be responded to. Ongoing training ensures care staff are sufficiently skilled. Policies and procedures help support care staff to ensure people are safe. Recruitment is effective, and regular supervision supports continued development. Incidents and accidents are logged, with appropriate actions taken by the service. Ongoing quality assurance audits ensure systems remain effective and improvements are identified and addressed. Access to the service is restricted to authorised individuals.

#### **Care and Support**

People benefit from an excellent standard of care and support at Tyn y Wern. People lead full and active lives, undertaking meaningful and fulfilling activities both at home and in the community. The service is consistent in facilitating this, working in person-centred ways so people, some of whom have extremely complex needs, can lead lives to their full potential. Care staff are warm and attentive in their interactions with people. People appear at ease in their environment, well kempt and well cared for. People's families told us care staff are "absolutely brilliant", "they genuinely care", people are "well looked after" and "they're always busy and enjoying".

Care staff have detailed knowledge of people's needs. The service considers a wide range of information before people move in. The service works closely with people's families and professionals to ensure they have the correct information to support people. Personal plans are person-centred. Detailed risk assessments cover a wide range of areas to promote positive risk-taking, including robust behaviour support plans. Daily recordings are very detailed, providing important information about people's progress and identifying changes in needs. Reviews take place regularly, evaluate people's outcomes, and take place with people's representatives where the person is not able to take part. This is an improvement acted upon since the last inspection. The service has started to use an innovative computer system to evidence people's experiences to help inform reviews. Care files contain assessments and guidance from other professionals, such as learning disability nurses and speech and language therapists. Deprivation of Liberty Safeguard (DoLS) referrals are made where people lack mental capacity to make decisions about their care and accommodation.

Infection control measures are in place to help reduce the risk of transmission of potential sources of infection. Staff have access to a supply of appropriate PPE. An infection control policy is in place which staff are aware of and understand their responsibilities. Care staff use a cleaning rota to direct them to clean the home daily. The home appears very clean and tidy.

Systems are in place to ensure people have their prescribed medication safely. Medication is stored securely and can only be accessed by authorised care staff. Records show trained care staff accurately administer medication in line with the prescriber's directions. The service has an up-to-date medication policy. Medication is audited regularly.

#### **Environment**

People live in a home environment that supports them to achieve their well-being. Tyn y Wern is a two-story converted house that can accommodate four people, with an additional annex, Woodland Lodge, providing accommodation to one person. The home is in the village of Ynysybwl. The service is clean, tidy, and secure from unauthorised people. People's bedrooms are a good size and individualised to people's tastes where possible. There are sufficient toilet and bathing facilities. The home has two lounge areas where people can choose to spend their time. A dining room is located next to the kitchen, where people can choose to have their meals and can also take part in activities. Communal areas are tidy, homely, and uncluttered. The kitchen facilities are appropriate for the home, are decorated to a high standard, and enable people to take part in meal preparation with support, which we saw taking place. The service has a very large garden area available for people to use, including a patio area and trampoline, and has picturesque views of the surrounding countryside. While the people who live at the service have a complex range of needs that require adaptations to the environment, positive efforts have been made to make it as homely as possible.

Procedures are in place to ensure the service is safe. Substances hazardous to health are locked in cupboards, in line with Control of Substances Hazardous to Health (COSHH) regulations. Window restrictors are in all bedrooms and bathrooms viewed. Fire exits are clear of clutter and obstructions, with no obvious trip hazards more generally. Maintenance and repair arrangements are in place to ensure any issues are addressed in a timely manner. Maintenance records confirm the routine testing of utilities, such as electrical items and water facilities. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal emergency evacuation plans are in place, up-to-date, and easily accessible in the event of an emergency. This is an improvement acted upon since the last inspection.

#### **Leadership and Management**

The service is well run and has effective governance, auditing, and quality assurance arrangements. These help identify where improvements are needed. The Responsible Individual (RI) has good oversight of the service, undertaking the legally required three-monthly service visits to meet with people and staff, and six-monthly quality of care reviews. Policies and procedures, such as for complaints, whistleblowing, medication, and safeguarding, are in place. They give guidance to care staff, for example telling them what to do if they need to raise a concern via the whistleblowing procedures. The service gathers the views of people, as far as is possible, their representatives, and from care staff. Procedures are in place to deal with complaints. The service is open and transparent, making the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences at the service.

Staff training and recruitment is safe and effective. Care staff files hold the correct recruitment information and evidence of required documentation, such as up-to-date Disclosure and Barring Service checks and proof of identity. The correct pre-employment checks are in place, and care staff are registered with the workforce regulator, Social Care Wales. Training records show care staff have up to date training in core areas of care. These are improvements acted upon since the last inspection.

Care staff feel supported in their role and enjoy working at the service. They told us they are "really enjoying", "I love the residents and being out with them", and "everyone gets on – it's nice". They feel well-supported by the management team and are positive and enthusiastic about their roles. Many of the staff team have been in place for some time, which helps facilitate continuity of care and consistent support. Care staff have regular supervision to reflect on their performance, identify support they might require, and discuss any issues. This is an improvement acted upon since the last inspection. The manager told us staffing levels are worked out based on the level of need of people and staffing levels agreed with commissioning bodies. The rota showed target staffing levels were reflective of staffing on the day.

The service provides good information to the public. The Statement of Purpose sets out the service's aims, values, and support provided, and is updated regularly. A detailed written guide contains detailed practical information about the service and the care provided.

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	

N/A	No non-compliance of this type was identified at this inspection	N/A
16	Personal plans are not reviewed at least every three months.	Achieved
21	Personal Emergency Evacuation Plans (PEEPs) have not been reviewed for over two years.	Achieved
35	A written reference from the last employer is not always in place. Not all staff are registered with Social Care Wales.	Achieved
36	Staff do not always receive supervision within an appropriate timeframe. Mandatory training has not been provided to all staff.	Achieved

#### Was this report helpful?

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

• Inspection report survey

If you wish to provide general feedback about a service, please visit our <u>Feedback surveys</u> <u>page</u>.

Date Published 24/05/2024