



Inspection Report on

Ysguborwen Care Home

**Ysguborwen Care Home
Ysguborwen
Aberdare
CF44 0AX**

Date Inspection Completed

08/04/2024

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About Ysguborwen Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	OSBORNE CARE HOMES LTD
Registered places	80
Language of the service	English
Previous Care Inspectorate Wales inspection	25 April 2023
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People experience positive outcomes and feel well looked after. Personal plans provide clear guidance on how to meet people's day to day needs and are reviewed frequently. Interactions are positive and people are supported by attentive and motivated staff. An extensive and creative range of activities take place and people are encouraged to maintain positive relationships with family and friends. Sufficient staffing numbers ensure people receive timely care. Medication is managed effectively and potential risks to people's well-being are considered and well managed. People and relatives have a positive relationship with the service and feel listened to.

The environment is outstanding in enhancing people's wellbeing. Care staff enjoy working at the service, receive regular supervision opportunities and feel supported in their roles. A range of policies and ongoing training is offered to ensure care staff understand how to provide care safely. Robust recruitment checks are completed. The RI and management team are visible within the service and have systems in place to support positive practices and experiences for people.

Well-being

People's views and preferences are considered. People have opportunities to make decisions about the areas of their lives that matter to them. Personalised plans outline individual routines and staff are able to access this information, so they can understand and follow people's needs and wishes. Regular resident meetings encourage people to express opinions and feel heard. Records evidence the RI regularly gathers feedback from people who live at the service, relatives, and staff to establish how to continue providing high quality support.

Positive outcomes are achieved as a result of the care provided. Plans contain clear information and care is provided as described in people's personal plans. People are complementary about the care they receive and report feeling happy living at the service. Family members feel welcome and confirm the care provided is of a very good standard. Referrals are made to health and social care professionals in a timely manner. The service actively seeks out new creative activities and opportunities to enable people to have positive experiences. Dietary needs are understood, and people are happy with the range and quality of meals provided. Records indicate medication is administered and stored correctly and where people lack capacity care is provided in their best interests.

The environment supports and encourages people's wellbeing. People's bedrooms look pleasant and suitably furnished. The building appears clean and well maintained and hazards are reduced as far as possible. Significant improvements have been made to the communal areas of the building to offer people a pleasant and enriching setting. Creative use of the garden area offers people an accessible and enhancing experience.

Systems are in place to help protect people from abuse. Pre-employment recruitment checks ensure staff are appointed safely. Accidents and incidents are reported, and actions are taken in a timely manner. Infection control measures are followed and understood. Regular supervision, annual appraisals, and ongoing training ensure care staff are sufficiently skilled. Policies and procedures support practices to remain safe and both people and staff are confident in raising concerns or complaints. Effective oversight by the management team helps people experience positive outcomes and supports their overall wellbeing.

Key documentation is available in Welsh. Welsh language signage can be seen throughout the building and there are a number of Welsh speaking staff employed within the service.

Care and Support

Positive care practices within the service supports people's well-being. On the day of inspection people appeared happy, settled, and well cared for. People report positive relationships with care staff and tell us they enjoy living at the service. Comments include *"The staff are lovely," "I get on with all of them," "I thoroughly enjoy being here," "I wouldn't be anywhere else," "We are all lucky to live here,"* and *"We are all like a big family."* Relatives report *"The girls are marvellous," "It's great x loves it here," "Staff are wonderful and friendly,"* and *"The care is excellent."* One staff member told us people living at Ysgurborwen *"have a good quality of life"*.

Planning documents are clearly written and person-centred. Detailed plans and monitoring documents enable care staff to meet people's specific needs and understand their individual routines. Measures are in place to ensure decisions are made in people's best interests and any risks or specialist needs are considered, understood, and met. Electronic care planning and recording supports staff to have access to current personal plans, risk assessments and recent interventions. Records show personal plans are consistently reviewed to ensure they are up to date, both people and relatives tell us they contribute to this process.

A creative range of activities are available. People receive support from activity coordinators who consider their individual needs and help them to follow their interests. Engagement with external organisations and innovative ideas support people to experience a wide range of opportunities and express their wishes. People can choose those events they would like to engage in and visits from a range of religious denominations mean people have opportunities to practice their faith of choice. Family members are encouraged to participate in activities which support people to maintain positive relationships. One staff member commented the activities team are *"absolutely fabulous"*.

Meals provided are of a good standard. People tell us meals are of a good quality with adequate portions, choice and off menu alternatives if needed. One person commented *"I enjoy a good breakfast," "I have whatever I want."* A relative advised *"X is a fussy eater, but they always offer her alternatives"*. The kitchen has been awarded a food hygiene rating of 5 (very good). We saw seasonal menus are provided, and the service demonstrates a good understanding of the importance of nutrition.

The service has safe systems in place to support medication management. Electronic medication charts safeguard the possibility of missed medication by alerting staff of any errors or gaps. We found the service ensures the sufficient supply and safe storage of medication and regular auditing, policies, and guidance support good practices.

Environment

Significant improvements throughout the service makes the environment as pleasing as possible. Bedrooms are decorated to a good standard and people are encouraged to bring belongings to personalise their rooms to their own tastes. Communal areas appear warm, well presented, and clean. The service is well equipped, and furnishings are in good condition. Recent improvements to the main communal room has provided people with a large, bright, and pleasant space. People can use this area to undertake activities, socialise with others and access a large outside recently renovated terrace. The sizable grounds have mature trees and a lawned area. The service has created a large pond, seated areas and a substantial well-appointed wooden cabin for people and families to utilise as they wish. A woodland walk with benches means people can sit amongst trees and enjoy the views over the valley. A poly tunnel and veg patch has been developed and there are chickens and two dogs permanently on site for people to enjoy and take care of.

The environment is clean and safe. The building is secure from unauthorised visitors, with people required to sign before entering and upon leaving. Cleaning products and materials that could cause potential harm are safely locked away. Housekeeping staff advise they have a sufficient team of staff and all the necessary equipment and supplies they need to keep the environment clean. Several maintenance staff are employed to complete safety checks, repairs and undertake improvement works. Regular fire alarms, drills and checks are completed, and staff are trained in fire safety. Personal emergency evacuation plans guide staff on how to support each person to leave the premises safely in the case of an emergency. Gas and electricity safety testing is up to date and all equipment is serviced to ensure these are safe for use.

Leadership and Management

People receive support from staff who are trained and benefit from regular supervision. On examining the supervision matrix, we saw evidence all staff receive regular one to one formal supervision. Care staff confirm these sessions are useful as they enable them to discuss concerns, training needs and their work performance. Staff tell us they attend a wide range of either face to face or online learning to develop and maintain their skills. Newly appointed care staff benefit from a detailed induction programme and shadowing opportunities. A range of appraisals and ongoing spot checks ensure care staff continue to undertake their duties safely.

Staff are safely recruited and feel valued and supported. We viewed a sample of recruitment files and found these contained all the checks and information needed to ensure staff are of good character and hold the necessary skills and qualifications. All staff have completed their registration with the workforce regulator Social Care Wales which demonstrates they are competent and qualified to deliver care. Staff tell us they enjoy their job and work well together as a team. Comments include *“I have learned so much,” “I really enjoy it here, staff work well together as a team,”* and *“We have all got a strong bond and work well together.”* Care staff confirm a visible management team are available to offer support and assistance, comments include *“We get loads of support from management, if I need anything they are there”* and *“Managers have always got time for you.”* One staff member spoke about the providers commitment to deliver positive outcomes for people, *“The owner puts everything back in the service, he really cares about the residents”*.

The management team have good oversight of the service. We saw evidence of staff, resident, and relative meetings being held to ensure all parties can express their views and remain up to date on any changes or issues. A sample of rotas we viewed show a stable and sufficient team of staff in place to provide timely support. We found a range of current and up to date policies and procedures are accessible and understood by staff. Care staff tell us they understand their responsibilities around safeguarding procedures and feel confident in reporting any concerns to the management team. The RI gathers and considers information about people’s experiences and the quality of care provided to ensure these remain positive and the service works effectively.

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
21	The provider is not compliant with regulation 21(1)&(2). This is because we found there were missing care plans and risk assessments on a number of personal plans and repositioning charts did not reflect the recommended frequency of repositioning required in some personal plans.	Achieved

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