



Inspection Report on

Gelli Ceirios

Aberdare

Date Inspection Completed

07/03/2024

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About Gelli Ceirios

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	12 April 2023
Does this service promote Welsh language and culture?	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

The service offers care and support in a way people like. Personal plans outline individual care needs and personal outcomes. Reviews are carried out routinely to ensure documents remain up to date and accurate. A range of activities mean people are able to positively occupy their day doing things they enjoy. A consistent staff team understand and support people's individual needs and provides positive care. Potential risks are considered, and strategies are in place to support best outcomes. Medication is recorded and managed effectively.

The environment is well maintained and suitable for the people supported in the service. A range of policies and procedures support safe practices. Care staff tell us they are happy working for the service and receive regular supervision and training opportunities. Staff recruitment checks are robust and good management arrangements ensure the service operates effectively. The responsible individual (RI) maintains regulatory visits and quality assurance reports to confirm care is provided to a consistently good standard.

Well-being

People are supported to express their views and make choices. The service considers people's individuality and staff are knowledgeable about routines, interests, and preferences. People are given the opportunity to contribute to the development and reviewing of their care. Menus cater to individual tastes and mealtimes are flexible. Resident meetings offer the chance for people to provide feedback and offer suggestions about their care and the running of the service. People are consulted about the décor of communal areas and can personalise their bedrooms to reflect their interests and tastes. The RI visits the service on a routine basis to gather feedback from people, staff, and relatives. People tell us they know how to make a complaint and feel listened to.

The service supports people's emotional and physical well-being. Personal plans contain information on people's health needs and the level of care they require. Strengths, goals, and potential risks are clearly outlined, and people receive support to develop and maintain skills. Regular reviews ensure plans remain up to date and are current. People occupy their day by participating in a range of meaningful social activities which enhances their wellbeing. Medication is stored, recorded, and administered safely. Regular contact with health and social care professionals ensure people remain as well as they can be. The service supports people to maintain positive contact with family members and individuals who are important to them.

Measures are in place to promote safe practices. A range of up to date policies provide staff with guidance around daily interactions and how to provide effective support. Overall, there are sufficient staff numbers in place to ensure people have the right care at the right time. Recruitment checks, ongoing training and supervision ensure staff hold the correct skills and values to support people. Care staff are aware of their duty to report any safeguarding matters and feel confident in doing so.

The service provides suitable and safe accommodation. The service is safe from unauthorised access. Bedrooms and communal areas are decorated to a good standard and appear homely and comfortable. The environment is clean and well maintained. Records evidence safety checks are undertaken, and repairs are completed in a timely manner.

Care and Support

People receive good quality care and have things to look forward to. Staff we spoke with are familiar with people's individual needs and know how each person likes to be supported. Access to a regular staff team supports positive relationships and enables staff to recognise changes in people's health and wellbeing. Staff understand those areas in life people may find challenging and provide support accordingly. We observed friendly interactions on the day of inspection with people appearing happy, comfortable, and settled within the service. People tell us staff are friendly and attentive and they feel listened to, comments include *"I love it here", "I feel safe here", "The staff are nice here" "I wanted some freedom, and they trust me"*. The service supports people to undertake a range of meaningful activities, which reflects their interests. We saw evidence of group and one-to-one in house and community sessions, as well as opportunities to undertake supported holidays.

Plans are person centred and support people's overall wellbeing. Plans we viewed contain detailed information on people's life experiences, medical history, likes, dislikes and routines. People's strengths and preferred outcomes are documented, and achievable goals are discussed. Daily records capture people's everyday experiences and achievements and the service reviews progress regularly. Detailed risk assessments provide care staff with guidance on triggers and strategies to manage behaviours that may challenge. Reviews consider any changes in people's physical and emotional needs. The service consults with health and social care professionals when required and people attend regular health appointments to support their overall wellbeing. Consideration is given to people's mental capacity to ensure any decisions made around their care are least restrictive. Meals are tailored to each individual; mealtimes are flexible, and people are encouraged to participate in the preparation of meals and drinks to support their independence.

There are appropriate arrangements in place for managing medicines. A sample of medication administration records we viewed evidence charts contain no gaps or errors; this indicates people receive their medication as prescribed. Staff tell us they receive ongoing training in the administration of medication and records evidence regular audits are undertaken to ensure practices remain safe. The service maintains a sufficient supply of medication and we found secure storage arrangements in place.

Environment

The environment is clean and homely. The property is decorated to a good standard and there is an ongoing programme of improvements, maintenance, and repairs in place. Work has been completed to the exterior of the building and driveway and there are plans to refurbish the kitchen area with new kitchen cabinets and tiles. There is sufficient space for people to spend time alone or in communal areas. People's bedrooms are individually decorated and personalised which helps them to feel comfortable and relaxed. Communal areas are redecorated following consultation with people and staff which supports a sense of belonging.

The property is safe and well maintained. Good security arrangements ensure only approved visitors enter the building. Fire safety checks and drills are undertaken, and personal evacuation plans are in place so that care staff understand the level of support people require in the event of an emergency. Staff ensure substances hazardous to health are stored safely. Gas and Electricity safety testing is up to date and all equipment is serviced regularly. We found confidential files stored safely. Care staff have a good supply of personal protective equipment (PPE), and are confident in using this.

The service benefits from effective processes and management. Overall, staffing rota's show there are sufficient staff on each shift to provide care in line with people's personal plans. Regular audits around medication, environment, and health and safety ensure practices remain at a good standard. We viewed a selection of policies and procedures and found them to be comprehensive, up to date and fit for purpose. Staff we spoke with have a good working understanding of these and tell us they can easily access this information. Three monthly RI visits are undertaken in line with regulatory requirements. The completion of six-monthly quality assurance reports consider the quality of the care provided and any areas of improvement required. The staffing structure for the service is clear and all staff we spoke with tell us they understand their roles and responsibilities.

Recruitment practices are effective and training opportunities are available. We found recruitment files are well organised and contain the necessary checks to ensure staff are of good character and hold suitable skills and qualifications. All staff have completed their registration with the workforce regulator Social Care Wales, this demonstrates they are competent and qualified to deliver care. Records show staff access a range of core and specialist training opportunities. The training matrix confirms all staff are up to date on their required training. Staff advise training is of a good standard and they feel sufficiently skilled to undertake their duties.

Care staff receive regular supervision and feel supported by the management team. The staff team spoke highly of the manager and told us they feel confident in raising concerns. Comments include *"It's a very positive house"*, *"(The manager) is amazing and tries to accommodate everyone"*, *"I enjoy working here more than I ever have"*, *"The manager is brilliant, the team work well together"* and *"They're a good manager, very comfortable to talk to"*. We saw evidence of regular team meetings to ensure staff remain up to date on any changes in people, practices, or policies. We viewed the supervision matrix, and staff gave us feedback to confirm regular one to one, formal, supervision is offered on a regular basis. These sessions focus on professional development, practice standards, and address any issues or concerns raised.

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
16	The service does not consult with people with the required frequency when undertaking reviews.	Achieved
60	The service does not always notify CIW of all required events/incidents.	Achieved

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