



# Inspection Report on

**Ty Bradwen**

**Neath**

**Date Inspection Completed**

**27<sup>th</sup> May 2022**

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## About Ty Bradwen

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish GroupLtd
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">Click or tap here to enter text.</a> 20.12.2019
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

### Summary

The management team have acted on all the recommendations detailed in the last inspection report. There is good governance and oversight of the service. All care workers told us they receive regular formal and informal support. People are well supported and cared for by dedicated, committed and well trained care workers and a supportive management team. All feedback gathered as part of the inspection was extremely positive about the culture in the service and people informed us, they are happy and feel safe. There are good processes in place to help maximise people's engagement in support planning. We saw people have made clear progress in relation to outcomes detailed in support planning documentation. Staffing levels are appropriate and align with people's needs and outcomes.

The environment is well maintained, clean and in accordance with the objectives detailed in the statement of purpose (SOP). The service structure promotes independent living and outcome focused care and support. Safety checks and service schedules are completed in-line with current requirements. There are good infection control and Covid 19 preventative measures in operation. There are robust recruitment checks in place and care workers receive a thorough induction and training to perform their roles competently.

### Well-being

People are treated with dignity and respect. We saw positive interaction between care workers and people throughout the inspection. People informed us they feel safe living in the home and that they are consulted about their support needs. A person told us *“I go out regularly and have achieved a lot since moving here. I am being supported to manage my issues and the staff are great”*. People are supported to maintain and develop skills. People told us they complete a wide range of independent living skills such as cooking, cleaning and laundry with support as needed. People access their local community with support in line with risk and support plans. We spoke to care workers and viewed staffing rotas all confirmed there are good staffing levels currently ensuring people’s needs are fully met. The manager told us new staff have been recruited recently to fill vacant posts and the staff team will shortly be up to full numbers.

There is good oversight of the quality of care provision from managers and the responsible individual (RI). The RI completes regular visits to the service. All recommendations detailed in the last inspection report have been completed. Care workers, people and a relative informed us communication with the manager is good and that issues reported are acted on promptly and appropriately. Personal plans are clear, informative and detailed, they are outcome focused and relate well to care staff recordings and risk planning. The service also uses specific assessment tools to measure progress in relation to mental health and recovery. We saw people are making good progress and are benefitting from living in the service. Care workers and managers receive a wide range of appropriate training to ensure they are fully able to meet people’s needs and outcomes. Care workers also receive regular planned supervisions and appraisals.

The environment is well maintained, safe and provided in accordance with the objectives defined in the statement of purpose (SOP). People benefit from a service that promotes and supports independent living. People are safe and routines such as fire checks, gas and electric safety certificates were viewed on inspection. Administration and storage procedures for medication are safe, appropriate and in line with guidance. People are protected from neglect and abuse as care workers know what to look out for and how to raise concerns. Care workers are trained in safeguarding and there are clear and regularly reviewed procedures and risk plans to guide them. Care is provided in accordance with protocols covering capacity and restriction of freedom.

## Care and Support

The provider has current and up to date plans for how care is provided in order to meet support needs. Personal support plans demonstrate what matters to the person and how best to support them to achieve their identified goals. Detailed risk assessments are in place to correspond with support plans including specialist assessment tools in relation to mental health. People's ability to be involved in care planning is considered and the appropriate legal measures are in place to safeguard them. Recording of support given is detailed and evidences that people's identified needs are monitored and reviewed when necessary. There are detailed health records and associated actions where necessary. We also saw regular planned reviews which include feedback from people on progress being made. We saw some documentation had been adapted with photo symbols to help with a person's understanding and communication needs. The service manager told us a lot of work goes into ensuring personal support files are current, detailed and reflects the needs of people living in the service. We saw clear progress is being made by people against outcomes detailed in support plans such as independent living skills and participation. We spoke to people living in the service who all told us they are happy, settled and get on well with staff. One person told us *"staff are great and really supportive and helpful, they are brilliant"*. We spoke to a relative who told us *"very supportive and helpful staff with good manager"*.

People live in a home that provides appropriate numbers of knowledgeable, competent and skilled care workers. Care workers confirmed that staffing levels are appropriate and targeted to the needs of individuals living in the service. The manager told us several support workers had recently left but new staff have been recruited and had either started or due to start working in the service.

There are safe systems in place for the management of medication and people's health is promoted by good practice. We saw medication is stored securely in a locked room. Records of daily temperature checks were seen to ensure safe storage of medication. Medication Administration Records (MAR) are completed appropriately with signatures of care workers present. There are good processes in place for the ordering and auditing of medication in the service which minimises the risk of error. Staff assisting people with medication are trained and deemed competent to do so. Many care workers in the service have been in post a number of years and know people well. This enables them to identify any health deterioration quickly and to seek support when needed.

## Environment

The provider ensures that people's care and support is provided in a location and environment with facilities that promote people's well-being and safety. Since the last inspection, the kitchen has been completely updated and refurbished. This includes the provision of new appliances and cupboards. The area was seen to be clean and hygienic. There is a large living/dining area where we saw people relaxing and planning activities with support staff. There is a separate living room which we were informed people use as a quiet area and there are plans to purchase new sofas. There is a separate locked laundry room with locked storage cupboards for the safe storage of control of substances harmful to health products (CoSHH). We were told people are fully involved in relation to household activities such as cleaning and clothes washing. Parking is available to the front and rear of the building. We looked around the service and found communal areas homely, clean, comfortable and well maintained. The environment is well suited to the needs of the individuals living there with five self-contained flats and a bedroom with en-suite facilities. We saw people had their own personalised items in their bedrooms and rooms viewed were comfortable and well maintained. There is a secure office area where files are stored appropriately. To the rear of the property is a large parking and garden with covered shelter area.

We saw mandatory fire safety checks take place routinely and certificates for gas, fire detectors, fire extinguishers, electricity and electrical equipment are all up to date. Monthly external contractor water temperature checks are taken and documented. Personal emergency evacuation plans (PEEP's) are in place for people. The service is awaiting a new food hygiene rating (currently five, the highest possible) and future re-inspection by the Food Standards Agency. We saw fridge temperatures are taken regularly and documented appropriately. Also there are facilities such as coloured chopping boards and mops/buckets to promote good food hygiene procedures. We saw detailed cleaning schedules and the service was very clean and uncluttered throughout.

## Leadership and Management

People are supported by a dedicated team who have been recruited safely and are well supported in their roles. Many of the care workers have worked in the service for years and are very familiar with the needs of the people being supported. We looked at two staff personnel files and saw appropriate pre-employment and recruitment checks are in place. References and up to date Disclosure and Barring Service (DBS) checks are on file. The manager told us they are working through care worker registration with Social Care Wales (SCW). The training matrix was seen and we found all mandatory training requirements of the provider are up to date. This includes infection control, safeguarding, health and safety, fire awareness. Also specialist training including; mental health, personality disorder and positive behavioural support. Care workers spoken to confirm they attend safeguarding training and understand their responsibility in relation to this. There are detailed and thorough safeguarding policies and procedures in place to guide care workers. We saw staff receive routine formal supervision and an annual appraisal. Care workers spoken with are complimentary of the training and support they receive. Comments include: *“manager is on top of everything and really supportive”*, *“pleasant, relaxed, friendly place to work...very supportive of each other”*.

The provider has arrangements in place for the effective governance and oversight of the service through ongoing quality assurance processes. We saw the recent bi-annual quality of care report. The report includes feedback from people and staff in the service. The report indicates what the service is doing well and includes further improvements for the future. We saw the RI is in regular contact with the service. We saw policies and procedures have been reviewed and where necessary updated. The service's Statement of Purpose (SOP) has been reviewed and accurately reflects the service. There is a detailed and clear guide to the service for people and relatives. All policies and procedures are available in the Welsh language as requested. Care workers told us staffing levels are good and the manager stated there will shortly be a full permanent care team in place. The appropriate agencies including Care Inspectorate Wales (CIW) are notified where necessary of any significant issues affecting people or the service. The manager told us the service is really settled and there are no current concerns or complaints.

### 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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