



Inspection Report on

Cae Glas

**Cae Glas Resource Centre
Cardiff Road
Pontypridd
CF37 5AH**

Date Inspection Completed

06/09/2023

Welsh Government © Crown copyright 2023.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk You must reproduce our material accurately and not use it in a misleading context.

About Cae Glas

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rhondda Cynon Taff County Borough Council Adults and Children's Services
Registered places	39
Language of the service	English
Previous Care Inspectorate Wales inspection	26 January 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 receive very good care and support at Cae Glas. People like living there, with people's relatives and care staff giving very positive feedback. Care and support is warm and attentive. People have detailed outcome-focused personal plans which are reviewed regularly. The service gets the right support for people at the right time. People are supported to safely manage their medication. Arrangements are in place to make sure safeguarding concerns and complaints can be raised. Infection control measures are of a good standard. The service has relevant policies and procedures in place. The service has auditing systems and meets the legal requirements in relation to Responsible Individual (RI) visits and quality of care reviews. The environment is clean, well-maintained, and well-presented. Care staff are recruited following recruitment checks, receive regular training, and feel supported in their work. Improvements are need to the supervision arrangements.

Well-being

People are treated with dignity and respect. People appear settled in their environment and receive warm and attentive support. People tell us their views and wishes are listened to and respected. Care and support is person-centred. The service has good relationships and lines of communication with relatives, who keep them informed, updated and involved in their relatives' care. Friends and relatives can visit when they wish.

People are supported to be as healthy as they can by getting the right care at the right time. The home liaises with external health professionals to refer any concerns and follows appropriate guidance. Personal plans are detailed and reviewed regularly. Meal options are balanced, and portions appear appropriate. People receive their prescribed medication as directed. The home has a sufficient supply of personal protective equipment (PPE), with infection control measures in place and in line with its policy. People are supported and encouraged to take part in activities where they can.

People live in an environment which supports them to meet their needs. Cae Glas is a service for older people with residential care needs who experience dementia. Bedrooms are comfortable and personalised, with sufficient communal areas available. The home is clean, well-maintained, and well-presented.

People are protected from abuse and neglect. Policies and procedures support good practice and can assist staff to report a safeguarding concern. Care staff feel confident if they raised an issue with the manager, it would be responded to. Care staff understand their responsibilities and how they should respond to potential safeguarding issues. Pre-recruitment checks are in place and regular training supports continued development. Improvements are needed to supervision arrangements. Incidents and accidents are logged, with appropriate actions taken by the service in response. The service assesses risks to people and how to manage these. It embeds best practice around the risk of falls, and how to respond, within its care documentation.

We were told the home does not provide a service to people in Welsh at the time of the inspection. It has several Welsh-speaking staff and could make efforts to facilitate support in Welsh if needed.

Care and Support

People receive very good care and support at Cae Glas. Interactions between care staff and people are warm, patient, and attentive. People appear well cared for and appropriately dressed, being supported in a calm manner. People told us staff “*respect my choices*”, “*I’m so glad they chose this home*”, and “*I have everything I need*”. People’s relatives told us staff are “*fantastic*” and “*seem genuine*”, and they are “*over the moon*” their relative moved to the service. We saw an extremely innovative and person-centred approach to supporting a person moving into the service, which is to be commended. We also saw an abundance of evidence of people taking part in activities and events, being supported to achieve person-centred outcomes.

People have detailed care documentation to support staff to meet their needs and achieve their outcomes. Personal plans are person centred, detailed and outcome focused. We saw extremely good practice around procedures supporting people who have experienced a fall being embedded within care documentation. This provides staff with clear direction and guidance around how to respond in the event of a person falling. Plans are reviewed regularly with people and their representatives, with newly created review forms being used to help improve the review process. Daily recordings and supplementary monitoring charts are in place, giving important information about people’s progress and identifying changes in care needs. We viewed evidence of appropriate and timely referrals to health professionals, with recommendations and direction acted upon by the service and personal plans updated accordingly. Deprivation of Liberty Safeguard (DoLS) applications have been made where people lack mental capacity to make decisions about their care and accommodation and need to be deprived of their liberty to keep them safe.

People benefit from a balanced diet and varied menu. There are a variety of options on the menu, with people offered alternatives if needed. People have drinks to help keep them hydrated and are supported at mealtimes when needed. Dietary needs and preferences are understood and available to kitchen staff, who told us about some people’s specific needs. This information corresponded with information in people’s personal plans.

There are infection control measures in place to help reduce the risk of transmission of potential sources of infection. Staff have access to a supply of appropriate PPE. There is an infection control policy in place which staff are aware of and understand their responsibilities around this. Domestic staff have daily cleaning schedules, which we observed being completed. The laundry routines help reduce the risk of infection.

The management and storage of medication is safe. Medication is stored securely and can only be accessed by authorised care staff. Records show care staff administer medication

in line with the prescriber's directions. The home has a medication policy in place. Medication is audited.

Environment

People's wellbeing is enhanced by living in an environment which is clean, safe, and suitable for their needs. Cae Glas is an older purpose built two-storey building. The home is clean, tidy, and free from malodours. The service takes measures to make the home secure, and visitors are required to sign before entry. A lift is in place for access between levels. Access between levels is secure. Rooms are individualised to people's tastes and contain photos, decorations, and keepsakes, which promote a feeling of belonging. There are several lounge areas throughout the home, where people can choose to spend their time. There are sufficient toilet and bathing facilities available on each floor. Communal areas are homely and tidy. Some areas have recently been redecorated, enhancing the environment, and providing comfortable areas for people. The manager told us plans to further decorate the home and furnish communal areas with new furniture. Dining rooms are located on each floor, where people can choose to have meals. The kitchen facilities are appropriate for the home and achieved a Food Hygiene Rating of 5, meaning it is 'very good'. A good-sized garden area in the central courtyard of the home has seating and is available for people to use. The home is surrounded by well-maintained and attractive grass areas.

The home environment is safe. Substances hazardous to health are locked in cupboards, in line with Control of Substances Hazardous to Health (COSHH) regulations. There are window restrictors in all bedrooms and bathrooms viewed. Fire exits are clear of clutter and obstructions, with no obvious trip hazards more generally. Daily cleaning and laundry duties are being maintained, with the home appearing clean in all areas viewed. There is a maintenance person in place. Maintenance records confirm the routine testing of utilities. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal emergency evacuation plans enable staff to understand the level of support people require in the event of an emergency and are easily accessible.

Leadership and Management

The recruitment and training of staff is safe and effective. Staff files show the correct recruitment arrangements are in place and contain all legally required information, such as up-to-date Disclosure and Barring Service checks and proof of identity. Care staff start work once pre-employment checks are completed. New care staff complete an induction programme. 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, with additional training planned and in the process of being completed. Staff told us they feel well trained and can perform their duties safely and effectively.

Care staff generally feel supported in their role, but improvements are needed around supervision. They told us *“it’s not like going to work”*, *“it’s brilliant”*, they *“like the atmosphere and the residents”*, and the managers are *“approachable”*, *“I could talk to any of them”*, and they *“act on what’s been raised”*. The service has experienced high levels of staff sickness. While agency staff have been used, the same agency staff are used to help facilitate continuity of care. Even though staff sickness has had an impact on morale, staff told us they feel well-supported, like working at the service, and feel the management are doing their best to resolve the situation. The rota showed target staffing levels are being met and was reflective of staffing on the day. Improvements are needed to the supervision and appraisal arrangements. Staff have received minimal and irregular supervision, which falls short of what is required. Regular supervision is an important requirement for staff to reflect on practice, discuss issues and identify support that may be needed. We advised this is an area for improvement, and we expect the service to take timely action to address this.

Systems are in place to support the running of the service. The service has governance, auditing, and quality assurance arrangements. These help to self-evaluate and identify where improvements are needed. The RI has oversight of the service. The RI undertakes the legally required three-monthly service visits and six-monthly quality of care reviews. The service is open and transparent, identifying and acting to resolve issues and making the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences at the service. Policies and procedures, such as for complaints, infection control, medication, and safeguarding, are in place. They give guidance to care staff, for example telling them what to do if they think someone is at risk of harm. The service gathers the views of people and care staff. Procedures are in place to deal with complaints.

The service provides sufficient information to the public. The Statement of Purpose sets out the service’s aims, values, and support provided. A written guide contains practical information about the home and the care provided and is in the process of being updated.

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
-----	--	-----

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 [Feedback surveys page](#).

Date Published 26/10/2023