



## Inspection Report on

**Ystrad Fechan**

**Station Road  
Treorchy  
CF42 6HN**

**Date Inspection Completed**

05/07/2023

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## About Ystrad Fechan

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	3
Language of the service	English
Previous Care Inspectorate Wales inspection	28 July 2022
Does this service provide the Welsh Language active offer?	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

Ystrad Fechan is a respite service for people who have a learning disability and associated needs. People are very happy with the care and support they receive when staying there. We saw people settled and at ease in their environment, and relatives told us they are very satisfied with the support people receive. Care staff are compassionate and respectful and enjoy working at the service. The service has systems to ensure care and support is of a good standard. People benefit from individualised and current personal plans. People and their relatives are always consulted and involved in their care. The service is well-managed. Policies and procedures help protect people from harm and abuse. The service meets the legal requirements in relation to Responsible Individual (RI) visits and quality of care reviews. The environment is clean, homely, and adapted for people's needs. Infection control measures are of a good standard. Care staff are recruited following robust recruitment checks, receive regular supervision and training, and feel supported in their work. Medication is safely managed.

## Well-being

Ystrad Fechan supports people to have control over their day-to-day lives. People's views and wishes are sought and help inform the plan for their stay. Personal plans consider people's needs, interests, and preferences. Risk assessments are in place to promote positive risk taking. Care and support is person-centred and people are treated with dignity and respect. Staff know people well and respect and promote choice. Where a person needs help to make their voice heard, people's families and representatives are supported to do this, being involved in reviews of personal plans. The home has good relationships and lines of communication with relatives, who tell us staff keep them informed and updated.

People are supported to be as healthy as they can by getting the right care at the right time. They are supported to keep appropriately active, being encouraged to take part in activities and access the community. The home liaises with health professionals to refer any concerns and follows appropriate guidance. Meal options are balanced, with care staff promoting healthy choices. The home has a sufficient supply of personal protective equipment (PPE), with infection control measures in place and in line with its policy. We saw the management of medication is safe and in line with the medication policy.

People are supported in an environment that promotes their well-being. Ystrad Fechan is a purpose-built bungalow that caters for a wide variety of needs. Specialist equipment is in place to aid people with mobility needs. Rooms are spacious and comfortable. The home is located close to the town centre, meaning local facilities and amenities are within close distance. We saw people are relaxed and comfortable in their environment. People tell us they like staying there.

There are systems in place to help protect people from abuse and harm. Policies and procedures support good practice and can assist staff to report a safeguarding concern. Care staff understand their responsibilities around safeguarding procedures and told us they feel confident if they raised an issue with the manager, it would be responded to. Pre-recruitment checks are robust and regular supervision and training supports continued development. Incidents and accidents are logged, and appropriate actions taken by the service. The service is proactive in identifying potential risks to people or staff and how to manage these.

We were told the home does not provide a service to people who speak Welsh at the time of the inspection but has written information available in Welsh. The service would need to take additional steps to facilitate a service in Welsh if this were needed.

## Care and Support

Care and support is warm and positive at Ystrad Fechan. We saw kind and compassionate interactions from care staff towards people, who appeared well cared for. Care staff do not appear rushed, and people are relaxed in their environment. People told us the service is “*beautiful*” and “*fantastic*”, and care staff “*help me and look after me*” and are “*really nice*”. People’s relatives told us they are “*very happy*” and, as a respite service, “*they always support the family*”.

People receive care and support tailored to their needs. Personal plans are individualised, detailed, and put together with people and their representatives. Detailed risk assessments are in place covering areas specific to the person’s needs. Reviews take place before every stay and plans are updated where necessary, ensuring care staff have the most up-to-date information about a person. We viewed evidence of ongoing partnership work by the service with other professionals, such as learning disability nurses and consultant psychiatrists. Care files contain assessments and guidance from other professionals, with people’s plans and risk assessments incorporating this information. Service contact sheets contain detailed information about a person’s day, which help give a picture of a person’s stay. This information is put into a document and shared with people and their families at the end of their stay. Personal spending records show people are supported to manage their money and are being safeguarded with this.

People benefit from a balanced diet. Dietary preferences are understood and, while people express their choices and wishes, healthy options are promoted and encouraged by care staff. We saw people having a salad and baked potato for lunch, which they told us they were enjoying.

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. There is an infection control policy 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 appeared clean and well kempt.

There are systems in place for the management and storage of medication. Medication is stored securely. Medication Administration Records (MAR) are free from errors, and guidelines from the Local Health Board about when to administer ‘as needed’ medication are in people’s files. The service has updated its medication policy to accurately reflect practice, which is an improvement acted upon since the last inspection. Medication is checked and audited throughout a person’s stay.

## Environment

People's wellbeing is enhanced by staying in an environment that is clean, safe, and suitable for their needs. Ystrad Fechan is a purpose-built bungalow, located close to Treorchy town centre. The service can accommodate up to three people who have a learning disability and associated needs at any one time. The home is secure from unauthorised people, with visitors required to sign before entry. The home is clean, tidy, and free from malodours. Bedrooms are large, spacious, and contain televisions, with a specialist tracking hoist and adjoining ensuite bathroom in place for one of the bedrooms. The service has a very homely and comfortable living area, and an adjoining conservatory. Both rooms serve as areas where people can choose to spend time and undertake activities, and where they can dine. The kitchen facilities are appropriate and enable people to take part in preparing food if they wish. There is a large, secure, well-presented garden with accessible patio areas for people to use. We were told of plans to redecorate the hallways.

The service takes measures to ensure the home environment is safe. Substances hazardous to health are stored in cupboards in line with Control of Substances Hazardous to Health regulations and are highlighted accordingly. We saw fire exits were clear of clutter and obstructions. There are fitted window restrictors in all bedrooms and bathrooms. Maintenance is managed by the Local Authority's Corporate Estates team. Maintenance records confirm the routine completion of utilities testing. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal evacuation plans are in place and are accessible in a 'grab file' at the entrance to the building in the event of an emergency.

## Leadership and Management

The service is very well-managed. Governance, auditing, and quality assurance arrangements are in place to support the running of the service. These systems help the service self-evaluate and identify where improvements are required. The manager is extremely conscientious, seeking to improve and develop the service and addressing all issues as soon as they occur. The service is open and transparent and makes the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences at the service. We saw evidence of the RI undertaking the legally required three-monthly service visits and six-monthly quality of care reviews. Policies and procedures, such as complaints, medication, and safeguarding, are in place. These give guidance to care staff, for example telling them what to do if they thought someone was at risk of harm.

People are supported by a team of experienced care staff who are recruited safely. Staff files show the correct recruitment arrangements 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 and specialist areas of care, such as percutaneous endoscopic gastrostomy (PEG) feeding and Positive Behaviour Support. Staff told us they feel well trained and receive regular training on an ongoing basis.

Care staff feel supported in their role. They told us they “*enjoy*” working at the service, it has “*lovely people and lovely staff there*”, and the manager is “*really supportive*” and “*very approachable*”. Turnover of care workers is low, with some having worked for the service for many years, helping facilitate continuity of care. Care staff have regular supervision and yearly appraisals to reflect on their performance, identify support they might require, and discuss any issues. The manager told us staffing levels are worked out based on the number of people staying and their level of need. This is adjusted as needed, is planned based on respite bookings, and we saw the rota reflected staffing.

The service provides good information to the public. The Statement of Purpose sets out the service’s aims, values, and delivery of support. A written guide contains practical information about the home and the care provided, and is available in an easy-read format.

### 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
12	The medication policy has not been reviewed nor updated to reflect practice.	Achieved

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**Date Published** 11/08/2023