



## Inspection Report on

**Ystrad Fechan**

**Ystrad Fechan  
Station Road  
Treorchy  
CF42 6HN**

## **Date Inspection Completed**

*28/07/2022*

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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	
Does this service provide the Welsh Language active offer?	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

Overall, people are very happy with the care and support they receive when staying at Ystrad Fechan. People told us they enjoy staying, with relatives telling us they are happy with the support people receive. Staff are compassionate and respectful and generally enjoy working at the home. 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. Up to date 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 appear of a good standard. Care staff are recruited following robust recruitment checks. They receive regular supervision and feel supported in their work. Staff receive both core and more specialist training, enabling them to work for people who have a range of complex health needs.

## Well-being

People are supported to have control over their day-to-day lives when they stay at Ystrad Fechan. We saw people lead lives of their choosing, with their wishes and views sought and respected. Care and support is person-centred and people are treated with dignity and respect. People can raise issues or make requests, and these are generally responded to. 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. We saw evidence of correspondence with professionals, with personal plans reflecting direction given. Personal plans are detailed, person-centred, and reviewed before a person stays. Meals are of a good standard and are what the person has chosen. The home has a sufficient supply of personal protective equipment (PPE) and we observed staff using this as required. We saw the management of medication is safe, but the medication policy needs to be reviewed to ensure it fits with current practice.

People are supported in an environment that supports them to achieve their well-being. Ystrad Fechan is a purpose-built property 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 were relaxed and comfortable in their environment.

There are systems in place to protect people from abuse and harm. Access to the home is restricted to authorised individuals. Ongoing training ensures care staff are sufficiently skilled. Up-to-date policies support good practice and assist staff with reporting a safeguarding concern and whistleblowing, should they be needed. Most staff are up to date with safeguarding training and report they feel confident that if they raised an issue with the manager, it would be responded to. Recruitment is robust, and regular supervision supports continued development.

## Care and Support

People can lead lives of their choosing when they stay at Ystrad Fechan. We saw care and support is provided in a dignified manner, with people appearing well cared for and appropriately dressed. People who told us they liked staying at the service, they liked the food and being able to “*go out*”, and the staff were “*nice*”. People’s families told us the service is “*brilliant*”, staff are “*absolutely fantastic*”, and that they “*don’t know what we’d do without them*”. We saw people were able to take part in activities of their choosing and were asked for their choice of food and drink throughout the day.

Care staff have up to date knowledge of people’s needs and personal goals. Personal plans are person-centred and contain information about people’s goals and outcomes. We saw evidence plans had been produced in partnership with people and their representatives. We saw plans are reviewed before a person stays. We saw detailed risk assessments, covering areas specific to the person’s needs. Care files contained assessments and guidance from other professionals, such as learning disability nurses and consultant psychiatrists. We viewed evidence of appropriate and timely referrals to health professionals, with recommendations and direction acted upon by the service. Service contact sheets contained detailed information about details from a person’s day. Personal spending records showed people were supported to manage their money and were safeguarded.

There are systems in place for the management and storage of medication. Medication was stored securely. Medication Administration Records (MAR) were viewed, and we saw guidelines from the Local Health Board about when to administer ‘as needed’ medication in people’s files. The controlled drugs book did not always have two signatures. The deputy manager told us the staff was ‘lone working’ on these occasions. This practice is different to the service’s medication policy, which states two signatures are needed when administering controlled drugs, meaning the policy does not match current practice. We advised the service this is an area of improvement, and we expect them to take timely action to address this.

There are infection control measures in place to help keep people safe from the transmission of COVID-19 and other potential sources of infection. Staff have access to a supply of appropriate PPE and were observed using this. There is an infection control policy in place. Regular cleaning is undertaken by staff, with the home appearing clean and well kempt on the day of inspection.

## Environment

People's wellbeing is enhanced by staying in an environment that is clean, safe, and adapted to their needs. Ystrad Fechan is a purpose-built bungalow, located relatively close to the town centre. 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 and comfortable, with specialist tracking hoist equipment and an adjoining bathroom in one of the bedrooms. The service has a homely and comfortable living area, where people can choose to spend their time. An adjoining conservatory serves as both a dining facility and an area to undertake arts and crafts-type activities. The kitchen facilities are appropriate and enable people to take part in preparing food if they wish. There is a large, secure garden with accessible patio areas for people to use.

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. We saw fire exits were clear of clutter and obstructions. There are fitted window restrictors in all bedrooms and bathrooms viewed. Maintenance is managed by a 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 ensures care staff are fit to work with vulnerable people. Staff files viewed show appropriate recruitment arrangements and contain all legally required information. Staff start work once pre-employment checks are completed. New staff have access to an induction programme, and on-going training is in place for all staff. Staff told us they feel they get the right amount of training. Training records show staff have up to date training in core areas of care. Additional training for specialist health conditions relevant to people who stay at the service is also in place, such as percutaneous endoscopic gastrostomy (PEG) feeding and Positive Behaviour Support.

Staff feel supported in their role. They told us they “love” working at the service and supporting the people who stay there, and there is a “good team” who are “like a big family”. Some staff have worked for the service for many years, which helps facilitate continuity of care. Staff have regular supervision to reflect on their performance, identify support they might require, and discuss any issues. The deputy 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 the rota reflected staffing on the day.

Appropriate governance, auditing and quality assurance arrangements are in place. These systems help the service to self-evaluate and identify where improvements are required. The RI appears to have good oversight of the service. We saw evidence of the RI undertaking the legally required three-monthly service visits and six-monthly quality of care reviews. We saw a recently purchased fish tank in the lounge, which was put in place following feedback from people. Policies and procedures, such as for complaints, infection control, medication, and safeguarding, are in place. They give clear guidance to care staff, for example telling them what to do if they thought someone was at risk of harm.

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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12	The medication policy has not been reviewed nor updated to reflect practice.	New
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