



## Inspection Report on

**Ty Aberdafen**

**The Brain Injury Rehabilitation Centre  
The Avenue Morfa  
Llanelli  
SA15 2DP**

## **Date Inspection Completed**

27/04/2023

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## About Ty Aberdafen

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	The Disabilities Trust
Registered places	24
Language of the service	English
Previous Care Inspectorate Wales inspection	9 September 2022
Does this service provide the Welsh Language active offer?	This service provides an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

Ty Aberdafen endeavours to support people as they wish to be supported. The management team monitors all aspects of peoples' daily care and support. Good communication channels are evident throughout the home, with prompt referrals to healthcare professionals where necessary. People say they are happy. Care workers are enthusiastic and strive to make a positive difference to people's lives: they say they feel well supported by senior staff. All employees attend training relevant to their roles and say it helps them to support people appropriately.

### Well-being

Care workers listen to people's opinions about the care and support they receive: care workers regularly meet with people to discuss their support. Personal plans clearly reflect each person's support needs, including the way people make their opinions heard where they do not use speech. People and/or their representatives have profiles in their care records that describe what is important to them.

Care workers are aware of the importance of each person's well-being. There is good sharing of communication within the team and the management team make prompt referrals to healthcare professionals when necessary. Staff members regularly talk to people and/or their representatives to review any changes to their care and support needs.

People do the things that make them happy and are as busy as they wish to be. The home has specific rooms identified for a cinema, café, a relaxing sensory space, music and games. In addition, people use a gym for exercise and fun. People also go out shopping and for drinks in cafes etc.

The service provides the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. While no one currently in the home is a Welsh-speaker, some staff members speak Welsh and there is bilingual signage around the premises. The home's statement of purpose is bilingual and there are plans for the service user guide to be produced in Welsh too.

The provider considers a range of information to ensure they can meet people's needs before admission to the home. This includes obtaining information from relatives and external healthcare professionals such as social workers. From this, senior staff develop care records that describe people's support arrangements and requirements. We saw that all care records are currently being adapted, with plans in place to have everything captured online later this year. In addition, Personal Emergency Evacuation Plans are being simplified, to provide the basic information staff members and emergency services need to assist with any safe evacuation.

People receive support as described in their care plans. It is clear that people can follow their own routines as they wish and say the staff team support them well. The provider has a number of specialist healthcare professionals, such as a physiotherapist and an occupational therapist available throughout each week.

People feel safe. Care workers treat people with dignity and respect. When people first come to the home, they have a service user guide that describes what they can expect from the home as well as details of the complaints process should they need to use it. Care workers have regular safeguarding training updates and are aware of current best practices. They told us senior staff members support them well and are always available for advice if necessary.

The provider has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers may refer to infection management policies when necessary. All measures are in constant use to ensure people are safe from infection.

## Environment

People receive support in a suitable environment. The home is safe, warm and clean, and people say they feel comfortable. All bedrooms and communal rooms are on the ground floor of the building. Bedrooms are spacious and personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture. People can choose where to spend their time, be it in their own rooms or with others in communal areas or the garden. Facilities and equipment promote each person's independence as much as possible: there are wide corridors throughout the premises to help people with reduced mobility. Bedroom doors are wider than usual to accommodate the equipment people regularly use, such as hoists and standing aids. There are adapted bathrooms and kitchens for anyone to use.

A maintenance person checks all equipment monthly. Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002, and there are clear instructions displayed in the home on what to do in the event of a fire.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front door bell before gaining entry and record their visits in the visitor's book when entering and leaving. Care records are kept securely and only available to authorised care workers. Employee personnel records and Deprivation of Liberty Safeguards (DoLS) records are securely stored in a locked office.

## **Leadership and Management**

Overall, the provider has a clear vision of the support it wants to provide, and a positive regard to each person receiving support. There is good management oversight of the

service: the Responsible Individual (RI) is in regular contact with the home and provides good support to the manager. People know how to make a complaint if they need to and are confident the manager would listen to them if they did. The staff team hold regular discussions with people, their representatives and healthcare professionals involved in their care.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Senior staff ensure all care records clearly state any risks to people's well-being, and detailed risk management plans help to keep people safe and as independent as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach the manager, but would contact external agencies such as the local safeguarding office if they thought they needed to.

The provider ensures there are knowledgeable and skilled care workers to provide the right support for people. The staff induction programme links to individual learning outcomes and the 'All Wales Induction Framework for Health and Social Care.' Care workers undertake training relevant to the people they support - they say this provides them with a good understanding of their roles and responsibilities and the best ways to support people. Regular staff meetings give care workers the opportunity to discuss their work and to keep up-to-date with developments in the service. All audit findings are summarised in six-monthly quality of care reports, which identify actions and planned improvements for the service. In addition, employees may discuss any issues they wish to raise in three-monthly supervision meetings.

### 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
16	The provider is noncompliant because they have not completed reviews of care plans 3 monthly.	Achieved
16	Three monthly reviews have not been undertaken and family and representatives have not been invited to reviews	Achieved

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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