



Inspection Report on

Ty Cysgu

Bridgend

Date Inspection Completed

17/01/2023

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About Ty Cysgu

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ty Cysgu Limited
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	13 July 2021
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

Ty Cysgu provides care and support to people on a short-term basis. Most people access the home monthly for respite care. People and their representatives provided positive feedback regarding service provision and the team who provide care and support.

People's care documentation is person centred highlighting their likes, dislikes as well as their support needs. Improvements are needed to ensure personal plans are regularly reviewed and contain the most up to date information.

Care workers are happy working for the service and feel valued and supported. Training is provided to support care workers in their development and help them carry out their work safely. However, not all care workers are compliant with their training requirements.

Governance and quality assurance systems ensure the service is well led and people receive quality care and support. The environment is well maintained, comfortable and safe with good standards of hygiene and cleanliness.

Well-being

People are protected from harm and abuse. There is a safeguarding policy and care workers receive relevant training to enhance awareness of the process for raising concerns. There are also a raft of other policies underpinning safe practice. Risks to people's health and safety are thoroughly assessed and practically managed. The recruitment process is safe ensuring care workers have the right skills and attitude necessary for working in the care sector. Quality assurance arrangements allow the service to reflect and improve.

People are offered choice and treated with dignity and respect. We observed care workers treating people with warmth and kindness, adopting a friendly approach when delivering care and support. Positive feedback from people and their representatives supports our observations. Activities are tailored to people's preferences and needs, allowing people to choose how they spend their time. People are able to choose when and what they eat, and care workers are aware of people's dietary requirements.

People are supported in a person-centred way helping them to achieve their outcomes. Personal plans are clear and concise. They are produced in consultation with people and their representatives. Care workers told us personal plans contain the right level of information enabling them to provide effective care and support to people who use the service.

A clean and comfortable environment helps support people's well-being. Standards of hygiene and cleanliness are high which helps reduce the risks associated with cross contamination. The home, its facilities and equipment are well maintained. People are able to choose where they spend their time, for example, communal areas or their bedrooms. Décor and furnishings are suitable throughout. The home is safe from unauthorised access, and areas within the home which could pose a risk to people's safety are safely secured.

Care and Support

People's care and support needs are set out in their personal plans. The service adopts a person-centred approach in developing plans and involves people and their representatives in the care planning process. This is to ensure the care and support people receive is tailored to their specific needs. Personal plans provided detailed information about the person, including background information, medical history and information regarding their hobbies and interests as well as their care and support needs. Risks to people's health and safety are also considered with management plans that highlight people's vulnerabilities. We saw evidence that people's personal plans are reviewed, however the frequency of reviews is not in line with regulation. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The service operates safe practices in relation to the management and administration of medication. There is a medication policy and care workers receive relevant training. Care workers competencies are monitored by the manager before they are able to administer medication to people. We viewed medication recording charts and found them to be completed correctly without gaps. This suggests people have their medication at the right time. Medication is stored securely in line with best practice guidance.

People are pleased with the service they receive and have positive relationships with care workers. We observed positive interactions between care workers and people throughout the time we spent at Ty Cysgu. We saw care and support being delivered in a dignified manner. Care workers have a good knowledge of the people they support and are familiar with their routines and preferences. People and their representatives provided consistent positive feedback regarding the staff team. One person said, *"The staff here are really nice. I like them all"*. A relative of a person who uses the service told us, *"The staff are amazing. I can't speak highly enough of them"*. People are not left unattended for long periods of time and care workers spend meaningful time talking with people and supporting them to engage in varied activities. We saw evidence illustrating that people are able to access a range of activities including pursuits within the home and in the community.

Environment

People benefit from a safe, clean and comfortable environment. Risk assessments identify environmental hazards and highlight actions for keeping people and staff safe. The home is secure from unauthorised access with visitors required to sign in and out on arrival and departure.

Substances hazardous to health are securely stored and can only be accessed by authorised personnel. We saw there is a cleaning rota completed by staff on a daily basis to maintain high standards of cleanliness and hygiene. The kitchen has been awarded a score of five by the Food Standards Agency which means standards of hygiene are very good. People in communal areas appeared comfortable and relaxed. Communal areas within the home are all suitably furnished and decorated. Bedrooms are spacious and also appropriately furnished and decorated. There is a large garden to the rear of the home with seating available. People are able to use the garden when they choose to relax or take part in activities.

We saw there is an ongoing programme of maintenance, servicing and checks aimed to ensure the environment, its facilities and equipment are safe to use. We saw certificates confirming that fire safety features, gas, and electrical installations are safe. Routine checks are undertaken by the team and any defects are reported for repair or replacement.

Leadership and Management

The service sets high standards for itself and is committed to quality assurance and improvement. The Responsible Individual (RI) appears to have good oversight of the home and is up to date with all their specific duties including quarterly visits and quality of care reviews. Documentation relating to RI visits shows they analyse a range of information and speak to people using the service to inform improvements. The quality-of-care report clearly highlights what the service does well and areas where it can further develop. Policies and procedures are in place and kept up to date. A sample of policies and procedures viewed are all aligned with the most recent statutory and best practice guidance. Other written information we viewed included the statement of purpose and user guide. Both documents are reflective of the service provided and contain all the required information.

People who use the service can be assured staff are recruited via a robust recruitment process. We looked at a number of personnel files which contain all of the required information, such as references, evidence of Disclosure and Barring Service completions, dates and authorisations along with offers of employment. New staff members complete a structured induction programme where they shadow experienced members of the team in order to familiarise themselves with the service

Care workers told us they enjoy working at the home and feel valued and supported. Care workers used words like, *“approachable”*, *“lovely”* and *“really nice”* to describe the management. They said, *“there is an open-door policy”*, *“they respect our views”* and *“things are always dealt with promptly”*. We looked at documentation relating to supervision and appraisal and found care workers are receiving the required levels of formal support. This is important as it gives care workers the opportunity to have one to one meetings with management to discuss any concerns and reflect on their performance.

An ongoing training and development programme provides core and specialist training opportunities to care workers. Care workers we spoke to were positive about training provision saying it equips them with the skills necessary for providing good quality care and support. We examined the service’s training matrix and found not all care workers are up to date with their training requirements. The manager told us there is a backlog in the delivery of some face-to-face training and that care workers would be booked on the relevant courses as soon as possible. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

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
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16	The provider is not compliant with regulation 16(1). This is because not all people's personal plans have been reviewed within the required timescales	New
36	The provider is not compliant with regulation 36(2)(d). This is because not all staff are up to date with their core training requirements	New

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