



# Inspection Report on

**Ty Soberton**

**Cardiff**

## **Date Inspection Completed**

04/07/2023

**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](mailto:psi@nationalarchives.gsi.gov.uk)*  
*You must reproduce our material accurately and not use it in a misleading context.*

## About Ty Soberton

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gofal Cymru Care Ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	23/11/21
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 Soberton is a home for people who are over 16 years of age who have learning disabilities or mental health needs. The home is established to share a manager and staff team with another care home close by. The home is supported by a well-established manager and responsible individual. Actions have been taken to address the areas of non-compliance identified at the previous inspection; these related to the cleanliness of the home and the frequency of reviewing of personal plans.

People receive good care and support from care staff who are warm and attentive to them and their needs. Those who attend school do so regularly and those who are over school age are offered opportunities to enjoy a fulfilling life with consideration given to developing independence, enjoying time with family members and activities within the home and community. People living at the service are compatible and some have lived together for a long time. The home has a stable core group of care staff, and the home is fully staffed with no vacant posts.

The premises are domestic in nature and operate as two flats. They are suitable for their purpose and whilst some improvements to the environment is needed the work is scheduled to be undertaken. The environment promotes positive outcomes for the people who live there.

## Well-being

People are settled, making good progress and are achieving positive outcomes. We saw positive interaction between care staff and children/young adults with care staff taking time to communicate in a respectful and unhurried way, to listen and respond sensitively. They showed a good understanding of everyone's means of communication, their likes, and preferences. People are supported effectively and given the time they need to express themselves and make choices.

Those in full time education have a statement of their special education needs and have a personal education plan in place. They enjoy school and attend regularly. Others are given support to engage in developing independence skills and are supported and encouraged to take part in a range of social and leisure activities in the community.

People are supported to develop and maintain good relationships with family members and some relatives make visits to people at the home. Care staff provide support in line with each person's agreed plan.

Arrangements are in place to meet individual physical, mental and emotional health needs. People are registered with local health care services and are supported to attend appointments. Details of health appointments attended are recorded. Only care staff who have completed relevant training administer and record medication management.

Good attention is given to dietary needs, and we saw care staff preparing a meal with fresh vegetables/ingredients and some people being present during the process. Care is taken to meet individual preferences and choice. Some people are supported to prepare their own meals as part of their preparation for independence.

People are safeguarded. Consideration is given to safe care arrangements such as ensuring the environment is suited to individual needs and care staff levels meet the assessed needs of each person. Care staff have completed suitable safeguarding training or have plans to do so. People have age appropriate access to social media and DVD's and where necessary plans are in place to carry out checks on appliances to ensure safe use. Safe storage arrangements are in place for records, medication and chemicals and substances that could be hazardous to health.

The house is suitable to meet people's needs and is homely; we saw people were relaxed at the home.

## Care and Support

Referral and admission processes are in place to consider the suitability of any referral for a child or young adult coming to live at the home. A range of information is considered in writing and at a referral meeting. When identified as needed, specialist training is provided to the care staff team before admission to ensure they have the skills and knowledge necessary to provide appropriate and safe care and support. When children are referred, care needs to be taken to obtain the local authority care and support plan to identify the authorities' objectives for the placement. A record of decision to admit is recorded.

Personal plans are in place at the point of admission. Following admission, a provider assessment is undertaken within the first week and this culminates in a review of the personal plan. Personal plans are reviewed at least every three months.

The personal plans, risk assessments and PBS (positive behaviour support) plans in place show that people are involved and contribute to developing them. The provider has developed a new format to incorporate the personal plan, risk assessment and PBS into one document. It is almost ready to be introduced at the home and will improve the cohesiveness of information. The provider employs a behaviour specialist who supports the home and assists in writing the positive behaviour support plans.

Weekly planners are in place to support people with their routines, independence tasks, the activities they want to take part in and other activities they may be encouraged to take part in. They are a meaningful tool for some people as are some of the symbols used to aid understanding and communication. People have good support from care staff who are motivated to encourage them to develop their independence, to support relationships with family members in line with their plan and to encourage them to take part in social and leisure activities that promote self-esteem and fulfilment.

Daily log records show how people live their daily lives and provide information for key workers to develop monthly reports. The format of the daily log records has been improved and is near readiness to be introduced.

Care staff are mindful of daily life routines to promote good hygiene and infection control. They wear PPE when carrying out personal care tasks and whilst they have a cleaning rota in place to ensure all areas of the home are regularly cleaned, it should include the staff facilities. Clinical waste collection arrangements are in place. Care staff have completed food hygiene training.

## Environment

The home is a domestic style property in a residential area of the city. It has secure access arrangements in place. It is difficult to park but has good access to transport routes. The home is suitable for its purpose and to meet people's needs.

People personalise their rooms and are involved in choosing the colour when having their rooms decorated. People like and choose to spend some time in their rooms to relax.

Some of the shower/toilet facilities are in poor condition and some furniture is very worn. The work required in the shower/toilet facilities has been assessed and is scheduled to begin in a few weeks time, and arrangements are in place to address the needs for repair/replacement of furniture.

The house has a small garden. It provides a positive resource for people's enjoyment. The trampoline is popular, but it is damaged and needs to be replaced.

Secure storage is in place for medication, records, and household products. The office provides safe storage for day-to-day records.

## Leadership and Management

The homes management and care staff team provide a service to this home and another home close by. The structure of the services is for one manager and the staff team to meet the needs of both homes. The home is operating within the statement of purpose. The leadership and management arrangements at the home promote people's wellbeing.

Areas identified as in need of improvement at the last inspection relating to the cleanliness in the service and the frequency of reviewing personal plans are met.

The home has a core group of care staff at the home who are well established and there are no care staff vacancies. The rota shows consistent and appropriate care staffing arrangements are in place; it identifies which staff are caring for which people on each shift and promotes consistency of care and support.

Monitoring records are in place relating to staff registration with Social Care Wales and dates for DBS renewal.

Arrangements for care staff to be provided regular supervision are in place. A matrix is in place for planning and monitoring purposes. Care staff receive supervision every eight weeks, the supervisor and supervisee sign the records.

Care staff are provided with opportunities to develop and undertake training. Four staff are qualified and two are undertaking qualification training. Other staff are at various stages of undertaking their induction and AWIF (All Wales Induction Framework) training. When complete they will enrol to begin qualification training. The provider supports staff to undertake core training online and some training is provided as classroom based training. Most staff have completed the core mandatory training and others are progressing through the training modules. Bespoke training is provided when identified as needed, for example, when identified as a need during the referral process. The training matrix needs to be kept up to date and reflect any additional training individuals attend. Some staff told us they appreciate the opportunities they have been given for their professional development at the home and enjoyed their work.

The responsible individual (RI) visits the home regularly and completes a report, the most recent visits being in April and June 2023. These visits identify areas that need improvement. Quality of care reviews have taken place and reports are in place dated September 2022 and March 2023. The reporting process needs further development, for example to reflect consultation with people who live in the home, relatives, staff, and professionals involved. The reports need more detail.

### 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
------------	---------	--------



N/A	No non-compliance of this type was identified at this inspection	N/A
44	Toilet facilities were not kept in a clean hygienic condition and did not have hand washing facilities in them.	Achieved
16	Review of the personal plan (Regulation 16(1) & 16(4)): The personal plan must be reviewed as required, but at least every three months, with the involvement of the individual, the placement authority (if applicable) and any representative.	Achieved

### **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** 14/08/2023