

Inspection Report on

Cwm Hyfryd

Blackwood

Date Inspection Completed

14/02/2024

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About Cwm Hyfryd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Achieve together Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	17 February 2023
Does this service promote Welsh language and culture?	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

People and their representatives are very happy with the care and support they receive. Care staff treat people with respect and genuine warmth, they have positive relationships with the people they support. People's care needs and preferences are recorded in their personal plans. The plans focus on people's strengths and the goals they would like to achieve. Plans are reviewed but not always effectively, some required changes had not been made.

The environment is homely, well maintained, and meets the needs of people living there. Care staff are safely recruited, receive relevant training for their roles, and have regular supervisions. The Responsible Individual (RI) visits the home regularly and has effective oversight of the running of the home. An acting manager runs the home on a day-to-day basis, supported by an experienced manager who also runs another home nearby. Care staff describe the management team as supportive and approachable.

Well-being

People have control over their day-to-day lives as much as possible. One visiting professional told us the person they represent has received life changing support. They told us the person has increased their confidence and independence significantly since being at the home. They also said that communication with the home is excellent.

People enjoy a range of activities both within the home and in the local community. Care staff complete and regularly review a 'wheel of engagement' for each person which identifies goals people would like to achieve, along with hobbies and activities they like to spend time doing. People are supported to maintain relationships with their families.

People receive the support they need to maintain their health and well-being. The service completes a range of risk assessments and personal plans, which identify each person's care and support needs and how these can be best met.

People are protected from the risk of harm and abuse. Care workers spoke about the people living in the home and have a good understanding of the person, their needs and how these should be met. Care workers interact and support people in a caring and thoughtful manner. Care workers complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the current guidance and is kept under regular review.

Care and Support

People receive personalised care and support as and when required. We observed care workers to be attentive and supportive to people. People are communicated with in the best way for them individually and staff receive specialist training in this regard.

Peoples care needs and preferences are recorded in their personal plans. The plans contain information about the person's social history and important background information, so care staff can get to know them better. Each identified area starts with a focus on what people's strengths are, then informs care staff of how to support people to achieve their goals in that area. Although we saw that regular reviews of these plans had been recorded, not all information was up-to-date or accurate. One plan had outdated information on how to support someone with their mobility, and others contained outdated information about pandemic lockdown restrictions. This is an area for improvement, and we expect the provider to take action. We will consider this at our next inspection.

Overall, care notes are detailed and comprehensive, which provides evidence people are being supported as described in their personal plans. However, we found a specific gap in records for a person who required additional support on a recent occasion. Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP). All appointment records and outcomes for review are kept within the daily notes. People are encouraged to maintain a healthy weight as part of a healthy lifestyle.

Systems are in place for the safe management of medication within the service. Care staff support people with their medication, which helps to maintain their health. Most records are completed accurately, although we saw the policy had not been followed for handwritten entries on medication charts. The manager assured us they would address this. Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance.

Environment

The home is kept clean and tidy and maintained to a good standard. The environment is light and homely throughout. Some areas of the home have recently been redecorated and we were told about plans for a refurbishment of one bedroom. There are framed pictures of people living at the home on the walls, along with some displays of artwork. People's bedrooms are personalised to their own taste, people choose the colour schemes for their rooms and what furniture they would like. We saw some people enjoyed having specialist sensory equipment in their rooms.

The home is well equipped, the conservatory has a dining table which people also use for arts and crafts in between meals. The manager told us about plans to move the sensory and activities room into the conservatory. The fitted kitchen is in good condition, there is a separate utility room which houses the laundry facilities for the home. The communal bathroom, wet room and toilets are all well-equipped and kept clean and tidy. The outdoor space has a decking area, raised beds and areas for people to grow produce and flowers. Garden furniture is sturdy and in good condition.

People benefit from a safe environment; the front door is kept locked. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms are completed, and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support them to leave the premises safely in the case of an emergency. The home has a four-star rating from the Food Standards Agency which means that food hygiene standards are good.

Leadership and Management

The acting manager oversees the day-to-day running of the home, with support from the manager who also runs another local home, the area manager and RI. The management team all know the people living at the home very well and are supportive of care staff. The RI has effective oversight of the management of the home, they visit the service regularly and gain feedback from residents and staff on the running of the home. Quality-of-care reports are completed every six months, which analyse key areas of the service and events which have occurred. Regular management audits are carried out across a range of areas by the manager and deputy manager.

Sufficient staffing levels are in place to meet the care needs of people living at the service. Care staff told us they have enough time to support people appropriately. Staff respond to requests from people in a timely manner and interactions are friendly, respectful and unrushed. People are supported by staff who are knowledgeable, caring, and competent in their duties. Care staff are safely recruited, we saw evidence of the necessary checks being carried out before people are employed. These include references from previous employers, Disclosure and Barring Service (DBS) checks, and identification documents. Care staff are registered with Social Care Wales, the workforce regulator.

Care staff complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm. Effective communication is evident within the team and care workers enjoy their jobs. Care workers told us they feel well supported and valued. They receive regular supervision with their line manager. This one-to-one support provides opportunities for staff members to discuss any concerns or training needs they may have and allow their line manager to provide feedback on their work performance.

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	

16	Personal plans and risk management plans have not been updated to reflect peoples current needs and circumstances after review	New
36	Staff do not receive one to one supervision as frequently as the Statement of Purpose states and not as frequently as required by regulations	Achieved

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