

Inspection Report on

Cwm Hyfryd

Blackwood

Date Inspection Completed

25/01/2023

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: <u>psi@nationalarchives.gsi.gov.uk</u> You must reproduce our material accurately and not use it in a misleading context.

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	This is the first inspection since the service was re- registered under The Regulation and Inspection of Social Care (Wales) Act 2016
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

Cwm Hyfryd provides care and support for up to five adults. The environment is well maintained and has a homely feel. People living at the home are well cared for and occupied with a range of activities in the home and the local community. People and their representatives are very complimentary about the care and support they receive.

The home has an ethos of recognising people's strengths and individual backgrounds, as well as their care needs and preferences. Personal plans are clearly written to inform care staff how best to support each person. These plans begin with a detailed social history of the person, their likes and dislikes. The plans are kept under regular review to ensure any changes are documented.

Care staff know people well and treat them with warmth, dignity and respect. Care staff are safely recruited and feel valued in their roles. Overall, they are well trained, although some face-to-face training has fallen behind during the pandemic.

The home is well-managed, and the responsible individual (RI) has good oversight of the management of the service. 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. They receive good quality supervisions, but the frequency of these needs to improve.

Well-being

People have control over their day-to-day lives as much as possible. One visiting professional told us "Communication is excellent, the person they work with has come on drastically since moving in. Staff always advocate for them, take them out and involve them in decision-making. They have worked with them to build skills in all areas, and they are doing really well."

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.

People enjoy a range of activities both within the home and in the local community. Visitors and positive relationships with loved ones are encouraged and supported. Care staff complete and regularly review a 'wheel of engagement' which identifies goals people would like to achieve, along with hobbies and activities they like to spend time doing.

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.

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 to in the best way for them individually and staff receive specialist training in this regard.

The care needs and preferences of each person are clearly documented, and care staff access this information to inform their daily routines. The level of detail in the plans is generally good but more detail is required in relation to supporting people with their oral hygiene routines. The manager assured us this would be addressed. Plans inform care staff of people's strengths, abilities, preferences and their social histories. This allows care staff to get to know each person for who they are and encourages care and support to be individualised.

Plans are regularly reviewed to ensure they are up to date and reflect people's current needs and aspirations. Care notes are detailed and comprehensive, which provides evidence people are being supported as described in their personal plans. 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. Records are completed accurately. We found insufficient space to store new deliveries of medication safely, the manager assured us this would be addressed. Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance.

Environment

The home is maintained to a high standard, well organised, and kept clean and tidy. The environment is light and homely throughout. New flooring has been laid throughout the corridors. 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 we saw people also use for arts and crafts in between meals. We saw a small lip in the floor leading into the conservatory which may be a trip hazard. The manager assured us this would be addressed. There are separate sensory and activity rooms with a range of materials and games for people to choose from. 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 a polytunnel for people to grow produce and flowers. Garden furniture is sturdy and in good condition.

People benefit from a secure 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 some planned works scheduled following a fire service visit. 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, supported by 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. There are thorough governance arrangements in place. The RI has provided CIW with copies of reports that evidence people, their family members, care staff and visiting professionals are spoken with regularly. The feedback from all parties is used to inform the running of the home.

Sufficient staffing levels are in place to meet the care needs of people living at the service. We viewed four weeks of staff rota's which reflects sufficient staff numbers are consistently deployed. 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, competent and fit to care for people living in the service. Staff told us they feel well supported by the management team.

Care staff complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm. We saw some face-to-face and specialist training refresher courses had fallen behind during the pandemic, the manager assured us this would be addressed. Personnel files are well organised and contain all of the required information.

Effective communication is evident within the team and care workers enjoy their jobs. Care workers receive supervision with their line manager. This one-to-one support provides opportunity 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. The frequency of these supervisions needs to be increased to meet the regulatory requirements of being at least every three months. 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

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	New

Date Published 13/03/2023