



Inspection Report on

Livability Hafan Y Coed

**1 Llest Mews
Llest
Aberystwyth
SY23 3AU**

Date Inspection Completed

08/04/2024

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About Livability Hafan Y Coed

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Livability
Registered places	7
Language of the service	English
Previous Care Inspectorate Wales inspection	15 May 2023
Does this service promote Welsh language and culture?	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

People feel safe and happy. A relaxed atmosphere helps people and visitors feel welcome, as a professional management team continually endeavours to develop people's support wherever possible. Good communication channels are evident, with robust monitoring of the care people receive every day. The Responsible Individual (RI) is in regular contact with the home and can be relied upon to provide good, practical support to the staff team.

Care workers feel well supported by senior staff and receive training relevant to their roles. The enthusiastic and professional staff team want to make a positive difference to people's lives, where people they support are at the heart of the service. Care workers ensure people are invited to contribute to their review process so that each person has a voice. People are encouraged to make daily choices in how they live their lives and to do things that are important to them.

Well-being

People have control over their lifestyle choices and are as independent as they wish to be. Care workers know the people in the home well and work with each person to ensure they receive the support and information they need. Care records clearly describe each person's support arrangements: they contain personal preferences, background and family histories, and list and identify people who are important to the person. In addition, because people are actively involved in their care reviews, they are aware of any necessary changes when they occur. House meetings let people raise any issues they want to discuss with the staff team.

The home's statement of purpose accurately describes what the service provides. All people using the service have a copy of the written guide: this provides details of what they may expect from the home as well as details of the complaints process should they need to use it. People have access to advocacy services where they want independent support in issues that affect them.

People are relaxed, comfortable and know what opportunities are available to them: they do things that make them happy. Care workers have good relationships with people and interact in positive ways, with good-humoured conversations, encouraging people to make choices and decisions about how they spend their time. Each person is as active as they wish to be. People personalise their surroundings in line with their interests and hobbies.

As far as possible, people are safe and protected from abuse. People say they feel safe, and the staff team protect their privacy and personal information at all times. Care workers have been through the provider's rigorous recruitment process and are regularly monitored to ensure they are meeting people's needs. All care workers receive formal support, guidance, and relevant training, and may access policies and procedures to understand their responsibility to protect vulnerable people. The home's safeguarding policy and procedure is in line with current legislation and local safeguarding procedures.

The home 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. Some care workers are Welsh speakers and there is some bilingual signage around the property, but currently, there is no demand for predominantly Welsh-speaking support. The provider has produced some key documents bilingually in English and Welsh.

Care and Support

The staff team have access to detailed care records. These enable people to receive the optimum support at all times. Senior staff carry out initial assessments before people move

into the home and consider a range of information to ensure they can meet people's needs: they use information from various sources, including previous placements and social worker reports. Care reviews and risk assessments help maintain people's independence while keeping them safe from any risks. Keyworkers review all records every month, or more frequently, wherever support needs change so they remain up to date.

People do things that matter to them and make them happy. Although each person has a weekly activity plan in place, the staff team are very flexible to meet people's plans if they should change. This means every day is potentially different, which is how people in the service prefer it. People enjoy barbeques, trips to local areas of interest and leisure activities such as swimming and horse riding. Some people have volunteered at local organisations and say they enjoy it. Each person says they are happy. One person added, *"I think I'll go out this afternoon..."*

The provider has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers refer to infection management policies when necessary. Cleaning products are stored securely in locked cupboards and there are guidance notes for anyone who handles them.

Environment

People live in a homely environment. The building is safe, warm and clean and each person says they feel comfortable and happy. People treat the service as their home and there are different areas to socialise in, as well as space outside in the garden. Bedrooms are

personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry and record their visits in the visitor's book when entering and leaving. Peoples' personal records are stored securely and only available to care workers and healthcare professionals authorised to view them.

Clear infection control procedures are in place. 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. There are clear instructions displayed in the home on what to do in the event of a fire and the manager completes regular audits of the environment.

Leadership and Management

Overall, the provider has a clear vision of the support it provides, and a positive regard to each person receiving support. The management team uses regular audits and spot checks to monitor all aspects of people's care: any issues that arise are promptly resolved. Regular discussions take place with people and healthcare professionals involved in their lives.

People know how to make a complaint if they need to and are confident the staff team would listen to them if they did. The RI is in regular contact with the home and can be relied upon to provide good, practical support to the staff team.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work: these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to individual learning outcomes and the 'All Wales Induction Framework for Health and Social Care.' Care workers are up to date with their essential training: 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 the staff team the opportunity to discuss their work and to keep up to date with developments in the service. All aspects of the service are summarised in a six-monthly quality report, which identifies all planned improvements for the home. Employees discuss any issues they wish to raise in three-monthly documented supervision meetings.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Care records clearly state any risks to people's well-being and detailed risk management plans help to keep people healthy, 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 or RI but would also contact external agencies such as the local safeguarding office if they thought they needed to.

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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N/A	No non-compliance of this type was identified at this inspection	N/A
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