

# Inspection Report on

Anheddau Cyf

Anheddau Cyf Unit 6 Llys Britannia Ffordd Y Parc Parc Menai Bangor LL57 4BN

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

06/05/2021



## **About Anheddau Cyf**

Type of care provided	Domiciliary Support Service
Registered Provider	Anheddau Cyf
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	Manual Insert 18 September 2018
Does this service provide the Welsh Language active offer?	Yes

#### **Summary**

Anheddau Cyf is registered with Care Inspectorate Wales (CIW), to provide a domiciliary support service for adults with a broad range of needs in North Wales regions. There is a responsible individual (RI), in place who is registered with CIW. The service also has a manager who is registered with Social Care Wales (SCW).

This was an announced inspection to ensure the availability of the RI to meet the inspector at the office.

The RI and managers have pre-empted the Covid-19 pandemic's effects on people using the service and staff. A large investment was made to procure Personal Protective Equipment (PPE), to ensure the safety of people and staff. Training has continued for staff and supervision/support to enable a continuation of the service throughout the pandemic. People are very complimentary of the service and care staff. People told us they are well supported and enabled to maintain their independence as much as possible. People were especially happy they were able to keep in contact with family and friends during the isolation periods of the pandemic. Staff told us they are happy at work and are well supervised and trained. We saw people's needs and preferences are central to their personal plan of care.

#### Well-being

People are central to their plan of care. We saw personal plans had people's likes, dislikes and preferred routines in place. People told us staff help them to be as independent as possible. They are encouraged with daily routines, household chores and work placements where applicable. People are enabled to be as social as possible and maintain contact with families and friends. The RI audits the service and listens to people's views to ensure a quality service. A person supported by the service told us, "I am nice and happy, I have a lovely home here, and I love everyone here."

People are protected from abuse and neglect. We saw staff are trained regarding people's rights and how best to support vulnerable individuals. The service is audited to make sure the care is given as planned. We saw any incidents are reported to appropriate authorities to safeguard people.

People are enabled to be sociable and be a part of the community. Staff support people with activities such as swimming, days out, planning journeys (as the pandemic allows). People told us they are happy with the level of activity they are able to enjoy and feel they have a good level of personal choice and independence.

#### **Care and Support**

People can influence their plan of care. We saw people are consulted with regularly regarding their care and support. People's views are discussed in staff meetings including their plans and aspirations. We saw staff actively seek solutions to best support people to achieve their aims. The RI has over sight of the quality of care through consultation with people and staff. People with specialist needs are ably supported through consultation and risk assessments with fellow health care professionals. The outcomes of these meetings are documented in people's personal files. Personal plans have a good level of detail regarding how each person is to be supported. We saw staff have specialist training to ensure they can meet the needs of people with complex needs.

We saw evidence of medicines management and review. People who are on medications have a medicines profile in their personal plan to inform and instruct staff. GP reviews are also documented in the plans and also any changes to people's treatment.

The service has good infection control processes. Staff have received training regarding Covid-19 and how to safely use PPE. The service made a large investment in PPE stock on the outset of the Covid-19 to ensure the safety of all concerned. The RI reported very low numbers of Covid cases in the service.

#### **Leadership and Management**

The provider has suitable governance arrangements in place. This is evidenced through the smooth running of the service. The RI is visible to managers, staff and people using the service. The RI tests the quality of care through audits and consultation with people, staff, and allied health care professionals. People told us they are satisfied with the quality of care given by the service and they are enabled to achieve their aims.

There are suitable numbers of staff with sufficient skills and knowledge in place to care for people. We saw training and supervision documents demonstrating staff have a good level of training and support to fulfil their role. The service does not use agency staff; they are able to re-deploy their own staff to cover absences. This ensures people are cared for by people who are familiar to them. Staff told us they are happy at work and feel that they are well trained and supported. A staff member told us, "I love my job. They have been so supportive during the past year."

The RI stated the service is doing well financially. This has enabled the service to invest in PPE stocks. The service has also bought chrome books for staff to ensure training and good communication can continue throughout the pandemic.

#### **Environment**

We do not comment on the environment as care is given in people's own homes.

However, we saw homes are risk assessed prior to the service starting to ensure staff safety. Where applicable, people have personal emergency evacuation plans in place in case of fire or emergency. The office building we visited seemed modern and well equipped. We saw a manual was available with a range of health and safety assessments in place for staff.

Areas for improvement and action at, or since, the previous i	inspection. Not Achieved
None	
Annon the management of the continue of	
Areas where priority action is required	
None	
Areas where improvement is required	

None

Areas for improvement and action at, or since, the previous inspection. Achieved

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