



Inspection Report on

Cysgod Y Coed Ltd

**Cysgod Y Coed Residential Home
Llanilar
Aberystwyth
SY23 4NR**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

25/04/2022

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About Cysgod Y Coed Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Cysgod Y Coed Ltd
Registered places	15
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service

Summary

People are happy with the care and support they receive, a person who lives at the service told us *“the staff are first class here”*. Care workers are guided by person centred plans. Interactions are positive and friendly, and care workers know the people they support well. When discussing the service a worker told us *“it’s how it should be, it’s personal and the residents have what they need”*.

The environment is homely and people enjoy spending time in their rooms or in communal areas. Representatives of people are positive about the service and one told us *“he [family member] is very happy at the home and with the staff”*.

The Responsible Individual (RI) is currently managing the service. People, their family members and staff value the RI/manager and have confidence in them.

Well-being

People are very positive about the service they receive. Up-to-date person centred plans focus on things that matter. The RI/manager involves health and social care professionals to help people remain as healthy as possible. Individuals are respected, and interactions with the staff team are friendly and relaxed. People live in a service that provides an 'Active Offer' of the Welsh language, which means they can communicate in Welsh or English as they choose.

Recruitment and training ensures people get the right care and support, from skilled and knowledgeable care workers. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People know how to make a complaint if needed and have confidence in the RI/manager.

The environment is comfortable and there are different communal areas for people to use to do things that make them feel happy. Individual rooms can be personalised and made homely. The gardens are accessible for people to do things they enjoy, and help them to remain as healthy as possible.

The RI/manager is involved in the day-to-day running of the home, people and staff talk to them about improving the quality of the service. This information is recorded in Regulation 73 visit reports and the six monthly Quality of Care Review.

Care and Support

People are happy with the personalised care and support they receive to remain as independent as possible. Interactions are warm and caring, a person who lives in the service told us *"The staff are fantastic, very helpful and nice"*. Representatives of people are positive about the service, one said *"the staff are so friendly and nice, they are excellent"*. Enthusiastic care workers know people well, one told us *"I can give people time and can sit down and have a one-to-one chat with them"*. The manager assesses a range of information from the person, their representatives and external professionals, such as district nurses, dieticians and occupational therapists prior to admission. The service has accurate plans for how it provides care and support to individuals. The manager regularly reviews plans with people so they remain relevant and intends to record this in more detail. Daily notes record the care and support completed and will be improved by including more information from the perspective of the individual. There is good evidence of health and social care professionals being involved with people documented. A visiting health and social care professional spoke positively about the service saying it is *"prompt, caring and they have information to hand when we need it"*.

Appropriately qualified staff administer medication in line with the service's policies and procedures. Care workers record when people take their medication or note using a coding system why people have declined.

During the Pandemic people remained in contact with family and friends by using video and phone calls. Visits take place inside and outside of the service in line with individual risk assessments.

People enjoy a variety of activities in the service, grounds and are looking forward to accessing the local community with their family members once again. People choose where to spend their time and enjoy reading quietly or socialising together. A person who lives at the service told us *"I love watching the sport here with my mates, it was great when the rugby was on"*. Everyone involved in the service is looking forward to a return to activities and the freedom enjoyed before the pandemic.

Sufficient staffing levels are in place to meet the needs of the people living at the service. Staff have adequate time to spend with people and have a very good understanding of individual choices and preferences.

The provider has policies and procedures to manage the risk of infection. There are good hygiene practices throughout, staff wear the correct PPE and follow the latest Public Health Wales guidance.

Environment

The RI/manager ensures the environment supports people's needs. There are two double rooms at the service, which exceed the number of shared rooms for the number of registered places. During the last inspection we noted the following *'the number of shared rooms must reduce when one of the residents vacate the shared rooms'*. One of these rooms is now occupied only by one person and the RI/manager will de-registered it to a single occupancy to ensure the service is compliant.

Homely décor with views of the local countryside provide bright living spaces. People can use the different communal areas to socialise with each other or to have quiet time alone. People appear comfortable and relaxed throughout the home. People's rooms can be personalised with their own pictures, paintings, furniture and ornaments. Most of the flooring throughout the home has been replaced and new bedroom furniture purchased. Maintenance issues are resolved promptly and the building is clean and fresh. People enjoy using the accessible grounds, especially in the summer months.

Regular Health and Safety audits of the property are completed. The home is compliant with Fire Regulations and testing of fire safety equipment is up-to-date. Personal Evacuation Plans and water temperature testing procedures need updating, senior staff told us they will address this and we will check these records in the next inspection.

The kitchen has a food hygiene rating of five. People are involved in planning the menu and alternatives are available. When discussing the meals a staff member said *"We make some different combinations but it's what people want"*. People enjoy a social dining experience and an individual told us *"the food here is excellent and they've got my appetite back since being in hospital"*.

Additional COVID-19 measures are in place in line with current Public Health Wales guidance. There are sanitation stations throughout the service and a testing procedure for all visitors.

Leadership and Management

People involved in the service describe a supportive, family culture and told us the RI/manager is very accessible and helpful. When discussing the management support, care workers said *“the door is always open”* and *“all of the managers are hands-on”*. Arrangements are in place for monitoring, reviewing and improving the quality of the service and the RI/manager talks to people and staff on a daily basis. The RI’s quarterly visit reports and the six monthly Quality of Care Review use information from people, their families and staff at the service.

The staff are positive about the leadership and management a care worker told us *“I can approach any of the senior staff and can ask for help”*. The RI/manager is supportive of the people who live and work at the service. They share their time between administration, care and the RI duties. People talk to the RI/manager, and know how to make a complaint or raise concerns, if needed. A family representative told us *“they are easy people to talk to, very kind”* and *if I ask for something I get an answer or it just gets done”*

Some policies and procedures require updates, including the complaints, water temperature testing and personal evacuation plans. However, staff have a sufficient understanding of key policies. They receive regular supervision meetings and annual appraisals. Staff demonstrate a good understanding around safeguarding. Staff follow appropriate infection, prevention and control measures. Changes to the service since the last inspection are not recorded in the Statement of Purpose and we have identified this as an Area for Improvement. We expect the RI to review the statement of purpose, to reflect the changes in the management structure and de-registration of a double room in line with the regulations.

Pre-employment checks take place before new employees start work. These include references, right to work and Disclosure and Barring (DBS) checks. Staff receive mandatory and person specific training to meet people’s needs and enable outcomes.

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
7	Statement of Purpose is not up to date and does not reflect the changes in management structure at the service.	New

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