



Inspection Report on

Clwyd Wen

**Pontyclun
CF72 8JQ**

Date Inspection Completed

24/10/2023

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About Clwyd Wen

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rhondda Cynon Taff County Borough Council Adults and Children's Services
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	27 October 2022
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

Clywd Wen is a respite service for people who have a learning disability and associated needs. People receive very good care and support when they stay at Clwyd Wen. People and their families are happy with the support and are fully consulted about their care. Care staff have up-to-date knowledge of people's needs in detailed personal plans and know the people they support well. Infection control measures are in place to help reduce the risk of transmission of potential sources of infection. There are systems in place for the management and storage of medication. People's wellbeing is enhanced by staying in an environment that is clean, safe, and adapted to their needs. The service ensures the recruitment of staff is safe and effective. The service is well-managed and care staff feel supported in their role. Care staff receive regular supervision and training. Governance, auditing, and quality assurance arrangements are in place to support the running of the service. The service meets the legal requirements in relation to Responsible Individual (RI) visits and quality of care reviews. The service provides up to date information to the public.

Well-being

People are supported to have control over their respite stay and do the things they enjoy when they stay at Clwyd Wen. Personal plans consider people's needs, preferences, and how best they like to be supported to have positive experiences. Staff know people well and respect and actively promote choice. Personal plans consider people's needs and preferences. Detailed risk assessments are in place to promote people's safety. Where a person needs help to make their voice heard, people's families and representatives are supported to do this, being involved in reviews of personal plans before each respite stay. The service has good relationships and lines of communication with relatives, who tell us staff keep them informed and updated.

People are supported to be as healthy as they can by getting the right care at the right time. The home liaises with health professionals to refer any concerns and follows appropriate guidance. People choose their meal options, with care staff promoting healthy choices. The home has a sufficient supply of personal protective equipment (PPE), with infection control measures in place and in line with its policy. Processes are in place to manage people's medication and ensure they receive all prescribed medication as directed.

People stay in an environment that supports them to meet their needs. Clwyd Wen is an adapted bungalow with an additional upstairs bedroom, catering for a wide variety of needs. Specialist equipment is in place to aid people who need support with their mobility. Rooms are spacious and comfortable. The home has access to specially adapted transport, meaning local facilities and amenities can be accessed.

There are systems in place to help protect people from abuse and harm. The home is secure and can only be accessed by staff and people staying there. Policies and procedures support good practice and can assist staff to report a safeguarding concern. Care staff understand their responsibilities around safeguarding procedures and told us they feel confident if they raised an issue with the manager, it would be responded to. Pre-recruitment checks for care staff are robust and regular supervision supports continued development. Ongoing specialist training ensures care staff are sufficiently skilled. Incidents and accidents are logged, and appropriate actions taken by the service. The service is proactive in identifying potential risks to people or staff and how to manage these.

We were told the home does not provide a service to people who speak Welsh. The service would need to take additional steps to facilitate a service in Welsh if this were needed.

Care and Support

People receive very good care and support when they stay at Clwyd Wen. Care staff are attentive and respectful. People told us it is “*lovely*” and the staff are “*friendly*” and “*can’t do enough for you*”. People’s families told us it has a “*nice atmosphere*”, staff “*know their needs*” and are “*brilliant*”. We saw feedback from families saying it is an “*amazing respite placement...which gives me confidence and peace of mind*”. The service considers compatibility when planning who stays as far as possible, so everyone can enjoy their stay and be safe. Care staff know the people they support well and told us detailed information about their needs, which corresponded with information in people’s care files.

Care staff have up-to-date knowledge of people’s needs. The service works closely with people’s families and other professionals to ensure they have the correct information to support people. Personal plans are individualised and detailed. Very detailed risk assessments are in place covering areas specific to the person’s needs. Reviews take place before every stay and plans are updated where necessary. Care files contain assessments and guidance from other professionals, such as occupational therapists and speech and language therapists. Service contact sheets contain detailed information about a person’s day. This information is put into a document and shared with people and their families at the end of their stay. Personal spending records show people are supported to manage their money and are safeguarded with this.

Infection control measures are in place to help reduce the risk of transmission of potential sources of infection. Staff have access to a supply of appropriate PPE. There is an infection control policy in place which staff are aware of and understand their responsibilities. Care staff use a cleaning rota to direct them to clean the home daily. The home appeared very clean and well kempt.

There are systems in place for the management and storage of medication. Medication is stored in lockable cabinets in the staff room. Staff receive medication training. Medication Administration Records (MAR) are free from errors. Medication is checked and audited throughout a person’s stay.

Environment

People's wellbeing is enhanced by staying in an environment that is clean, safe, and adapted to their needs. Clwyd Wen is an adapted bungalow, located in the village of Miskin near Pontyclun. The home is secure from unauthorised people, with visitors required to sign before entry. The home is clean, tidy and free from malodours. Bedrooms are large and comfortable, with specialist tracking hoist equipment and an adjoining bathroom in one of the bedrooms. The service has a homely and comfortable living area, where people can choose to spend their time. An adjoining conservatory is used as both a dining facility and an area to undertake arts and crafts-type activities, with games consoles also available. The kitchen facilities are modern and appropriate and enable people to take part in preparing food if they wish. There is a large, well-maintained attractive garden for people to use. Improvements have been made to the garden pathway, which assists accessibility for people. Internally, the home has been redecorated and several refurbishments made. The manager told us of plans for new flooring to be laid in the coming months.

The home environment is safe. Substances hazardous to health are stored in cupboards in line with Control of Substances Hazardous to Health (COSHH) regulations. Fire exits are clear of clutter and obstructions. There are no obvious trip hazards. Daily cleaning duties are being maintained. There are fitted window restrictors in all bedrooms and bathrooms viewed. Internal maintenance is managed by the Local Authority's Corporate Estates team. Maintenance records confirm the routine completion of utilities testing. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal evacuation plans are in place and are accessible in the event of an emergency.

Leadership and Management

The service ensures the recruitment and training of staff is safe and effective. Staff files contain the correct recruitment arrangements and all legally required information, such as up-to-date Disclosure and Barring Service checks and proof of identity. Care staff start work once pre-employment checks are completed. New care staff complete an induction programme. Care staff are registered with the workforce regulator, Social Care Wales. Training records show care staff have up to date training in core areas of care, with significant improvements made in this area since the last inspection. Additional training for specialist areas relevant to people who stay at the service is also in place, such as epilepsy management, moving and handling, and Positive Behaviour Support. Staff told us they feel well trained and would approach the manager for more training if needed.

Care staff feel well-supported in their role. They told us they *“love it here”*, *“the staff team work as one”*, are *“a great bunch”* and *“brilliant”*, and the management team are *“approachable”* and *“amazing”*. The staff team have been in place for some time and are well-settled, which helps facilitate continuity of care. Care staff generally have regular supervision, as well as yearly appraisals, to reflect on their performance, identify support they might require, and discuss any issues. The manager told us staffing levels are worked out based on the level of need of people staying and adjusted as needed. The rota showed target staffing levels were reflective of staffing on the day. Care staff told us they feel there are enough staff working at the service.

Governance, auditing, and quality assurance arrangements are in place to support the running of the service. These help to self-evaluate and identify where improvements are needed. The RI undertakes the legally required three-monthly service visits, and six-monthly quality of care reviews. Policies and procedures, such as for complaints, whistleblowing, medication, and safeguarding, are in place. They give guidance to care staff, for example telling them what to do if they needed to raise a safeguarding concern. The service gathers the views of people and care staff. Procedures are in place to deal with complaints.

The service provides up to date information to the public. The Statement of Purpose sets out the service’s aims, values, and support provided. A written guide contains detailed practical information about the home and the care provided.

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
36	Core training has not been provided to all staff.	Achieved

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