



Inspection Report on

Ty Hendy

**Heol Y Parc
Hendy
Swansea
SA4 0XX**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

05/12/2022

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About Ty Hendy

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Consensus Support Services Limited
Registered places	17
Language of the service	Both
Previous Care Inspectorate Wales inspection	12 May 2022
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

This focused inspection is to review the open Priority Action Notice (PAN) around the provider completing Regulation 60 notifications. During the inspection we found the provider was compliant with the requirement to notify Care Inspectorate Wales (CIW) of events and we have closed the PAN.

People live in a service that encourages them to be healthy and as active as possible. They are supported by staff who are experienced and know them well. Managers are well respected and are focusing on developing a person-centred culture at the service.

Well-being

People receive person centered support and do things that matter to them. People enjoy going shopping, going to local restaurants, social clubs, volunteering jobs and visiting friends and family. Support workers are patient and understand people's individual needs and how best to support them. Effective and individualised communication helps people to understand what is available to them to achieve their goals. People are respected and interactions are friendly and relaxed.

People are involved in decisions about the support they receive. People's specific needs are considered because the provider assesses them before they move into the service. Individuals, their representatives and health professionals are involved in developing and reviewing personal plans.

People have a voice because the Responsible Individual (RI) involves them and/or their representatives in quality assurance audits. Staff contribute with ideas and suggestions to improve the quality of service during RI quarterly visits. The manager has positive relationships with people and is well respected by the staff team. The provider ensures CIW are notified promptly of any events at the service.

Care and Support

People are positive about the support they receive. Staff are patient and understanding when interacting with people. An individual who lives at the service told us *“I’m looking forward to Christmas and it’s brilliant here but it’s brilliant all year around and they (staff) are brilliant”*. Passionate support workers understand people and take time to get to know and understand them and their specific communication needs. A worker told us *“I like the different personalities and finding out what makes them laugh”*.

Before people move into Ty Hendy, a manager assesses them to make sure the service can meet their needs and help them achieve their goals. This information is used to develop a transition plan to support the move and settling in process. During this transition phase, managers and staff work with people to create an individual plan and risk assessments.

Personal plans are detailed and focus on the individual, their likes and dislikes and the most effective way to communicate with them. Risk assessments are comprehensive and help to keep people safe while promoting choices and decision making. Key workers regularly review plans with people and their families to ensure they are accurate and up to date.

Environment

The environment was not part of this focused inspection. However, people are comfortable and move around the service with ease, they are involved in decoration programmes and individual rooms are highly personalised.

Leadership and Management

At the last inspection we identified a Priority Action Notice (PAN) because notifications were not being consistently completed to CIW in a timely way. The provider ensures that these notifications are being appropriately submitted and we have closed the PAN.

The provider has good arrangements to monitor, review and improve the quality of the service. The latest Regulation 73 report is comprehensive and records many discussions with people who live and work at the service.

The six-month Quality of Care Review is detailed and contains feedback from people and their representatives. Information from internal audits and surveys enables the RI to monitor the service with clear actions on how to improve quality.

The manager is well liked and respected by the staff team, who value the leadership and describe them as approachable and supportive. A support worker told us “[*Manager*] is a brilliant manager, on the ball and communicates well with the team”.

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
60	Notifications are not always completed as required in a timely way.	Achieved

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
N/A	No non-compliance of this type was identified at this inspection	N/A
15	The provider did not prepare a personal plan within 24 hours of commencing care for a person admitted to the service.	Achieved

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