



Inspection Report on

Ty Ynysawdre

**Ty Ynysawdre
Heol-yr-ysgol
Tondu
Bridgend
CF32 9FE**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

05/07/2023

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About Ty Ynysawdre

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Bridgend County Borough Council Adults and Children's Services
Registered places	15
Language of the service	Both
Previous Care Inspectorate Wales inspection	13 January 2022
Does this service provide the Welsh Language active offer?	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

Ty Ynysawdre provides care and support to people in a warm and friendly environment. Care workers know people well and prioritise spending time engaging and interacting with them throughout the day. Personal plans and risk assessments contain all necessary information for care workers to be able to provide people with the right care at the right time. The home environment is clean and well maintained. People's individual space is personalised. Care workers are safely recruited and vetted to ensure they are fit for their roles. Training and supervision are ongoing, supporting care workers to maintain and develop their knowledge and skills. The manager and responsible individual (RI) are currently absent from their posts, but interim cover for both roles is in place and there has been no identifiable effect on service delivery. The deputy manager reports feeling supported by their line manager and the interim RI.

Well-being

People are supported and encouraged to make decisions about their care and daily routines. People can move freely between the communal rooms and their bedrooms, are engaged in conversations and interactions with care workers and each other. Care workers think of a variety of activities that people may enjoy, including reminiscing time and sensory tasks. We saw that they prioritised sitting with people, talking with them, and fostering a community atmosphere in the service. At lunchtime, we saw a care worker show people their meal options plated up so they could make the choice between them and say the quantity they would like compared to the plated meal. People were offered drinks throughout the day.

People are supported to be as healthy as they can be. The service provides care and support for people in conjunction with external health and social care professionals. We saw evidence of regular input from GPs, community nurses and specialist professionals such as mental health team and dementia team. We found that medication is stored safely and disposed of correctly. PRN (as needed) medication is recorded, and care staff monitor the effects when administered. We observed part of a medication round that indicated care staff are competent in administration.

There are systems in place to protect people from harm or abuse. Risks to individual health and safety are included in care plans and risk assessments. These are reviewed and notes made as part of team leader reviews. There are appropriate policies in place including safeguarding and whistleblowing, which have been recently reviewed and updated. Safeguarding training has been completed.

There is not currently anyone living at the service who requires their service in the medium of Welsh. However, documents are available bilingually on request.

Care and Support

The service encourages people to feel included and promotes a warm and friendly atmosphere. During our visit, we saw continuous, warm interactions between care workers and people living at the service. People were walking out in the garden if they felt like it was too noisy or busy in the communal area. People told us: *“this is a nice place”*, *“the staff are very friendly”* and *“there’s nothing I don’t like here”*.

Care staff have the information required to be able to provide people with the care they need at the time they need it. People’s preferences for their care and routines are recorded in their files. Applications and authorisations for deprivation of liberty safeguards are kept in files for reference. Personal plans include people’s needs and the support they require to stay well. Risk assessments note the risk to people’s individual safety and the threshold at which care workers would need to intervene. These are reviewed and most paperwork updated following any change in needs. Daily notes give information on events and general mood during the day and night. A thorough handover is completed between shifts and a staff diary kept recording significant changes or upcoming appointments, for care staff to refer to.

There are systems in place to promote infection control and good hygiene. We saw personal protective equipment (PPE) being used appropriately by staff for close contact care. Visitors are now able to visit at any time, for any period, and access both individual’s bedrooms and the communal areas.

Environment

Care and support is provided in an environment that enhances people's wellbeing. Ty Ynysawdre is part of a wider complex owned and maintained by Linc Cymru. There are a variety of facilities such as a spa room, and a salon and restaurant in the main complex which can be accessed by people in Ty Ynysawdre and their visitors should they wish. Areas such as laundry and medication rooms are locked, to safeguard people from potential hazards inside. The home is secure from unauthorised persons, and the management keep an electronic log of visitors.

There are spacious communal areas, and each bedroom has an en suite bathroom. Bedrooms are personalised with décor and people's belongings. We saw that utilities and facilities are serviced and maintained to ensure they are fit for purpose and safe to use. Maintenance requests are made to Linc Cymru, who respond promptly to fix the issue. Linc Cymru provide domestic and laundry services, and on the day we visited; we noted the home was clean and tidy and people's clothes and bedding appeared clean. Fire equipment and alarms are checked regularly, and people's evacuation plans are stored by the fire box in case of emergency.

Leadership and Management

People receive care from a consistent staff team who are familiar with their needs. Agency staff are used to supplement sickness absence. These staff are block booked and therefore are familiar to the people living at Ty Ynysawdre but also familiar with the role and what is required of them. On the day we visited, we observed that staffing levels were such that care staff were generally able to support people in an unhurried way and had time to sit and engage with them in between tasks.

At present, the manager is absent, and the deputy manager and team leader are covering the role both in Ty Ynysawdre and its sister service. We did not find any negative impact on people's care as a result of the manager not being in their role at present. Staff give positive feedback on their experience of working at Ty Ynysawdre. They told us: *"I've had all my supervisions and can talk to [deputy manager] about anything", "if I was worried about anyone, I would definitely speak to [deputy manager] or [team leader]", "agency staff don't make any extra work for us, they are helpful and they know what they're doing"*.

Care staff are appropriately recruited and vetted prior to starting in their roles. Recruitment checks are completed by the Local Authority Human Resources department, who then present the manager with references and any issues for them to authorise a start date. Disclosure and Barring (DBS) checks are completed during recruitment, and then staff are notified when they are due for renewal. Care staff undertake both mandatory and supplementary training. Training is provided by the Local Authority, and therefore availability of training is out of the manager's control. We saw the deputy manager had booked care workers on to available courses for the coming months. Supervisions, practice observations and medical competencies are completed regularly throughout the year.

There are processes in place to monitor the quality of the service being provided in Ty Ynysawdre. The responsible individual (RI) is currently absent from their position, so the previous RI is covering the role temporarily as she is familiar with the service, staff team and people who live there. Quarterly quality assurance visits have been completed as required, and include feedback gathered from everyone involved in the service. These contribute to biannual quality of care reports, which identify the strengths of the service and the ongoing areas for development. Information regarding the service, such as statement of purpose, and relevant policies and procedures, are complete and up to date.

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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