



Inspection Report on

Graig Llwyd

Pontypridd

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

17/10/2024

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About Graig Llwyd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Values in Care Ltd
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	3 April 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Graig Llwyd provides support to adults with personal care and learning disability needs. People receive excellent care and support from staff who are suitably trained and supported. Personal plans detail their individual care needs and personal outcomes. These are reviewed on a regular basis to monitor people's progress in meeting their personal goals, whilst enabling them to participate in positive risk taking but remain safe. People and their families are very complimentary about the positive relationships they have with support workers and the management team. Staff feel well supported and are happy in their roles. A good standard of hygiene and infection control is maintained to reduce risks of cross infection. Support workers can access personal protective equipment (PPE) easily and supplies are evident at the service. The Responsible Individual (RI) has quality assurance procedures in place and carries out their regulatory duties.

Well-being

The service supports people's rights and choices consistently and to a high standard. People's individual needs inform their personal plan, and changes are recorded. The service asks people and their relatives about their wishes, involves them in the planning of their care, and supports them to have meaningful outcomes. People are supported to pursue individual interests/hobbies and maintain relationships and networks that are important to them. People have access to excellent resources such as the provider's HUB and Horticultural resource where people can gain vocational qualifications, develop life skills, participate in individual interests, and socialise with others. People's needs, and risks to safety and well-being, are monitored and documented. Risk assessments include thresholds for support workers to intervene. Care plan reviews are being carried out to monitor people's progress in meeting their goals and aspirations.

Feedback about the standard of care and support is exemplary. People and their families have positive relationships with staff who are familiar and know them well. Up to date written information about the service and advocacy access is available to people in a variety of formats including easy read.

The service safeguarding systems reflect current government procedures and protect people from harm. There is a safeguarding policy to provide guidance to staff. Support workers receive specialist training in addition to core training to support them to meet people's individual needs. Support workers know their responsibilities and are able to keep people safe and well supported.

People's wellbeing is further enhanced by the suitable decor, appropriate furnishings, warm, secure and safe living environment. People can spend time in their own bedrooms or in the home's pleasant indoor and outdoor communal areas. People's bedrooms are personalised, and some have en-suite facilities for them to use. There are suitable arrangements in place for the staff team to report any maintenance issues/repairs so these can be addressed. A good standard of hygiene and infection control is being maintained to reduce risks of cross infection with people encouraged to participate in cleaning and household tasks. Support workers can access personal protective equipment (PPE) easily and we saw good supplies available at the service.

Care and Support

The quality of the care and support provided to people living at Graig Llwyd is outstanding. All people at the service have been living together for a number of years, but it was noted the service considers a wide range of information about people prior to them moving into the service and staff know them well. Personal plans are detailed and provide clear guidance to support workers as to the needs and planned outcomes for individuals. These are reviewed with people, their relatives, and other professionals involved in their care to monitor progress and make changes as required.

Plans are clear, reflect individual needs and give the information needed to support people. Where possible people and/or their relatives are involved in developing their plan. Risk assessments are in place to ensure people are supported to make their own choices as much as possible and remain safe. The service works closely with specialist health and social care professionals such as learning disability teams that include Occupational Therapists, Physiotherapists, Speech and Language Therapy, and Consultant Psychiatry. The provider also has a Projects and Behavioural Support Team to provide support and guidance to people and staff.

Support workers commented positively on the quality of the training and induction they received, giving them the knowledge and skills needed to provide effective and safe support to people. One staff member told us, *"It's a good house...good team...better than ever."* And of the management team, *"Can approach them...so understanding."* Another said, *"We have a good relationship...work well together."*

People and their relatives have extremely positive relationships with support workers and the management team. Interactions between support workers and people are positive, warm, familiar and friendly. One person told us, *"I like them...I like living here."* A relative said, *"We're very fortunate...right place for him...the staff are lovely, understand him, know his triggers, we're confident in them."* And of the manager, *"Wonderful...communication has been particularly good."*

People have individual activity planners and are supported to access the community, maintain relationships with family and other networks, or participate in hobbies and things that interest them. They are encouraged to take part in meal preparation, laundry and housekeeping to develop independence and daily living skills.

People can have support with medication if they require. Support workers have training and regular monitoring to assess their competency in the administration of medication. There is also a policy in place to provide guidance to staff. Regular medication audits are undertaken to identify any issues and address any actions.

Environment

The service consists of the main property with a number of bedrooms and communal areas, with a self-contained annexe to the side and parking to the front. It is close to the market town and within easy reach to community and local amenities. On arrival, we found external doors secure to prevent unauthorised access.

There are spacious indoor and outdoor communal spaces for people to use. The outdoor area is accessible and secure with seating and pleasant greenery areas. We saw people's personal space is set out in a manner which reflects their individual preferences and care needs.

Medication and other confidential information is stored securely. Restricted areas are locked and are only accessible to authorised people. Support workers have sufficient PPE available to reduce the risk of infection. The service has appropriate infection control measures and visiting procedures.

Procedures are in place to ensure people's health and safety at the service. Records relating to health and safety such as gas and electricity certificates are in place. Internal safety checks in relation to fire safety are maintained and a fire safety risk assessment is in place. Fire evacuation drills are carried out, and people have personal emergency evacuation plans (PEEPs) in place, so staff have the knowledge of what to do in such circumstances. Regular internal and external health and safety audits are carried out with action plans in place.

Leadership and Management

There are good systems in place to support the smooth operation of the service and ensure the care and support of individuals enables them to achieve their personal outcomes.

Policies and procedures are in place to provide guidance to staff and are regularly reviewed. The service is delivered in line with the statement of purpose (SOP). The service produces a written guide to provide people with information about the service in an easy read format. This includes information about the complaint's procedure and advocacy services.

Regular Quality audits and checks are in place to ensure the service continues to meet people's needs. Communication with relatives is very good. The service regularly contacts relatives to update them on developments and gain feedback about the service and share ideas for possible improvements. Satisfaction surveys are sent out annually and the most recent report is mostly positive.

The vision, values and purpose of the service are clear and actively implemented. The RI carries out three monthly visits and involves meeting people and support workers to gain their views on the service provided. Six monthly quality assurance reviews are also completed that include a detailed look at a range of aspects of the way the service is delivered such as environmental assessments, safeguarding and other incidents. They also set out any areas of improvement.

Support workers at the service have a mix of face to face and online training to ensure they have the skills and knowledge to support people to achieve their personal outcomes. In addition, they receive specialist training such as learning disability, autism, epilepsy, and positive behaviour support. They spoke highly of the provider's recently employed Training Manager, who they describe as "*enthusiastic*" and "*very good*". Workers feel well supported and have regular 1:1 supervision and annual appraisals that enable them to consider their own well-being and professional development. Team meetings keep them up to date with changes and address any issues. Workers are also able to access the provider's Employee Support Assistance Scheme.

There have been some changes with staffing and a new deputy manager since the last inspection, although staff rotas show there are sufficient staffing arrangements in place. Recruitment is ongoing for additional night workers, at which point the service will be fully staffed. Recruitment documents are up to date with appropriate Disclosure and Barring (DBS) checks in place. All workers are registered or in the process of registering with Social Care Wales.

The service is working towards providing an active offer of the Welsh language. There are currently no Welsh speaking staff or residents living at the service, however, people's communication needs are considered with different tools being used such as picture cards. We also observed a staff member making up a 'Welsh Board' on the day of our inspection. The manager told us the statement of purpose and service user guide are in the process of being translated into Welsh. There is also a Welsh Language Policy in place.

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.

Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
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