



Inspection Report on

The Old Vicarage

Bridgend

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

23/09/2024

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About The Old Vicarage

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Values in Care Ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	14.3.2023
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

People and their relatives are extremely pleased with the standard of care provided at The Old Vicarage. Support is person centred and people or their advocates are actively encouraged to be involved in decisions made about their personal plan and their daily life. People are supported by a dedicated team of well trained and experienced care workers, a deputy and registered manager. All care workers are very knowledgeable about the needs of the people they support. They told us they feel confident and supported in their roles. People are supported to access routines that are important to them including access to the community on a regular basis. We saw care workers contributing to the wellbeing of people through positive and supportive interactions. There are procedures and plans in place to maintain the environment and ensure ongoing refurbishment within the property. The service is clean and uncluttered, and people's safety is promoted. The Responsible Individual (RI) visits regularly and there are good governance arrangements in place.

Well-being

People are supported to maintain their health and well-being. Care workers have positive relationships with people living at the service and have a good understanding of people's care and support needs. Care workers can recognise changes in people's presentation and take appropriate action. The service liaises with health professionals to report any concerns and follows any guidance given. Personal plans detail any interventions needed. Medication is administered in line with the prescriber's recommendations.

People are encouraged to have control over their day to day lives and are offered daily choices. Resident meetings and conversations, by a variety of communication methods give people the opportunity to share their views on the service they receive. There is a range of activities available for people, which meet individual preferences. People are offered a choice of nutritious food and there are communal areas giving people options on where they spend their time.

People are protected from harm and neglect. The provider has robust policies and procedures in place to ensure the safe running of the service, which are reviewed and revised as needed. Care workers are up to date with mandatory safeguarding training and know the procedures to follow if they have any concerns. There are good procedures in place to maintain the building and security arrangements in place to ensure people are safe. Governance arrangements give the management oversight of incidents, accidents and safeguarding matters.

The environment is suited to people's needs and helps support their well-being. The home is well presented, clean and comfortable. Communal areas are welcoming and homely. There is a dedicated maintenance person who is responsible for the day-to-day upkeep of the home. They perform regular environmental checks to ensure the home, its facilities and equipment are safe to use.

Care and Support

Excellent personal plans set out people's care, support needs, and highlight any risks to the person's health and well-being. We examined a number of personal plans and found they are very outcome focused and person centred. This means the information recorded in them is specific to the care and support needs of the person. High quality risk assessments outline people's vulnerabilities and provide information on how to keep people safe. The company electronic 'IMPACT' system clearly evidences people's outcomes with photographs. Daily recordings are up-to-date and are used to monitor people's overall health when necessary. Families told us they are involved in the review and updating of personal plans. We saw care staff interacting with people in a very respectful and compassionate manner. Documented evidence on people's personal plans show they have access to a range of healthcare professionals including specialist nurses, GP's and dentists. A visiting health professional told us they have no concerns regarding the care provided and they are "very good here".

Secure arrangements are in place for storing, ordering, and administering medication. Medication administration record (MAR) charts contain all required information and are completed correctly with signatures when medication has been administered. We saw evidence staff receive training on the administration of medication to ensure they remain sufficiently skilled. The completion of routine medication audits ensures practice remains safe and effective.

People can do the things that matter to them and make them happy. Personal plans include extremely detailed documentation about people's preferences and what is important to them. Participation in activities is captured in documentation. Evidence seen shows us they can take part in activities they enjoy. People are supported and encouraged to access the community, to be involved in household tasks and to develop and maintain hobbies. Relatives told us "*They go above and beyond most of the time*", "*can't fault them*" and "*they are really good*". In the dining area is a 'Achievement board', people record their achievements during the month, either written or pictorial. Strong evidence of achievements was seen during the inspection.

There are systems in place to safeguard people using the service. Care staff receive safeguarding training, and those spoken with have an excellent knowledge of their responsibilities and how to report concerns they may have about people they support. There is a safeguarding policy in place which is reviewed when required. Deprivation of Liberty Safeguards (DoLS) are in place and up to date for people who do not have the capacity to make decisions about their accommodation, care, and support.

Environment

People are cared for in safe and secure surroundings. Rooms are adapted to suit people's individual needs. People have private space where they are able to meet with family members and take part in individual activities. Bedrooms are spacious, well decorated and personalised to reflect the occupant's personal tastes and interests, with items such as ornaments, soft furnishings and photos. They are furnished based on the level of sensory stimulation people require/prefer. Externally, there is a garden room which has a sensory area. There is also a trampoline and a large balance beam which people enjoy using. Laundry facilities are suitable for the size of the home and there are systems in place to reduce the risks of cross contamination.

A rolling schedule of servicing and maintenance of facilities and utilities to ensure they remain safe to use and fit for purpose is in place. Fire equipment is regularly checked, and alarms tested by the maintenance person every week. People have their own personal emergency evacuation plans (PEEPs) which are accessible in case of an emergency. The home is secured from unauthorised visitors, and there is a signing in and out book. Areas of the home that may pose a risk to an individual's health and safety, such as the medication room, remain locked.

Leadership and Management

The provider has good governance arrangements in place to ensure the smooth operation of the service. There is a committed and experienced manager who works closely with the RI and feels fully supported by them. We saw the management team complete weekly and monthly audits and address any actions raised promptly. The RI visits the service regularly and speaks to people, their families, and staff. This feedback is used to inform any required service improvements. Quality of care reviews are conducted within regulatory timeframes and show good oversight and governance.

The service operates a safe recruitment process. This ensures staff working at the service are suitable to work in the care sector. We viewed a number of personnel files and found all of the necessary pre-employment checks have been completed. These include Disclosure and Barring Service checks, employment history and references from previous employers. New employees have access to a structured induction programme aligned to the All-Wales Induction framework. They also get the opportunity to shadow experienced members of the team.

Care workers feel supported in their roles and are well trained to meet the needs of the people they support. Care workers we spoke to used words like “*supportive*”, “*brilliant*” and “*approachable*” to describe the management. We looked at records relating to formal support and found care workers receive supervision and an annual appraisal, however, the frequency could be improved. This is important as it gives care workers the opportunity to discuss their development and work-related matters with the manager. The service provides care workers with a rolling programme of training and development. All care workers complete the service’s core training which is relevant to the needs of people living at the home. Specialist training is also provided when needed.

We note there have been no complaints since the last inspection. The manager appropriately notifies relevant regulatory bodies and statutory agencies, when there are concerns and significant events, which might affect the well-being of individual’s receiving care. We found the communication is effective, open and transparent.

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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