



Inspection Report on

Ty Llewellyn

**Ty Llewellyn
Llewellyn Street
Aberdare
CF44 8LA**

Date Inspection Completed

03/07/2024

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About Ty Llewellyn

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider ex	Accomplish group ltd
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	04/01/2023
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 living at Ty Llewellyn receive excellent person-centred care and support. The service benefits from long term consistent care staff. This enables staff to know the people they support very well and are familiar with their needs and routines. People told us they are very happy living at the service. People are offered choice and are supported to do the things they enjoy. There are opportunities for people to take part in activities within the home and community.

Care documentation is detailed and clearly set's out people's care and support needs. Risk assessments help to identify and manage areas of concern. Care documentation is reviewed regularly to ensure it remains current. Systems in place ensure medication is stored and administered safely. Care staff feel they are supported by management and are happy working at the service. Care staff report team morale as being "*amazing*". There are very good governance arrangements in place, helping the service run smoothly. The Responsible Individual (RI) has good oversight of the service and regular quality assurance monitoring takes place. The environment is clean, comfortable, and well-presented. Regular audits and an ongoing maintenance programme ensures the environment is safe.

Well-being

People have control over their day-to day lives. They feel they are listened to and their views are considered, they contribute to decisions which affect their lives. Care staff have very good knowledge of people's routines as well as what is important to them. Visiting arrangements for family and friends are flexible. People told us their families and friends can visit when they choose. People can choose where and how to spend their day and are treated in a caring and respectful way. One resident said, "*I go out I can go wherever I want to I have freedom*". A range of activities within the home and community are sought, and the management team considers outcomes to ensure these experiences are positive.

People's overall well-being is promoted by management who provide excellent care and support. They are listened to and are fully involved in decisions that may affect them and the care they receive. There is an excellent rapport between care staff and people. There is a good, varied choice of food options available. People live in an environment that supports them to meet their needs. They can personalise their bedrooms to their individual preferences and there are communal areas which can be accessed for socialising with others or relaxing. There is a cleaning rota in place ensuring a clean, comfortable environment. People are safe from unauthorised visitors entering the building, all visitors have to ring the front doorbell before gaining entry and are asked to record their visits in the visitor's book when entering and leaving. Care records are stored safely and are only available to authorised care staff.

The management team and RI gather regular feedback to ensure the care provided meets expectations. Medication is managed well within the service. Medical appointments both routine and as needed are documented appropriately in care records. An ongoing programme of maintenance and repair ensures the environment remains safe. People are protected from harm and neglect. Staff have received training in safeguarding vulnerable people. Care staff we spoke with are aware of the process for raising concerns and have access to the safeguarding and whistleblowing policies. Care staff we spoke to said they feel confident any issues raised with the manager will be actioned promptly. People are supported to maintain and improve their health and well-being through access to specialist care and advice when they need it. Referrals are made to professionals in a timely way and there is evidence of healthcare professionals visiting residents.

Care and Support

People receive care and support to an excellent standard which is specifically tailored to meet their individual needs. People living at the home are provided with the quality of care and support they need. The home captures people's personal wishes, aspirations, and outcomes with the use of diaries, a memory book and bucket lists. Care staff spend purposeful time with individuals, making sure they are always familiar with their wishes and preferences. Personal plans are highly detailed and person-centred. Plans clearly outline the level of care and support people require enabling care staff to best support people to achieve their outcomes. Personal plans are produced in conjunction with people, their representatives, and where necessary other professionals. Information recorded in personal plans include care plans, risk assessments and management plans. Care staff complete daily recordings. We saw daily records are accurate and up to date giving a detailed account of care and support provided. Reviews of care documentation take place monthly with people and their representatives highlighting people's goals and aspirations which help people plan for the future.

People living at the home presented as relaxed, happy, and comfortable in the presence of care staff. Care staff speak in a friendly, caring, and respectful way and people respond positively. Staff appear to know the people they support very well and are familiar with their needs and routines. People are very happy with the care and support provided. People living at the home told us, "*Staff look after me they make me feel safe and listen to me*". "*Staff are kind and caring they make sure I have everything I need*". The service supports people to live lives of their choosing and to maintain relationships with family and friends. On the day of our inspection, we saw people's family members visiting. People are encouraged and supported to be as independent as possible. We saw people have access to a range of activities they enjoy within the home and community which promote inclusion and social interaction. Activities are run in a relaxed environment. We saw care staff engaging people in meaningful conversations. The service feels more like a family home.

There are robust medication management arrangements in place. Care staff receive medication training and medication is securely stored in line with best practice guidance. We examined a number of medication administration records and found people receive their medication as directed. Information recorded on people's personal plans show they have good access to health care professionals when needed.

Environment

People receive care and support in an environment which is adapted to suit their needs. Bedrooms are individualised to people's tastes, containing photos and decorations which make the environment feel homely and familiar. There are a range of lounge areas, where people can choose to spend their time. Communal areas are well presented, clean and comfortable. On the day of inspection, we observed people enjoying and undertaking activities in communal areas. They appeared happy and enjoying participating in activities. The home is clean and tidy throughout, care staff follow daily cleaning schedules to maintain good levels of cleanliness and hygiene. There are sufficient toilet and bathing facilities. The home has a garden at the rear of the building which provides a safe space for people where people can relax or participate in activities.

People are cared for in safe and secure surroundings. Entry to the home is secure, with visitors having to sign in before entry and sign out on departure. The home is maintained to a very good standard. There is an on-going programme of maintenance and servicing ensuring the environment is safe. We saw up to date safety certification for utilities such as gas and electricity. Fire safety features and specialist equipment are regularly inspected by qualified trades people to ensure they remain in good working order. All people living in the home have a personal emergency evacuation plan (PEEP) in place. This provides care staff with information regarding the best way to support people to evacuate the building in the event of an emergency.

Substances hazardous to health are stored securely and there are no obvious trip hazards. The service has been awarded a score of five by the Food Standard Agency this suggesting hygiene standards are very good. A sufficient supply of personal protective equipment is in place. People's personal information, together with employee personnel records, are stored safely, and are only available to authorised members of the staff team.

Leadership and Management

Care staff feel very supported within their roles. Care staff we spoke with say they are happy working at the service and provided complimentary feedback such as “*the manager is amazing, very organised on top of everything always*”. “*Anything we ever need we can talk to her, she is very approachable*”. “*It’s a dream working here staff morale is amazing, I feel very supported it’s the best home I have worked in*”. There is a culture of openness in the home. We saw the manager’s office door was always open and people living and working in the service walked in freely to chat.

People are supported by care staff who are employed safely. Recruitment checks are robust which ensure staff are of good character and hold the necessary skills and qualifications to undertake their role. The service benefits from consistent long-term staff. Care staff are registered with Social Care Wales (SCW), the workforce regulator. Records show staff have good induction and training. Care staff told us they receive sufficient training to effectively and safely carry out their duties. Training information we viewed shows care staff are 100% compliant with their training requirements. There is a clear staffing structure in place and all staff we spoke with understand their roles and responsibilities. We looked at supervision and appraisal records and found care staff receive the required level of formal support which corresponds with the positive feedback we received.

There is an excellent oversight of the service. There are multiple auditing tools in use by the manager in the service to maintain oversight. Policies and procedures underpin safe practice, they are kept under review and updated when necessary. Reports provide evidence the RI visits the service regularly and maintains sufficient oversight. Quality of care reviews are conducted on a six-monthly basis and consider the services strengths and areas for further development. Complaints, reportable incidents, and safeguarding matters are recorded and processed in line with policy. We looked at a cross section of the services policies and procedures and found they reflect current statutory and best practice guidance. The statement of purpose and service user guide are reflective of the service provided and contain all the required information.

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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