



Inspection Report on

Ty Clyd

**Heol Fargoed
Bargoed
CF81 8PP**

Date Inspection Completed

28/06/2024

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About Ty Clyd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Caerphilly County Borough Council Adults and Children's Services
Registered places	30
Language of the service	English
Previous Care Inspectorate Wales inspection	07 February 2019
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 are happy living and staying at Ty Clyd. The service provides residential care, assessment services, and respite care. Good quality care and support is delivered by an experienced and motivated care team. People are treated with dignity and respect in a friendly and compassionate way.

The care needs, preferences, and desired outcomes for each person are clearly documented in their personal plans. Plans are reviewed regularly to ensure they are up to date and reflect people's current circumstances.

The service benefits from good staff retention, a number of staff have worked at the home for many years. The management team are experienced and know people who live and stay at the service well. Staff feel very well supported by the management team. The responsible individual (RI) visits the service frequently and their reports evidence an effective oversight of the service.

Well-being

People make choices about their day-to-day lives as far as possible. We inspected prior to the general election and saw people being provided with their polling cards for the election. People are involved in decisions about the home, such as décor of communal areas, events and activities. People are provided with a guide to the service before they move into Ty Clyd. This guide provides people with important information about the service which is relevant to them. The complaints procedure is clearly explained.

People enjoy living at the home, one person said, *“I love it here, they are all so very kind, and I am very well looked after.”* Another person told us *“They get a big tick from me, there is always someone to help me when I need it. I love my room, the food is very good, and there is always lots going on.”*

Care staff promote people’s physical and mental health. Appointments are arranged with health professionals promptly when needed. Advice and guidance from visiting professionals is acted on and evidenced in peoples plans. A range of stimulating activities are arranged for those who choose to get involved. People are encouraged to make suggestions for activities or trips they would like. A hairdresser visits the home every week. Monthly events and quarterly newsletters are produced to keep people informed of what is going on what is coming up. Family members are invited to join a private WhatsApp group where pictures are uploaded for them to see their loved ones.

Staff protect people from the risk of harm. Staff know what to look out for and how to report any concerns. The management team work openly with other agencies to ensure people are kept safe and free from harm. Care staff are trained in the safeguarding of adults at risk and the service has policies and procedures which are aligned to current guidance and best practice.

The accommodation is designed to help people to achieve positive outcomes. Areas of the home have been refurbished and further areas are planned for refurbishment. The home is clean, comfortable and bedrooms reflect individuality.

Care and Support

The manager considers a range of information about new residents before they come to live at the home. This ensures the service can meet people's needs and preferences. An area of the home is allocated to people who are being assessed for a shorter period to establish their future needs, and people who are having a short-term respite stay. People from different areas socialise with each other. People have friendships within the home which promotes their well-being. Care staff know the people living at the home well and treat them with compassion, dignity, and respect. People told us care staff are always quick to help with anything they need. Good consultation arrangements ensure people can express their views. People have choices about the activities they engage in, menu options, and their daily routines.

Personal plans contain important information on people's care preferences and needs. The plans evidence best practice by focussing on what the person can do for themselves in each identified area before informing care staff how best to support them. The level of detail is very good, with clear explanations of how best to support each person according to their needs and wishes.

Care records are completed to evidence people are being supported as described in their personal plans. Recording charts are kept as described in personal plans but we saw some gaps in these in these records. The deputy manager assured us this would be addressed. Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP) who visits the home every week to review residents who require it. The home has a positive relationship with the GP. All appointment records and outcomes for review are recorded in the daily notes. People are encouraged to maintain a healthy weight as part of a healthy lifestyle.

Systems are in place for the safe management of medication. Care staff support people with their medication, which helps to maintain their health. Medication records are completed accurately, but some other important information, like the temperature records of the room was not recorded daily. The manager assured us this would be addressed. Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance.

Environment

The environment supports people to maintain their well-being and achieve their desired outcomes. The layout of the home, together with the provision of aids and adaptations, helps promote independence. The home is kept clean, light, and well maintained. Communal areas are arranged to promote people socialising in small groups of their choice. People's bedrooms are personalised to their own taste, people have family pictures, posters, and ornaments in their rooms. The home is well equipped and spacious. Furniture and fittings are all in good condition. An ongoing refurbishment programme is being followed, new carpets have been fitted throughout and the corridors redecorated. Some bathrooms and toilets have been renewed and others are planned to be carried out.

Potential environmental risks are assessed, and measures put in place to manage the identified risks. Regular audits are carried out on the environment to ensure safe standards are maintained. We discussed an area of sloping lawn at the far side of the property which may present as a hazard to people with impaired mobility. The RI assured us this would be addressed.

The front door is kept locked, and our identity was checked on entry. Care staff follow procedures to ensure safety is maintained. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms are completed, and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support them to leave the premises safely in the case of an emergency. The home has a rating of five from the food standards agency which means food hygiene standards are very good.

Leadership and Management

People benefit from effective leadership and management at the home. The manager and deputy manager are both very experienced and have worked at the home for many years. They oversee the day-to-day running of the home. There is a clear structure of responsibility. The management team know the people living at the home well and are supportive of care staff. The RI visits the home frequently and has good oversight of the service provided. Robust governance arrangements are in place. Quality of care reports are detailed, reflective and informative. These reports are completed twice yearly and celebrate positive achievements, as well as clearly planning for agreed improvements to be made. The service is provided as described in the statement of purpose.

Sufficient staffing levels are in place to meet the care needs of people living at the service. People are supported by care staff who are kind, knowledgeable and competent. Staff told us they enjoy their jobs, feel valued and well supported by the management team. Communication is good within the staff team and with other agencies. We saw care staff following the principles of person-centred care by placing people at the forefront of their care. Care staff told us they have enough time to support people and are not rushed. Care staff respond to requests from people in a timely manner and interactions are friendly, encouraging, and respectful.

Care staff are safely recruited. The staff files are well organised, and contain the required information, including Disclosure and Barring Service checks and professional registration with Social Care Wales, the workforce regulator. Care staff complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm. Care staff receive one to one supervision which provide staff with the opportunity to discuss any concerns or training needs they may have and allow their line manager to provide feedback on their work performance.

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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