



Inspection Report on

Pen Y Fai House

Bridgend

Date Inspection Completed

05/03/2024

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About Pen Y Fai House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Values in Care Ltd
Registered places	1
Language of the service	English
Previous Care Inspectorate Wales inspection	6.3.2023
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 are well supported and cared for by dedicated and committed care workers. Care and support is tailored to meet the needs of people and delivered in a way that promotes choice and independence. Care documentation is thorough, robust and evidences people get support in a timely manner. There are excellent opportunities to undertake a range of activities and hobbies which means people can do things that matter to them. Care workers enjoy their work, they feel valued and are very well supported by management. Training is provided, and continuous learning and development is facilitated and promoted. Care workers treat people with wonderful respect, and they are aware of their responsibility to protect people from harm. There are exceptionally effective measures in place by the Responsible Individual (RI) to consistently monitor the quality of the service provided.

Well-being

People are supported to be as healthy as they can be. Information such as medical conditions and medication guidelines are recorded in people's high quality personal plans. Highly effective medication management systems ensure medication is safely administered. We saw appointments are recorded and any contact made with healthcare professionals is documented. Highly motivated care workers know the people they support well and recognise changes in their presentation and report appropriately. People have access to activities promoting movement, inclusion, and social interaction.

There is a clear management structure for the service. We received positive feedback from the staff we spoke with, who told us they feel valued and supported by management. There are highly effective systems for monitoring and auditing standards of support and the environment. There is a statement of purpose, which is a document that sets out information about the service provided.

An experienced team of care staff treat people with dignity and respect. We saw excellent interactions between people and care staff. A relative told us "*The carers are wonderful with him*". Care staff are kind and respectful and people appeared happy and settled in the home. Personal plans are person centred and detail people's specific needs. They are written with people and their representatives whose input is valued. Positive feedback from people and their representatives suggests the service provides an exceptional level of care and support.

People live in suitable accommodation, which supports and enhances their well-being. Rooms contain personalised items of choice. They are suitably furnished and have facilities, which encourage independence whilst maintaining safety. The environment is safe, free from hazards and well maintained. Safety checks are completed when required and there is a fire risk assessment in place. Alarm testing and fire drills take place regularly and people have personal evacuation plans in place.

Care and Support

People receive an excellent standard of care and support at Pen y Fai. There are extremely detailed and up to date personal plans for how care is provided in order to meet support needs. The plans demonstrate what matters to the person and how best to support them to achieve their identified goals. The service also uses specialist support planning documentation in relation to behaviours and health issues. People's ability to be involved in care planning is considered and family are fully involved. A relative told us "*I am extremely happy with the information I get and I am always invited to give our input which is taken very seriously*". Recording of support given is detailed and evidence that identified needs are monitored and regularly reviewed. A relative told us, "*Values in care make our lives easier because X loves his carers*".

The health and well-being of people is supported very effectively. Documentation seen and speaking with care workers, show they can recognise any deterioration in people's health and seek medical attention when needed. We saw core staff are familiar with the likes and dislikes of the people they support. There is a varied and regular programme of specifically individualised activities. People are supported to maintain relationships with relatives. We were told by care workers that they support people to travel to see relatives.

There are excellent systems in place for the management of medication and people's health is promoted by good practice. We saw medication is stored securely in a locked cupboard. Records of daily temperature checks were seen to ensure safe storage of medication. Medication Administration Records (MAR) are completed appropriately with signatures of care workers present. There are good processes in place for the ordering and auditing of medication in the service which minimises the risk of error. Staff assisting people with medication are trained and deemed competent to do so.

The provider has highly effective mechanisms in place to safeguard people they support. Care workers recognise their personal responsibilities in keeping people safe and told us they would report any issues of concern. Care workers told us they had undertaken training in safeguarding and there is a current safeguarding policy for all staff to access and follow. The staff are supportive of each other and complimentary of the support peers and members of the management team provide. A relative told us "*X could not be in a better place*".

Environment

People benefit from the service's commitment to ensure safe practice. The standard of cleanliness and hygiene appears to be good. We looked at a range of documentation that relates to health and safety and the maintenance of the service. The information provides a detailed overview of a rolling programme of safety checks, servicing and maintenance of the home's equipment and facilities. Effective and efficient fire procedures, testing and training take place to protect people. Records confirmed fire alarm tests take place weekly. We saw the laundry facilities, which are suitable to meet the needs of people living in the home. Effective daily cleaning schedules are in place as all parts of the home are clean, tidy and well organised.

The need for confidentiality is anticipated and respected. Care records are safely stored and employee personnel records were kept securely in the office. Deprivation of Liberty Safeguards (DoLS) records were easily referenced in the care records. In addition, people are safe from unauthorised visitors entering the building. People's privacy and personal information is well protected.

Leadership and Management

Effectively vetted, highly trained and extremely well supported staff support people in the appropriate way. The records we examined show that the provider carries out the necessary checks when recruiting staff. New care staff receive an induction in line with Social Care Wales's requirements. Staff receive training relevant to their roles, including safeguarding. Staff say they feel valued, supported and that teamwork at the home is good. They also told us that they are able to talk to management, who are all approachable. A new manager is in post since the last inspection who is visible in the service. Care workers told us *"She is approachable"*, *"we get on well"* and *"she's very good with the paperwork"*.

The service provider has highly effective governance arrangements in place to support the smooth operation of the service. We viewed documents relating to the service's excellent quality assurance processes, which are completed in a timely manner. We saw evidence that the manager and RI have an excellent oversight of the service. The RI's six-monthly quality assurance report covers a wide range of operational matters and identifies areas where improvements are required. We found family and professionals give positive feedback about the care provided. There is a complaints policy and procedure in place, no complaints have been received by the service since the previous inspection.

People can access information to help them understand the care, support and opportunities available to them. The statement of purpose and Information leaflet accurately describe the current arrangements in place regarding the care and support provided. The statement of purpose also includes details of the service's supervision and training arrangements for care staff.

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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