

# Inspection Report on

**Ger Y Nant** 

**Treharris** 

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

04/03/2024



# **About Ger Y Nant**

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	3 August 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 Ger Y Nant receive a very good standard of person-centred care and support. People have control over their own lives and are supported and encouraged to make choices. Activities are varied and tailored to people's individual needs and preferences. Personal plans are incredibly detailed and give care workers in-depth knowledge of people's needs and individual goals. They also consider risks to people's health and safety and set out strategies for keeping people safe.

Care workers are safely recruited and receive regular supervision and training. Care workers enjoy working at the service and feel supported and valued by the management. Governance and quality assurance measures are robust. The Responsible Individual (RI) visits the service regularly and has good oversight of service delivery.

The environment is maintained to a good standard and is comfortable and clean. Health and safety audits, along with a rolling programme of maintenance and repair, ensures the environment is safe. People have their own rooms which are personal to them and there are communal areas providing a space where people can relax or participate in activities.

### Well-being

People are treated with dignity and respect. We saw care workers interacting with people showing warmth and kindness. We received positive feedback from people's representatives who told us they are happy with the service provided. One said, "They go above and beyond. They do everything they can to support my son, they buy him Christmas and birthday presents. They treat him like family".

People are offered daily choices and are supported to do things they enjoy. We saw the service consults with people to identify their preferred choice of activities. Detailed support plans are in place for each activity undertaken. As well as providing residential care, the provider also has a day service people can access to participate in group activities or work towards accredited qualifications.

A well-maintained environment helps support people's well-being. The home is clean and comfortable throughout with appropriate décor and furnishings. Routine health and safety audits identify potential hazards, with an ongoing programme of maintenance and repair ensuring the environment is safe.

There are measures in place protecting people from harm and abuse. There is a safeguarding policy aligned with the Wales Safeguarding Procedures. Care workers receive safeguarding training and are confident in their ability to raise concerns. Detailed risk assessments and management plans guide care workers on the best ways of keeping people safe.

#### **Care and Support**

Care and support provided is person-centred. This means it is tailored to people's individual needs and preferences. The standard of care and support provided is very good. Care workers are attentive and respond to people, providing appropriate levels of prompting and support. We saw care workers interacting with people showing genuine warmth and compassion. People are encouraged to make choices and have access to a broad range of activities they enjoy. Activity planners display people's daily activities. They show people participate in leisure pursuits as well as domestic tasks within the home. People are consulted on the activities they undertake at monthly resident meetings. Activity planners are updated following this if the person decided they would like to try something new. The service adopts excellent methods to communicate with people who have communication difficulties. We saw the picture exchange communication system (PECS) being used to gather people's views at monthly resident meetings.

People living at the service have personal plans containing extensive information about the care and support they require. Personal plans are clear and concise and detail the best ways of supporting people to achieve their personal outcomes. Personal plans also contain a high level of person-centred information, informing care workers of people's personal history, likes and dislikes and their communication methods. Specialist plans such as positive behaviour support (PBS) plans are devised using a multi-disciplinary team approach, setting out pro-active methods of managing behaviours that challenge. Risk assessments are in place which support people in taking positive risks whilst keeping them safe. Personal plans are reviewed every three months to ensure information remains current. In addition to this, an annual multi-disciplinary team review is held to consider people's whole package of care.

People have access to health and social care professionals to help maintain their health and well-being. People's health needs are detailed in their personal plans. There are specialist plans in place helping manage specific health needs. For example, we saw epilepsy profiles which contain individualised information on how best to support someone in the event of an epileptic seizure. We saw evidence of referrals to external health practitioners including GP's, Dentist's, and Specialist Nurses. Care workers support people to attend routine appointments as well as seeking advice and guidance from healthcare professionals if they identify concerns. There are systems in place for the management and storage of medication. Medication is stored securely. Each person has a medication support plan. Care workers receive medication training and frequent medication audits help identify and action any issues. We reviewed medication administration practice and found as required (PRN) medication was not always being administered in line with guidance set out in personal plans. We discussed this with the management team who assured us the matter would be resolved.

#### **Environment**

People live in a clean, comfortable environment. The premises and facilities are suitable for people living at the home. People's rooms are personalised to their preference and have ensuite bathing facilities. Communal areas are suitably furnished and decorated. There is a well-maintained garden area with seating available. People can utilise this area for relaxing or participating in activities. There is also a dedicated activities room which is frequently used by people living at the service. The kitchen has been awarded a score of four by the Food Standards Agency, meaning standards of hygiene are 'good'. Care workers follow cleaning schedules to ensure high standards of cleanliness and hygiene are maintained.

People benefit from a safe, secure environment. There is a maintenance team which has good oversight of the day-to-day upkeep of the home. Any defects or potential hazards are reported to the maintenance team via an online system so they can be actioned. The maintenance team carry out routine tests of systems such as fire alarms and emergency lighting to ensure they remain in good working order. The home has sufficient storage space and substances hazardous to health are securely stored in line with the relevant statutory guidance. Up to date safety certification is in place for utilities and fire safety features. All people living at the home have a personal emergency evacuation plan (PEEP) in place. These documents detail the most efficient ways of assisting people to evacuate the building in the event of an emergency. People are safe from unauthorised access. All visitors must sign in on arrival and out on departure.

# **Leadership and Management**

Strong governance arrangements help support the operation of the service by ensuring quality care and support is provided. There is a responsible individual (RI) who visits the service regularly to maintain effective oversight and support the management in the day to day running of the home. We saw evidence the RI meets with staff and supported people to gather their views on the service to help inform improvements. Quality of care reviews are completed every six months, and a report is published. We looked at the latest quality of care reports and found they are comprehensive, highlighting what the service does well and identifying areas where it can improve. We saw routine audits are completed to ensure the service operates in line with regulations.

Care workers are safely recruited and trained to meet the needs of the people they support. The service performs all the required pre-employment checks to ensure care workers are suitable to work with vulnerable people. When care workers commence employment, they complete a structured induction and shadow experienced members of the team. Following the initial induction period, care workers have access to an ongoing programme of training and development opportunities to ensure they remain sufficiently skilled. We saw all care workers are registered with the workforce regulator, Social Care Wales. This is done to ensure care workers possess the skills and qualifications required to work in the care sector.

Care workers told us the management are supportive. We saw care workers receive supervision every three months and have an annual appraisal. This formal support gives care workers the opportunity to discuss their work, reflect on their performance and set their development targets. Coupled with this, regular team meetings are held where discussions around operational matters and the support people receive is discussed.

Information describing the service is available for people to view. There is a statement of purpose and user guide. Both documents are detailed, giving an overview of service provision as well as containing useful information including the complaints procedure. Both documents are available in a range of formats, kept under review and updated when necessary.

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	

N/A	No non-compliance of this type was identified at this	N/A
	inspection	

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