

# Inspection Report on

Yr Hafod Residential Care Home

Yr Hafod Old Peoples Home Rhos Y Dre Cardigan SA43 1NT

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

**Date Inspection Completed** 

15/11/2022



#### **About Yr Hafod Residential Care Home**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Ceredigion County Council Adults and Children's Services
Registered places	28
Language of the service	Both
Previous Care Inspectorate Wales inspection	30 November 2021
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### **Summary**

This focused inspection is to review the open Priority Action Notice (PAN) around the internal environment.

The provider has an improvement plan and has made some progress in refurbishing the environment. The progress has been delayed because of the availability of materials and contractors to complete the work. The provider has been open with CIW on the progress and challenges during regular update meetings. The PAN will remain open and we will test for compliance in the next inspection.

People who live in the home are very positive about the service they receive. Everyone is happy with the work that has already been finished and are looking forward to the completion of the rest of the upgrades.

#### Well-being

People receive person centered support and do things they enjoy. An individual told us "It's very nice here and the staff are really good". Care workers know people well and treat them with dignity and respect. People can talk to each other and staff in Welsh or English as they choose. Interactions are friendly and relaxed.

People are involved in decisions and express their views about the service. People's circumstances are considered and the provider has new colour schemes that are designed to support people with memory challenges. The provider's aim is to enhance people's overall health and well-being by improving the environment.

People have a voice because the provider involves them and/or their representatives in quality assurance audits. Staff contribute with ideas and suggestions to improve the quality of service during quarterly visits. The provider has refurbishment plans that will improve people's health and well-being. The provider checks the progress of the refurbishment plan during their quarterly visits and clearly explains reasons for any delays.

#### **Care and Support**

Care and support was not a focus of this inspection, however our discussions with people who live and work at Yr Hafod, again show the service is meeting people's health and well-being. Care workers know people well and one told us "the residents are great, they are such a happy bunch and that's important"

People are positive about the staff and the support they receive, one said "the staff are fantastic, they go above and beyond and can't do enough for me". Everyone is positive about the work that has been completed and are looking forward to the rest of the refurbishment programme being finished.

#### **Environment**

The provider has made improvements to two communal lounges and four bedrooms since the last inspection. The main communal lounge is bright and fresh and is now a hub for people to meet and socialise. The progress has been impacted by the availability of materials and contractors to carry out the work. The next phase of the programme is the refurbishment of the main dining area and decoration of the downstairs hallway and additional bedrooms.

People are positive about the work that has already been completed and we were told "I'm very happy with my bedroom" and "the new colours are great and look lovely". Staff are encouraged by the work that has been completed and the benefits to people, a care worker told us "The lounges are lovely and there's more space and it's important because people now have the choice of where to sit".

Although the Priority Action Notice remains open the provider has informed us about the issues they are experiencing around completing the work that is outside of their control.

## **Leadership and Management**

Leadership and management was not part of this focused inspection. However, the provider has good arrangements to monitor, review and improve the quality of the service. The latest Regulation 73 report is comprehensive and details the progress of the refurbishment plan and highlights any barriers. The provider has been maintaining regular contact with CIW around the challenges in completing the refurbishments.

People who live and work at the service are positive about the onsite leadership and staff told us "[manager] is great" and "[manager] is doing a great job and is a very good manager" and "I get good support from [manager]".

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	
44	Premises	Not Achieved	

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	

#### **Date Published** 03/01/2023