



Inspection Report on

Maes Y Rhyddid

**Hafod Lane
Pontypridd
CF37 2PF**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

22/05/2024

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About Maes Y Rhyddid

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Values in Care Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	15 December 2022
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 receive person-centred care and support at Maes y Rhyddid. People live in a safe and secure environment. Care and support is kind, relaxed and compassionate. Care staff have detailed up-to-date knowledge of people's needs. People are supported to get the right healthcare at the right time. The service takes measures to help protect people from abuse and harm. Infection control measures help reduce the risk of transmission of potential sources of infection. Systems are in place to promote the safe management and storage of medication. The service has thorough governance, auditing, and quality assurance arrangements. The service uses the correct recruitment measures and supports staff to ensure they are suitably trained. Care staff enjoy working at the service and feel supported in their role. The service provides good information to the public.

Well-being

People receive person-centred care and support at Maes y Rhyddid. Personal plans detail people's needs, preferences, and how best they like to be supported to have positive experiences. Risk assessments promote people's safety. Care staff know the people they support well and can identify changes in need. People are supported with opportunities to take part in activities and to access the community. Care staff use various techniques to support people's specific communication needs, which promotes inclusion and benefits their well-being. The service does this particularly well, being fortunate to have some care staff whose main form of communication is the same as some people. Where a person needs support to make their voice heard, people's families and representatives are supported to do this, for example being involved in reviews of personal plans. The service considers people's decision-making capabilities very well, ensuring the correct processes are followed where people cannot make their own decisions.

People are supported to be as healthy as they can by getting the right care at the right time. The service works with health professionals to report any issues it identifies and follows appropriate guidance. People are supported to access routine health appointments. Meal options are balanced, healthy options are promoted, and people are involved in choosing meals. The home has appropriate infection control measures in place which are in line with its policy. Processes are in place to manage people's medication and ensure they receive prescribed medication as directed.

People live in a safe and secure environment. Maes y Rhyddid is a converted home for people who have a learning disability and their associated needs. It is in a semi-rural, environmentally secure area. Bedrooms are comfortable and personalised, there are communal areas and bathrooms available for people, and there is access to an attractive outdoor area. The home is clean and well-maintained.

The service takes measures to help protect people from abuse and harm. The home is secure and can only be accessed by authorised persons. Policies and procedures support good practice and can assist staff to report a safeguarding concern. Care staff understand their responsibilities around safeguarding procedures and tell us they feel confident if they raise an issue with the manager, it would be responded to. Pre-recruitment checks for care staff are correct and regular supervision supports continued development. Ongoing training supports staff to maintain their skills and knowledge. Incidents and accidents are logged, and appropriate actions are taken. The service is proactive in identifying potential risks to people or staff and how to manage these. Ongoing quality assurance audits ensure systems remain effective and improvements are identified and addressed.

Care and Support

Care and support is kind, relaxed and compassionate at Maes y Rhyddid. People appear well cared for and generally settled in their environment. People's families tell us they have noted improvements at the service since the new manager started, "*some of the staff really care – you can tell*" and "*some staff are very good at responding to their needs*". Care staff know the people they support well and told us detailed information about their needs, which corresponded with information in people's care files.

Care staff have detailed up-to-date knowledge of people's needs. The service considers a wide range of information prior to people moving in. The service works with people's families and other professionals to ensure they have the correct information. Personal plans are person-centred, outcome-focused, and reflective of people's needs. Risk assessments detail areas specific to people's needs and give strategies to staff about how best to support with these. Detailed daily recordings and supplementary monitoring charts give important information about people's progress and identify changes in care needs. Regular reviews take place, involving people's representatives where the person is not able to take part. The service has started to use a computer system to document people's experiences to help inform reviews. Care files contain assessments and guidance from other professionals, such as learning disability nurses and psychiatrists. Deprivation of Liberty Safeguard (DoLS) referrals are made where people lack mental capacity to make decisions about their care and accommodation.

Infection control measures are in place, which help reduce the risk of transmission of potential sources of infection. Staff have access to a supply of appropriate PPE. There is an infection control policy in place which staff are aware of and understand their responsibilities. Care staff use a cleaning rota to direct them to clean the home daily. Laundry routines help reduce the risk of infection. The home appears clean and well kempt.

Systems are in place to promote the safe management and storage of medication. Medication is stored securely and can only be accessed by authorised care staff. Trained care staff administer medication in line with the prescriber's directions, with records being free from errors. The service has an up-to-date medication policy. Medication is audited regularly.

Environment

People are supported in an environment which is clean and safe. Maes y Rhyddid is a two-story converted house that can accommodate four people, with an additional annex that supports one other. The service is located on the outskirts of Pontypridd. The service is clean, tidy, and is in a semi-rural environmentally secure area. People's bedrooms are a comfortable size and personalised to their tastes. There are sufficient toilet and bathing facilities, with some ensuite facilities in place. The home has two lounge areas where people can spend their time. Communal areas are clean, tidy, and uncluttered. The kitchen facilities are appropriate for the home, are well decorated, and achieved a Food Hygiene Rating of 5, which means they are 'very good. They enable people to take part in meal preparation with support if needed, with a dining table in place where people can have their food. The service has a large and attractive garden area for people to use, including equipment such as a swing and trampoline.

The home environment is generally safe. Fire exits are clear of clutter and obstructions. There are no obvious trip hazards. Daily cleaning duties are being maintained. There are fitted window restrictors in all bedrooms and bathrooms viewed. Appropriate arrangements are in place to maintain the building. The manager confirmed upcoming maintenance and refurbishments to some parts of the service. Maintenance records confirm routine completion of utilities testing, such as electrical items and water facilities. The auditing and servicing of equipment is up to date and fire safety tests and drills are completed. Personal evacuation plans are in place and are accessible in the event of an emergency.

Leadership and Management

The service has thorough governance, auditing, and quality assurance arrangements. These help the management team self-evaluate and identify where improvements are needed. A recently appointed manager provides strong and effective leadership. They appear enthusiastic and passionate about the role and feedback from care staff is positive. The Responsible Individual (RI) is effective in their role and has good oversight of the service, undertaking three-monthly service visits to meet with people and staff and completing six-monthly quality of care review reports. Policies and procedures provide guidance to care staff around their roles and responsibilities. Care staff understand their roles around key areas of care, such as safeguarding and infection control. The service gathers the views of people, their representatives, and care staff. Procedures are in place to deal with complaints, which the service acts upon. The service is open and transparent, making the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences at the service.

The service ensures staff are recruited safely and are suitably trained. Care staff files contain all required recruitment information, such as proof of identity and employment references. Care staff are registered with the workforce regulator, Social Care Wales, with new care staff completing an induction before starting work. Training records show care staff have up to date training in core areas of care. Additional training for specialist areas relevant to people who live at the service is also in place, such as epilepsy management and Positive Behaviour Support. Staff told us they feel well trained and can perform their duties safely and effectively.

Care staff enjoy working at the service and feel supported in their role. They told us *“I love it here”, “I love coming to work, “I enjoy it”, and the manager “has been wonderful”, is “responsive”, and “deals with issues that need dealing with”*. There is a mixture of newer and more experienced staff, with the staff team being at almost full capacity. Care staff told us there was a positive culture of wanting to learn and develop, with experienced staff being supportive. Care staff have regular supervision and a yearly appraisal. Staffing levels are worked out based on people’s level of need and agreements with commissioning bodies. The rota showed target staffing levels were reflective of staffing on the day. Care staff told us they feel there are enough staff working at the service. The service has a variety of initiatives to support staff welfare, such as support worker forums and access to resources to support their mental wellbeing.

The service provides good information to the public. The Statement of Purpose sets out the service’s aims, values, and support provided, and is updated regularly. A detailed written guide contains detailed practical information about the service and the care provided.

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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