



Inspection Report on

Ystrad Fechan

**Station Road
Treorchy
CF42 6HN**

Date Inspection Completed

17/01/2025

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About Ystrad Fechan

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Rhondda Cynon Taff County Borough Council Adults and Children's Services
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	5 July 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

The Ystrad Fechan bungalow is a respite service for people who have a learning disability and associated needs. People enjoy staying at the service, receive warm and genuine care, and are supported to have control over their day-to-day lives. The service supports people to stay as healthy as possible and promotes their well-being. Care staff have up to date, detailed knowledge about people's needs and how to safely support them. People are encouraged to have a varied and balanced diet, with nutritional needs well-managed. Medication is stored and managed safely. Infection control measures help reduce the risk of transmission of potential sources of infection. Systems are in place to help protect people from abuse and neglect. People enjoy staying in an environment that is clean, safe, and adapted to their needs. Good measures are taken to ensure the home environment is as safe as possible. The service is very well run, with governance, auditing and quality assurance arrangements in place to support this. Care staff are recruited safely and are appropriately trained. Care staff like working at the service and supporting people who stay there. The service provides good information to the public.

Well-being

People are supported to have control over their day-to-day lives when they stay at Ystrad Fechan. Care staff know people well and know what their preferences are, with people's personal plans reflecting this information. Where a person needs support around making decisions, people's families and representatives are closely involved in working with the service and are involved in reviews of personal plans. The service also takes part in other meetings regarding the person, such as reviews by other agencies and professionals, to ensure the information they have is kept up to date. The service has good relationships and lines of communication with relatives, who tell us staff keep them informed and updated.

The service supports people to stay as healthy as possible and promotes their well-being. We saw guidance from specialist health professionals contained in people's files, with personal plans reflecting this and care staff supporting people accordingly. Care staff receive specialist training where a person has complex health needs. Personal plans are detailed, person-centred, and reviewed each time before a person stays. Dietary needs are understood and adhered to, with healthy options encouraged. The service has appropriate infection prevention and control measures. The management of medication is safe and in line with the service's medication policy.

People are supported in an environment that promotes their well-being. Ystrad Fechan is a purpose-built bungalow that caters for a wide variety of needs. Specialist equipment is in place to aid people with mobility needs. Bedrooms are large and people can furnish them as they wish. The service is comfortable and well-placed to access local facilities and amenities.

Systems are in place to help protect people from abuse and neglect. Staff know how to report safeguarding issues if they are concerned for a person's well-being and feel confident the management team will respond to this appropriately. Ongoing core and specialist training supports staff to have the correct skills. Correct recruitment processes are followed. Regular staff supervision and a yearly appraisal supports continued development. Incidents and accidents are logged, with records confirming actions taken by the service in response. Access to the service is restricted to authorised individuals. People's families told us they feel people are safe. The service identifies potential risks to people or staff and develops plans around how to manage these.

Care and Support

Care and support is warm and genuine. We saw people relaxed and at ease in their environment. People and their relatives told us *“I love staying here”, “the staff are very good – the staff work well with them. It’s a real team effort”, “I’ve got peace of mind when they stay there”, “everything is really good – accommodating to their needs”,* and the service is *“a Godsend”*. The service makes sure compatibility is considered so people who stay can enjoy and be safe. Care staff know the people they support very well and are able to explain information about their needs, which corresponds with people’s care files.

Care staff have up to date, detailed knowledge about people’s needs and how to safely support them. Personal plans are person-centred and contain information about people’s goals. They are produced in partnership with people and their representatives, with reviews undertaken before each stay takes place. Risk assessments direct care staff to help people stay safe and promote positive risk-taking, such as how best to promote positive behaviour in different situations and environments. Care files contain assessments and guidance from other professionals, such as learning disability psychiatrists and nurses, which informs people’s plans. Complex health plans, which care staff are required to adhere to, are located in people’s files, with care staff signing to confirm they have read and understood these. Service contact sheets contain detailed information about a person’s stay, with personal spending records showing people are supported to manage their money. This information is shared with people’s families following their stay.

People are encouraged to have a varied and balanced diet. Dietary needs and preferences are understood, and a variety of food options inform the menu. People’s choices are sought and promoted where this is possible, with people’s personal plans and risk assessments adhered to. People take part in food preparation with care staff where this is possible.

Systems are in place to safely store and manage people’s medication. Medication is stored securely in the staff office. Medication records show care staff administer in line with the prescriber’s directions and are free from errors. Care staff receive training in how to manage and administer medication. The service has an up-to-date medication policy in place.

Infection control measures help reduce the risk of transmission of potential sources of infection. Staff have access to a supply of appropriate personal protective equipment (PPE). An infection control policy is in place, with staff understanding their responsibilities around this. Care staff use a rota to direct them to clean the service daily, with the service appearing clean and well maintained. Clinical waste is disposed of safely and promptly.

Environment

People enjoy staying in an environment that is clean, safe, and adapted to their needs. Ystrad Fechan is a purpose-built bungalow, located close to Treorchy town centre and within access of local amenities. The service can accommodate up to three people who have a learning disability and associated needs at any one time. The service is secure from unauthorised people, with visitors required to sign before entry and upon leaving. The service is clean and tidy throughout. Bedrooms are large, spacious, contain televisions, with a specialist tracking hoist and adjoining ensuite bathroom in place for one of the bedrooms. There are sufficient toileting and bathing facilities. The service has a very homely and comfortable living area, with an adjoining conservatory containing activities such as board games and arts and crafts. People can also dine here if they wish. The kitchen facilities are very good and enable people to take part in preparing food. There is a large, secure, well-presented garden with accessible patio areas for people to use. We discussed with the Responsible Individual (RI) and manager potential plans for repainting the service, from which it would benefit.

Good measures are taken to ensure the home environment is as safe as possible. Substances hazardous to health are stored in locked cupboards which are highlighted accordingly. Fire exits are clear of clutter and obstructions. There are fitted window restrictors in all bedrooms and bathrooms. Maintenance is managed by the Local Authority's Corporate Estates team, with disrepair issues reported and addressed promptly. Maintenance records confirm the routine completion of utilities testing, such as electrical items, gas 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 is very well run, with governance, auditing and quality assurance arrangements in place to support this. The RI has good oversight of the service, completing three-monthly visits to the service to meet with people and staff, and completing six-monthly quality of care reviews. The management team use their auditing and quality assurance processes to identify what is working well with the service, any issues, and where improvements are required. Policies and procedures are in place to provide guidance around staff roles and responsibilities, and how the service is to be run. The service makes the legally required notifications to Care Inspectorate Wales (CIW) regarding occurrences there.

Care staff are recruited safely and are appropriately trained. We saw appropriate recruitment arrangements are in place, with staff files containing all legally required information such as proof of identity and employment references. Care staff are registered with the workforce regulator, Social Care Wales. Training records show care staff have up to date training in core areas of care. Additional training is in place for specialist health conditions relevant to people who stay at the service, such as percutaneous endoscopic gastrostomy (PEG) feeding and epilepsy management. New staff complete an induction and a probation period to ensure their performance is satisfactory. Staff told us they can perform their duties safely and effectively and feel able to ask for additional training if required.

Care staff like working at the service and supporting people who stay there. We were told “*I like helping people develop new skills – it’s good to see them gain confidence*”, and “*the management are brilliant – things get dealt with*” and “*they’re supportive*”. The staff team have been in post for some time, helping facilitate continuity of care and consistent support. Care staff receive regular one-to-one supervision and a yearly appraisal and feel able to approach the management team with any issues more generally. The manager told us staffing levels are worked out based on the number of people staying and their level of need. This is adjusted as needed and is planned based on respite bookings. We are aware of staffing vacancies across the Local Authority’s respite services, which has impacted on people being able to book respite stays. The RI explained the reasons for this and provided assurances around the actions being taken to address this.

The service provides good information to the public. The Statement of Purpose sets out the service’s aims, values, and how it delivers support. A written guide contains practical information about the home and the care provided. Information about the Local Authority’s complaints process is available if needed.

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.

Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

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