Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Ty Hafod

Ty Hafod
Llantrisant Road
Cardiff
CF5 6JR

Date Inspection Completed

28/02/2025

About Ty Hafod

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Ty Hafod Ltd
Registered places	27
Language of the service	English
Previous Care Inspectorate Wales inspection	First inspection post registration under Regulation and Inspection of Social Care (Wales) Act 2016
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People receive a good standard of care and support which is reflective of their needs. Care documentation is person-centred and highlights people's personal outcomes. This provides care staff with information so they can deliver care and support in line with people's preferences. Care staff receive training relevant to the needs of the people they support which helps keep them sufficiently skilled. Care staff say they are happy working at the service and feel supported and valued.

The manager is responsible for the day to day running of the home. There are effective quality monitoring systems including audits of the care and support provided. The Responsible Individual (RI) is a visible presence at the service and appears to have good oversight of service provision. There are systems in place to monitor the services performance and identify where improvements can be made.

The environment is clean and comfortable. There is an on-going regime of maintenance and repair to ensure the environment, its facilities and equipment remain safe.

Well-being

People are treated with dignity and respect. We saw kind, caring interactions between care staff and people during our inspection. People told us they have positive relationships with care staff, and they are happy living at the service. People's relatives provided complimentary feedback regarding the care and support provided and speak highly of care staff and the manager.

People are offered choice and are encouraged to make decisions about their daily routines. We saw people can choose what they want to eat and drink and where they spend their time, whether that be in one of the communal areas or the privacy of their own room. Activities are on offer for those who wish to participate. On the day of our inspection, we saw a group of people participating in an exercise class in the morning, then later in the afternoon there was a singer at the service providing entertainment. People are encouraged to maintain relationships with family and friends. We spoke to visiting relatives who told us they can visit when they choose and are always made to feel welcome.

As far as possible people are protected from harm and abuse. People have individualised risk assessments which consider risks to their health and safety. Personal plans outline safe ways of supporting people. There is a safe recruitment process ensuring care staff are suitable to work with vulnerable people. Care staff receive safeguarding training and are familiar with the process for raising concerns. Incidents and accidents are logged and reported to the relevant agencies when needed. Medication is stored and administered safely.

People live in an environment which is suited to their needs. The home is clean and comfortable throughout. There is a dedicated maintenance person who is responsible for the day-to-day upkeep of the home. They perform regular environmental checks to ensure the home, its facilities and equipment are safe to use. People have access to communal areas as well as their own rooms. Communal bathrooms are kept clean and tidy and there is specialist equipment available for those who need it.

Care and Support

People and their representatives are pleased with the level of care and support provided and speak highly of care staff. One person said, *"The staff are all very good",* another person told us, *"I'm comfortable here, the staff do a good job"*. Relatives who were visiting their loved ones on the day of our inspection commented, *"The staff are friendly, approachable. Nothing's too much trouble for them", "I can come to visit any time, and they really make you feel welcome"* and *"I have total confidence in the management. There's a good sense of community here".* We saw positive interactions between people and care staff which supported the positive comments we received. We observed care staff responding to people's requests quickly and delivering care and support in a friendly, relaxed manner.

People's care and support needs are documented in their personal plans. The service uses an electronic system to store people's care documentation. Care staff have access to this system via handheld devices. This is a live system with any updates to personal plans being communicated instantly to care staff. We saw the service uses a person-centred approach to care planning, which keeps people at the forefront of the care and support they receive. Personal plans are clear and concise, giving care staff information on how best to support people to achieve their personal outcomes and remain safe. Some of the care and support plans we viewed contained contradicting information around some aspects of people's care and support. We discussed this with the management team who assured us they would address the matter.

The service has effective medication management systems ensuring people receive their medication as prescribed. Care staff receive relevant training and there is a medication policy aligned with best practice guidance. Medication is securely stored and there are regular medication audits which help identify and action any potential issues as they arise. People have support plans in place detailing their medication regimes. We saw the appropriate 'best interests' documentation was in place for people who require their medication administered covertly.

People are supported to be as healthy as they can be. Nursing staff provide clinical support for people with nursing needs. We saw all contact with health and social care professionals is recorded in people's personal plans with any advice given appropriately documented. People are given choices at mealtimes through a varied menu. We observed people having lunch. The food looked appetising, and it was well presented. One person commented, *"The food is very nice here".* We saw there were enough care staff available to provide assistance to people who require support at mealtimes.

Environment

People live in a clean and comfortable environment. The home is set over two floors with lift access to the upper floor for those with mobility problems. Domestic workers are at the home daily. They follow cleaning schedules to ensure the home is kept clean and tidy. Laundry facilities are suitable for the size of the home and there are systems in place to reduce the risk of cross contamination. The kitchen has been awarded a score of five by the Food Standards Agency which is the highest possible score and suggests standards of cleanliness and hygiene are very good.

There are a number of communal areas people can access where they can spend time with others and participate in activities. People's bedrooms are personalised to their preference with their own belongings, which helps promote a homely feel. There are communal bathrooms and toilet facilities which are equipped with specialist equipment for those who require it. There is a large garden area people can access with seating available. We were told there are plans to make the garden area more accessible to people living in the home. We saw there is on-going investment in the fabric of the home to ensure it provides a comfortable living space for the people who reside there.

There are measures in place which ensure the environment, its facilities and equipment are safe. Maintenance records confirm utilities such as gas, electricity and water are regularly tested. Specialist equipment such as hoists are serviced in line with the manufacturer's recommendations. Fire safety features are regularly inspected by qualified trades people. There is a fire risk assessment and all people living at the home have a personal emergency evacuation plan (PEEP) in place. This document provides information on the best ways of supporting people to exit the building in the event of an emergency. We completed a visual inspection of the building and did not identify any significant hazards. We saw there are systems in place to prevent unauthorised access to the home. All visitors must sign in on arrival and sign out on departure. All confidential information is securely stored and can only be accessed by authorised personnel.

Leadership and Management

People are supported by sufficient numbers of care staff who are well trained and supported in their roles. Training records we viewed show care staff are mostly compliant with their training requirements. Care staff we spoke to told us the standard of the training provided was good. Records relating to supervision and appraisal show care staff receive the recommended levels of formal support. Care staff we spoke to provided positive feedback, they said, *"The training is really good in all fairness. Lots of face-to-face training provided", "The manager is great, very supportive",* and *"The staff are very much like a family, we give a personal touch to the care provided".*

Care staff are appropriately recruited and vetted for their roles. We saw the service has a robust recruitment process in place and completes all the required pre-employment checks. These checks include Disclosure and Barring Service (DBS) checks, references from previous employers and employment history checks. After they have started employment, care staff complete a structured induction where they get the opportunity to shadow experienced members of the team.

There are governance and quality assurance systems in place which help the service operate smoothly. The RI is a visible presence at the home and appears to have good oversight of service provision. The RI is up to date with their regulatory required monitoring of the services performance. We saw the RI completes regular audits where staffing matters, the environment and people are considered. Quality of care reviews are completed within the required timeframes. We looked at the latest quality of care report and found it highlights the service's strengths and areas where improvements can be made. However, the report did not provide analysis of significant events within the home. We discussed this with the management team who assured us reports would be strengthened. The manager completes routine audits to ensure issues are identified and actioned at the earliest opportunity.

Information is available to help people understand the services provided. There is a written guide which contains practical information about the home. We found this document requires some minor adjustments, so it contains all the regulatory required information. The statement of purpose sets out the services aims, values and delivery of support. We found this document is reflective of the service 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.

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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