

# CYNGOR SIR CEREDIGION COUNTY COUNCIL

**Report to:** Healthier Communities Overview and Scrutiny Committee

**Date of meeting:** 2<sup>nd</sup> September 2024

**Title:** Hafan Y Waun Residential care home – CIW report

**Purpose of the report:** For information

**Reason Scrutiny have requested the information:**  
Not requested

**Cabinet Portfolio and Cabinet Member:**  
Cllr Alun Williams

## **Background**

Hafan y Waun (HYW) Residential Care home came under the ownership of Ceredigion County Council in November 2023. The home offers 90 residential placements including short term, temporary, permanent and respite. Including care and support for people living with dementia. Care Inspectorate Wales (CIW) completed a routine inspection of the home on the 26<sup>th</sup> June 2024 – the first inspection since the change of ownership. The attached inspection report provides an overview of the home and its performance under the 4 key areas inspected:

- Wellbeing
- Care and Support
- Environment
- Leadership and Management

## **Current Situation**

The report highlights positive and complementary areas within the home, as highlighted within the summary:

The service has recently been taken over by a new provider, it is effectively led by the knowledgeable and passionate manager and deputy. The new Responsible Individual (RI) consults with people who live and work at the service. Information from their quarterly visit reports is used to inform their six-monthly quality of care review.

People appear very happy with the service they receive and are supported by a friendly and caring staff team. Care workers are enthusiastic about their roles and the people they support, one said “The residents are lovely. I love working with them”. Representatives are also positive about the impact the service makes.

The well-designed environment meets people’s needs, is comfortable and generally well maintained. The provider has a plan in place to improve the internal and external aspects of the home, to benefit people. Day to day repairs are completed promptly by the in house maintenance team.

## **Wellbeing of Future Generations:**

**Has an Integrated Impact Assessment been completed? If, not, please state why.**  
No

**Summary of Integrated Impact Assessment:**

**Long term:** INSERT TEXT  
**Collaboration:** INSERT TEXT  
**Involvement:** INSERT TEXT  
**Prevention:** INSERT TEXT  
**Integration:** INSERT TEXT

**Recommendation(s):**

For information and assurance re the operating of the home following the home being taken into council ownership

**Reasons for decision:**

**Contact Name:** Donna Pritchard

**Designation:** Corporate Lead Officer – Porth Gofal

**Date of Report:** 2<sup>nd</sup> September 2024

**Acronyms:**

INSERT TEXT



## Inspection Report on

**Hafan y Waun**

**Hafan Y Waun  
Waunfawr  
Aberystwyth  
SY23 3AY**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

**Date Inspection Completed**

23/06/2024

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## About Hafan y Waun

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ceredigion County Council Adults and Children's Services
Registered places	90
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service promote Welsh language and culture?	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

The service has recently been taken over by a new provider, it is effectively led by the knowledgeable and passionate manager and deputy. The new Responsible Individual (RI) consults with people who live and work at the service. Information from their quarterly visit reports is used to inform their six-monthly quality of care review.

People appear very happy with the service they receive and are supported by a friendly and caring staff team. Care workers are enthusiastic about their roles and the people they support, one said *"The residents are lovely. I love working with them"*. Representatives are also positive about the impact the service makes.

The well-designed environment meets people's needs, is comfortable and generally well maintained. The provider has a plan in place to improve the internal and external aspects of the home, to benefit people. Day to day repairs are completed promptly by the in house maintenance team.

## Well-being

People receive excellent care and support that meets their needs. The manager involves health and social care professionals to help people remain as healthy as possible. People are respected, interactions with the staff are friendly and relaxed. A comprehensive activities programme ensures people do things that matter to them, such as exercising, gardening, religious services, theme days and events that allow people to socialise with each other and their family and friends. Representatives are also positive about the care and support; one said, *“They are always laughing and I look forward to coming in”*. People live in a service that offers an 'Active Offer' of the Welsh language. We observed staff skilfully switching from Welsh to English to ensure people communicate in their preferred language.

People are protected because recruitment processes ensure they get the right care and support. Care workers receive a thorough induction and effective ongoing development and register with Social Care Wales. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People and their representatives know how to make a complaint if needed and have confidence in the manager.

People are enabled to be as independent and as social as possible because the building is well designed. People personalise their own rooms as they choose. People use the different spaces available to do things they enjoy, for example, taking part in a wide variety of stimulating activities and interacting with each other, staff and visitors. The gardens are accessible and people can do things that matter to them.

People have a voice and input into the running of the service because the RI involves them and or their representatives in quality assurance. Governance processes focus on developing the service by using information from surveys and audits. The Quality of Care Review identifies areas to improve following consultation with people, their representatives and staff work at the home.

## Care and Support

People appear very happy and content with the highly effective care and support they receive. Care workers respect people and we saw many sensitive and understanding interactions between people who live and work at the home. Staff know people well and support them in line with their needs and preferences. A care worker told us *“The reason I come into work is to make a difference and it’s a nice way to give people something positive”*. People’s representatives are also positive about the care and support, one told us, *“I can’t praise the staff enough. They go above and beyond”*.

People, their representatives and care workers are involved in developing and maintaining personal plans. Senior staff regularly review plans to ensure they are accurate and up to date, the manager intends to improve the recording of the reviews. Health and social care professionals are effectively involved, and their guidance helps to enhance people’s overall well-being. For example, creative meal plans have resulted in many people gaining weight and a proactive approach to holistic support rather than the use of medication. Risk assessments are developed around the specific needs of each individual and encourage independence. The manager ensures any restrictions to people are done so legally, with the correct documentation in place. Detailed daily notes record the care and support completed and the manager intends to improve them, with more detailed accounts from the perspective of the person.

Enthusiastic activities coordinators, arrange a wide variety of pastimes such as aromatherapy, dance, gardening, poetry and themed events. There is a focus on community involvement and events such as couples dining gives people who live at the service the opportunity to socialise with people from outside of the home. People can spend time with their family and friends in their own rooms, quiet communal areas or more social spaces such as the tea shop and religious services room.

Medication storage, administration and recording systems are safe and in line with national guidance. The deputy ensures medication is managed appropriately and staff take time to give people the right dose of medication at the right time. Regular audits ensure issues with medication are picked up, actioned, and reported appropriately.

The provider is in the process of recruiting new staff. At the time of the inspection regular agency workers were used to ensure there were sufficient numbers of staff available to meet people’s needs. Staff support people to achieve their outcomes and we observed many unrushed and positive interactions during the inspection.

## Environment

The environment is safe, spacious, and well maintained by a dedicated housekeeping and maintenance team. Carefully designed communal spaces such as the café, activities room, hairdresser and various lounges help people to connect with each other, their visitors, and the staff team. Doors are painted with vibrant colours that help people orientate around the building, staff told us about the difference the colour schemes have made to people's independence. Individual rooms can be personalised with people's own, technology, pictures ornaments and furniture.

The well-designed gardens are used in the warmer weather. Activities such as light gardening and ball games make the most of the outdoor space available. The provider intends to improve the grounds to further improve people's well-being.

The home is bright and fresh, pictures of the local area help connect people with their community. The provider has a planned upgrade programme, they have replaced flooring in individual rooms and are intending to continue this in communal areas. The provider ensures equipment is available for people to use that maintains their dignity and independence. Generally the service's maintenance team ensure ongoing repairs and improvements take place whenever needed.

Regular Health and Safety audits of the property and equipment are completed. Testing of fire safety is up-to-date and Personal Evacuation Plans are individualised and available in emergencies.

The kitchen has a food hygiene rating of three and the provider has taken actions to resolve issues identified by the Environmental Health Officer. People enjoy the option of a social dining experience together or quietly on their own or as a small group. The time and variety of meals are considered to help people to stay as healthy as possible, a representative said, *"The food is great, she's gained weight since coming back from hospital"*.



## Leadership and Management

The service has recently been taken over by a new provider, the new RI and Manager have made a positive impact on the service. The provider has arrangements in place for monitoring, reviewing and improving the quality of the service. The RI has good oversight of the home, and they gain feedback about the service from people, their representatives and care workers every three months. We saw feedback from people and various audits are used to identify areas to improve the overall service in the six-monthly Quality of Care Review.

The manager and deputy work closely together and have created a positive culture at the service. Both are highly visible around the home, they know people well and are enabling staff to succeed in their roles. We saw many friendly interactions between them and people throughout the inspection. Representatives are positive about the effective leadership at the service, one said, "*[Manager] and [Deputy] are available, always greet me when I arrive and if I had a problem I'd be confident to talk to them*". Care workers told us the manager is very supportive, approachable and they value the open-door policy.

Care workers receive regular supervisions and an annual appraisal, they discuss anything at any time with their line managers. A care worker said, "*[Manager] is great, approachable and easy to talk to*". Discussions with staff, demonstrate a good understanding around safeguarding and they are confident to report matters appropriately. Care workers have a good understanding of the key policies and procedures that support good practice.

Pre-employment checks take place before new employees start work. These include references, right to work and Disclosure and Barring (DBS) checks. New staff receive a comprehensive induction, to ensure they are familiar with the people who live at the service. A variety of E-Learning and face-to-face training help all staff to meet people's needs, a care worker told us, "*Some of the training is a refresher and other bits really open your mind*". Care workers complete the 'All Wales Induction Framework for Health and Social Care' and register with Social Care Wales, the workforce regulator.

The service uses regular agency workers to ensure there are adequate numbers of staff available to effectively meet people's needs. We saw many unrushed and encouraging interactions between people and the whole staff team. Many of the regular care workers have been at the service for years and have built up good relationships with people.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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