

Inspection Report on

Garthowen

Garthowen Llandysul SA44 4UD

Date Inspection Completed

29/11/2022



About Garthowen

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Achieve together Ltd
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	10 July 2022
Does this service provide the Welsh Language active offer?	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

This focused inspection tested three open Priority Action Notices (PANs). These were issued because the provider did not have sufficient oversight of the staffing levels at the service, which put people at risk and did not support their well-being.

The provider's oversight has improved and they have increased the number of staff on duty at the service. People are now protected because there are sufficient numbers of support workers to meet their needs and help them to achieve outcomes. We have closed all three of the PANs.

The environment was not part of this focused inspection but we note the service meets people's needs and an upgrading plan is in progress.

Staff are positive about the leadership and they told us this has had a positive impact on the people who live at the service. A support worker said "[Manager] is lovely, you can talk to them and if there are any problems, they sort them out, I really look forward to coming into work".

Well-being

People are safe and protected from harm and abuse and do things they enjoy within the service and in their local communities. People are treated as individuals and do things that are important to them. For example, choosing when they wake up, what they do during the day and which staff they work with. Support workers know people well and have built up longstanding relationships with them. A worker told us "People are going out more and it's making them really happy because they are doing things they enjoy"

People are comfortable and relaxed in the service. Individuals personalise their rooms and are involved in decoration of the communal areas. An upgrade plan has started and will continue in 2023.

Staff feel well supported by the managers and one told us "We have a really good team and things are more relaxed but very efficient. It's because we are treated with respect and feel valued". Support workers feel improved staffing levels have had a positive impact on people and we were told "it's lovely that we take people out more now and I'm taking two people out for a meal today and they love it".

The new manager is accessible and involved in the service, a support worker told us "It's going really good, the staff are happy and that makes the people happy". Staffing rotas are accurate and reflective of the one-to-one time people are assessed as needing. However, work is needed to clarify the number of staff available for the service, outside of these individual one-to-one hours.

People have a voice because the RI consults with them and/or their representatives. Daily records detail the activities people enjoy and show when people receive their contracted hours of individual support. Support workers confirm they complete all tasks safely with correct numbers of staff.

Care and Support

People are treated with respect and dignity by support workers who know them well. We saw many positive and friendly interactions and a person who lives at the service told us "I love it here". Passionate support workers spoke enthusiastically about their colleagues and the positive impact they have on people, one told us "It's like a really happy family now".

The increased number of staff mean that people choose what time they go to bed and when they wake up. People now regularly do activities they enjoy such as knitting, watching TV, shopping, cooking, visiting family and friends, going out for lunch and some are visiting winter wonderland. A support worker told us "We have enough staff now and [Manager] makes sure people go out and about, whenever they want".

The service is appropriately staffed to support people to achieve their health and well-being outcomes and we have closed the PAN.

Support workers are guided by detail personal plans that focus on what is important to people. Risk assessments help maintain people's safety and staff confirm they have sufficient numbers to safely support individuals with manual handling equipment. A support worker told us "Two staff moving and handling is never done alone now". Daily records are informative and clearly show the activities people do, the amount of time they are supported for and the feedback from the individual's perspective.

Environment

The environment was not tested as part of this focused inspection. However, people are relaxed and comfortable in their surroundings. People personalise their rooms and are involved in the ongoing decoration programme.

Leadership and Management

The providers oversight of the service has improved. Sufficient numbers of staff help to keep people who live and work at the service safe. Individuals are now supported to achieve their health and well-being outcomes. This means staff can carry out their duties, such as moving and handling, safely and effectively. The provider is completing a second review of the staffing structure to ensure they are effectively supporting people to achieve their well-being outcomes.

Both PANs are resolved because the provider ensures there are sufficient staff available to safely meet people's needs.

Staff are positive about the RI's leadership and told us "I can be very open and honest with [RI] and [regional manager], I can say how I feel". The last Regulation 73 visit report shows the RI consults people and their family members as well as support workers. Issues are identified by the RI with clear actions needed to address them.

The new manager has had a positive impact on the service, staff describe them as accessible, supportive and person centred. Support workers told us "She's very involved and if something needs doing she's up and out helping us" and "the office door is always open. She will get her hands dirty when we need help".

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	
6	Staffing numbers are putting people who live and work in the service at risk. the provider has taken action following staff raising concerns with CIW and safeguarding	Achieved	
34	The service provider does not ensure that at all times a sufficient number of suitably qualified, trained, skilled, competent and experienced staff are deployed	Achieved	
21	The provider does not ensure that care and support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.	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 inspection	N/A	
73	Regulation 73 visits are completed but in sufficient details	Achieved	

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