

# Inspection Report on

**Cwm Cartref Care Home** 

Cwm Cartref Care Home Rhydyfro Pontardawe Swansea SA8 4SS

## **Date Inspection Completed**

26/07/2023



#### **About Cwm Cartref Care Home**

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Cwm Cartref Ltd
Registered places	48
Language of the service	English
Previous Care Inspectorate Wales inspection	18 May 2021
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 are content at Cwm Cartref Care Home. They feel safe and well cared for by a team of friendly, professional staff. Care workers recognise and celebrate people for who they are. They provide good quality care that promotes people's health and well-being. People have social opportunities and enjoyable mealtime experiences. They take part in a range of meaningful activities. People's views about the service are valued and respected.

There are organised administration systems to support the smooth running of the home. Staff are appropriately recruited and trained. They receive effective support from managers, who monitor standards closely and take action to drive improvement. The new manager has made a good first impression since being appointed in July 2023. The responsible individual (RI) oversees the running of the home effectively.

The home is secure and has the necessary facilities to support people's individual needs. It is clean and appropriately maintained. Private and communal rooms are homely and comfortably furnished and decorated. People have access to a pleasant, well-designed garden.

#### Well-being

People receive a good standard of care and support which enhances their mental and physical well-being. Senior staff review information and carry out assessments to ensure the service is suitable for people before they move in. Care workers have access to detailed, up-to-date risk assessments and personal plans, so they know how people need and want to be supported. Staff ensure people receive their medicines at the appropriate time. People are pleased with the food and drink on offer. They have opportunities to do things they enjoy individually and as a group.

People's rights are promoted. Staff involve people when planning and reviewing their care, which helps them achieve their individual goals. Staff treat people with dignity and respect. They understand what is important to people and are committed to improving their everyday experiences. People are consulted about the service they receive. Staff follow correct procedures to ensure people are not restricted unlawfully.

The home has the facilities to meet people's needs. The accommodation is secure and homely. People are satisfied with their individual rooms, which they can personalise as they wish. The large, spacious communal rooms allow people to relax and socialise with others. The home is appropriately decorated and furnished throughout. People have access to a secure garden, which has been thoughtfully presented. Work is underway to increase storage facilities.

People's safety is promoted. Staff have a good understanding of people's needs. They receive a range of mandatory and specialist training to ensure they practise safely. Staff complete training in relation to safeguarding adults at risk and are recruited in a safe way. The home and its facilities are well maintained, with regular health and safety checks being carried out. Policies and procedures are kept under review and offer clear guidance to staff. The RI and members of the management team regularly assess standards to ensure people receive the best possible service.

#### Care and Support

People feel at home in Cwm Cartref. Staff are gentle and caring in their approach, which creates a warm and inviting atmosphere. We saw various members of staff taking the time to ask people about their day. A relative described staff as "lovely" and said, "Anything you want they'll get. They're very accommodating if there are any issues." People have opportunities to take part in a range of fulfilling activities. Families were invited to attend a summer party, which included a buffet, games, live entertainment, and a bouncy castle for the children. People have also enjoyed food-based activities and pet therapy. The well-being coordinator arranges activities for people on a one-to-one basis, considering their specific needs and interests. There are also plans to arrange a summer outing.

Senior staff consider a range of information when assessing whether the service can meet people's needs. People and their representatives are fully involved in the assessment and planning of their care. Personal plans provide a good overall picture of people's care needs and preferences. People told us they feel well looked after; a view shared by relatives. Care workers have a good understanding of who people are and how they like to be supported. Risk assessments and personal plans are regularly reviewed to ensure they remain appropriate. The manager is working with staff to improve the quality of information they record on monitoring charts and following reviews of personal plans. This is to ensure records accurately reflect the care people have received and their individual views and goals. This work will also include reviewing and removing non-essential paperwork.

The home has a clear, up-to-date policy to support the safe handling of medicines. Medicine storage temperatures are monitored and recorded daily so any issues can be addressed immediately. Medicines are stored securely within a designated medication room. There are plans to relocate medicines to an alternative, larger room. Staff ensure people receive their prescribed medication to support their health, comfort and wellbeing. The effectiveness of 'as required' medication is monitored and documented, which informs routine medication reviews. Managers ensure staff are competent to handle and administer medication. When errors occur, these are appropriately reported and investigated so lessons can be learnt.

People enjoy their meals at the home. A new menu offering more variety was introduced following a resident meeting. Changes have also been made to the serving of meals. Dessert is now served after main courses to encourage people to eat more of their savoury dishes. Food trolleys have also been ordered to help keep foods at the right temperature and make choices more visible when serving people meals in their rooms. We saw care workers assisting people to eat their meals at a relaxed pace. Conversation flowed naturally and care workers prompted people to eat and drink independently, as able. One person told us their meals are "Really good – you could ask for something else if there's anything on the plate you don't like." Staff monitor people's weight and make referrals to medical and

specialist services where there are concerns. They have access to a policy in relation to nutrition, hydration and the use of food and fluid charts.			

#### **Environment**

Cwm Cartref is a well presented home with suitable adaptations and facilities. Communal and private rooms are spacious, homely and thoughtfully furnished and decorated. Staff carefully consider the design and location of people's individual rooms, in line with their needs and wishes. There are homely touches to corridors, with photographs, posters and a Welsh phrase of the week on display. Work is underway to increase storage space, with some unused rooms being converted into storage facilities. The home has suitable arrangements for storing and accessing confidential information. People have easy access to a secure garden that offers stimulation. Personalised art is hung along one fence and there is a greenhouse for people to grow fruit and vegetables. A visible path helps people move freely and safely around their garden. They can also relax in the various seating areas and enjoy the numerous plants, flowers and wildlife the garden attracts.

The home promotes a good standard of hygiene and infection control. It was awarded a food hygiene rating of 5 (very good) in February 2023. We found private and communal rooms to be clean and tidy. People told us their rooms are cleaned daily. Domestic staff are allocated to work on both floors, which makes their workload manageable. There are appropriate facilities for hand washing and disposing of general and clinical waste. The required cleaning products and personal protective equipment (PPE) are also available. All staff have completed training in relation to infection control, which is discussed during staff meetings. Laundry staff ensure clean and dirty items are handled separately. Managers are considering how to improve the design and layout of the laundry room and hairdressing salon, as the hairdressing salon cannot currently be accessed without walking through the laundry room.

The home is secure and properly maintained. CCTV (closed circuit television) monitoring is being used in line with the home's policy. Staff use the necessary equipment to keep people safe as they go about their daily routines. Records confirm that equipment is regularly serviced, as recommended. People can request support from staff via a call bell system. We observed staff responding to call bells within reasonable time, which people confirmed. The manager has taken action to ensure appropriate locks are fitted to storage rooms and cupboards containing hazards. We saw keypads on exits and doors leading to stairwells, preventing people accessing hazardous areas without the necessary support. The service follows Deprivation of Liberty Safeguards (DoLS) procedures to ensure any restrictions people face are lawful and in their best interests. All staff complete mandatory DoLS and health and safety training.

#### **Leadership and Management**

The home has an open and supportive management team. The manager is developing positive relationships with the staff and people living in the home, with many praising his leadership style. The manager feels fully supported by the regional manager and RI. The management team communicates often as they review resources and work together to deliver a safe, effective service. The home has clear and informative policies and procedures to support this. These are reviewed and updated to ensure they reflect current legislation and guidance. The service plans to develop a specific oral care policy to further support this aspect of care. We saw detailed information regarding people's oral care needs within their personal plans.

There are effective quality assurance systems that enable people to influence the service they receive. People and their representatives are invited to attend meetings to discuss life at the home. The RI also gathers feedback from people and follows up on any complaints during three-monthly formal visits. Additionally, quality-of-care reviews are carried out every six months, which includes analysing feedback and data relating to incidents and internal audits. Actions are set to help drive improvement following the RI's formal visits and quality-of-care reviews. The report from the latest review shows that people have good experiences working and living at the home.

The service is achieving its aims and objectives, as set out in its statement of purpose; a document that explains how it will support people to achieve the best possible outcomes:

'We aim to create the right environment which supports physical and mental well-being, enabling our residents to maintain their rights, identity and independence as individuals, whilst creating a spirit of trust and confidence in our professional standards.'

People receive prompt support from staff, who are visible and attentive to their needs and wishes. Rotas show that safe staffing levels are consistently maintained. Staff told us they have time to give people the physical and emotional support they need. An extra care worker has been allocated to work during the busy morning period, so staff are available to people within the lounge. Staff are suitably recruited and trained. The required checks are carried out before staff are employed, including a criminal check by the Disclosure and Barring Service (DBS). Staff receive formal, individual supervisions and annual appraisals, allowing them to reflect on their performance and development. Staff complete a range of mandatory training, as outlined in the home's statement of purpose. They also complete specialist training relevant to their roles. The management team monitor staff's completion of training closely. Data shows that the whole staff team has a very high compliance rate with regards to their mandatory training.

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

N/A	No non-compliance of this type was identified at this	N/A
	inspection	

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