



Inspection Report on

Cartref Celtiadd

SWANSEA

Date Inspection Completed

20/09/2021

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About Cartref Celtiadd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Celtic Care (Swansea) Ltd
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	26 April 2021
Does this service provide the Welsh Language active offer?	No

Summary

Cartref Celtiadd is a home operated by Celtic Care (Swansea) Limited and is able to provide care for a maximum of three people. It is located in a residential area of Swansea with access to a range of local facilities and amenities. The responsible individual (RI) has appointed a manager to oversee the daily running of the service who is registered with Social Care Wales. This is a focussed inspection to consider the progress made by the service provider to achieve compliance with the priority action notices issued at the last inspection.

People experience and receive support to achieve their well-being. Care reflects individual's needs and people are able to access a range of activities and enjoy their hobbies and interests. There is a stable team of care staff who understand and are familiar with people's preferences, routines and how they wish to spend their time. The home is well presented and furnished to a high standard to provide people with a comfortable, clean and pleasant living environment.

Improvements to the quality assurance processes ensure good oversight and governance of the service. Systems are in place to support people using the service and the manager has reviewed and further developed policies and processes to support service development.

Well-being

People feel happy and content with the care they receive and have good relationships with care staff who know them well. They feel supported and are encouraged to make choices on how they spend their time and their daily routines. Weekly menus are established in consultation with people in the home and their preferences and dietary requirements are considered. A healthy diet and lifestyle is promoted. People told us they are now able to access activities and clubs that had not been able to operate during the Covid-19 pandemic and have been able to re-establish their social contacts. Care staff support and facilitate arrangements for people to have contact with their family in accordance with restrictions during the Covid-19 pandemic.

Personal plans are reviewed and updated and provide guidance to care staff to ensure people receive care according to their needs. Systems are in place to ensure people are safe and care staff receive safeguarding training. People receive a level of support and supervision in accordance with their individual needs within the home and in the community.

The home provides an environment to support people's well-being and is furnished and decorated to a high standard. Facilities within the home cater for people's individual needs and support their well-being.

Care and Support

As this was a focussed inspection, we have not considered this theme in full.

Personal plans are in place and provide details of people's individual care and support needs and personal outcomes. Consultation with people's social worker and their family's is subject to ongoing improvements and needs to be evidenced as required by the regulation. The arrangements for people's finances are included in their personal plan. The inclusion of more detailed information would add further clarity to the agreements with people and their service commissioners on how people's money is managed.

Environment

As this was a focussed inspection, we did not consider this theme in full. However, we were able to have a brief view of the premises on arrival and during the course of our visit.

The home provides a pleasant, homely environment for people. It provides sufficient space for people to spend time with care staff or alone. The home is well maintained and subject to ongoing improvements. Since our last visit, a Jacuzzi bath had been installed and the office relocated to the first floor to enable a bedroom to be available on the ground floor should this be more suitable for any future admissions of people to the service.

Leadership and Management

The statement of purpose reflects the service provided and has been reviewed since the last inspection. The service guide has also been reviewed and updated. Policies on the management of service user's money and financial affairs have been reviewed and updated to ensure compliance with the regulation. Incident report forms require further development to evidence de-briefs with people and staff and their opportunity to reflect, review and assess the incident to consider the impact and risk to people.

Improvements to the quality assurance processes provide good oversight of the home and the standards of care provided. At the last inspection, the service provider was issued with a priority action notice to improve the quality of care review and visits to the home by the responsible individual. These have been undertaken and meet the requirements of the regulation.

Care staff are deployed according to people's needs. A review of the arrangements for on-call/out of hours support has taken place to confirm the arrangements should care staff require support in an emergency and the policy updated. Periods of planned or unexpected periods of absence has been considered by the responsible individual as part of the quality of care review to ensure support is available to care staff at all times.

Care staff receive support and training as set out in the service's statement of purpose. The responsible individual is included in the training matrix to confirm and provide oversight of training undertaken and updated to ensure compliance with the regulation.

Areas for improvement and action at, or since, the previous inspection. Achieved

The service provider has not ensured suitable arrangements were in place to establish and maintain a system for monitoring, reviewing and improving the quality of care and support provided by the service.

Regulation 80(1)

The service provider has not made arrangements for analysing the aggregated data on incidents, notifiable incidents, safeguarding matters, whistleblowing, concerns and complaints. On completion of the review of the quality of care and support, the responsible individual must prepare a report to include recommendations for the improvement of the service.

Regulation 80(3)(b)
Regulation 80(4)(b)

The service provider must ensure that at all times a sufficient number of staff are deployed to work at the service.

Regulation 34(1)

The service provider must ensure so far as practicable that persons working at the service do not act as an the agent of an individual.

Regulation 28(4)

The policy and procedure which are required by the regulation to be in place must set out the steps which are to be taken to enable and support people to manage their own money and to protect individuals from financial abuse.

Regulation 28(2)

The responsible individual has not undertaken visits to the home as required by the regulation.

Regulation 73(1)(a)
Regulation 71(1)(b)

Areas where priority action is required

None

Areas where improvement is required

None

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