



Inspection Report on

Taith Cartref

**Gellionnen Road
Clydach
Swansea
SA6 5HQ**

Date Inspection Completed

14/03/2023

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About Taith Cartref

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	13
Language of the service	English
Previous Care Inspectorate Wales inspection	8 September 2021
Does this service provide the Welsh Language active offer?	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

Taith Cartref is a relatively small care home in Clydach, Swansea that provides support to adults who are over 18 years of age with complex mental health support needs. The service is in a rural area with a long driveway set in its own grounds and shares parking with another of the providers services which sits behind Taith Cartref.

People have detailed mental health recovery personal plans in place, and these are written with people to help them set their own goals and timescales. Care workers in Taith Cartref are recruited robustly, feel valued and supported in their roles and receive appropriate training to feel confident in their roles. Taith Cartref is a very homely service that is well-maintained and comfortable for people. Communal areas are welcoming, and bedrooms are personalised to reflect individual personalities.

There is a respected manager and two deputies in post who are visible in the service daily and know the people they support very well. They are valued by the care team and are held in high regard. The Responsible individual (RI) visits the service routinely and speaks with everyone in the service where possible to obtain their feedback about the service. This information as well as other observations made, contributes to improvements noted for the service.

Well-being

People have a voice and are treated with dignity and respect. Personal plans seen, give a very good overview of the person and what is important to them and what they would like to achieve in the future. People are involved in this process as much as possible. Personal plans are a progressive document that develops with the person and their targets and achievements are reviewed routinely to log this. People are encouraged to give their views of the service during RI visits which occur routinely to inform improvements they would like to take place in the service.

People's physical, mental health and emotional wellbeing is promoted. People are supported by a consistent care team who have grown to know them well and can recognise any signs of ill health and seek additional support promptly. Medication is managed well in the service; care staff receive training in medication and competency checks take place before assisting people with their medication needs. People lead active social lives and are often out during the day doing things they enjoy.

People are protected from harm and neglect. Care workers are up to date with safeguarding training and have a good understanding of their roles and responsibilities around safeguarding the people they support. The provider has a safeguarding policy in place which reflects the Wales Safeguarding Procedures. The service is homely and there are health and safety procedures in place to ensure it remains safe for people. There are good infection control procedures in place and the service follow the updated guidance should an infectious disease be transmitted in the service.

People are supported by a management team who have good oversight of the service. There is a manager in post who has been in the service several years and is held in high regard by the staff team. They are supported by two deputies who are also well respected in the service. There are good systems in place to ensure all paperwork and environmental checks are up to date. The provider's RI visit's the service routinely and speaks to all present, when possible, to seek their feedback about their experiences in the service and drive improvements. Regulatory reports are completed as required at appropriate timely intervals.

Care and Support

People are involved as much as possible in the planning of their care to ensure their care needs are met. We looked at two care files and both were similar in layout and easy to navigate. Personal plans are set out on a recovery-based format where people evaluate their current situation and set goals with target dates to develop their skills and independence further. We saw that these are reviewed monthly with individuals and their named keyworker who knows them well. We saw detailed risk assessments are also in place and reviewed routinely. These risk assessments give clear instruction to care workers on how best to support the individual at different times of need. We saw signatures of people on documentation to confirm their presence during these reviews, and to agree with their content.

People are supported to do things that matter to them. People are supported out in the community daily and during the inspection visit, several people were out with support staff. There are two communal lounges in the service, and one is more of a games room with a pool table in place. We saw people relaxing enjoying TV in the other lounge. Personal plans include information on what is important to people, and we saw that activities around this were planned for people such as gardening, music and watching movies. Feedback from relatives about the service was very good, comments included *“the care X receives is tailored to them. Staff go above and beyond to make sure X has a happy and fulfilled life. The support X receives both physically and mentally/ emotionally is excellent.”*

The provider has mechanisms in place to safeguard the people they support. All care workers have received safeguarding training and those spoken with are aware of procedures to follow and their responsibility to report any concerns appropriately. The provider has a safeguarding policy in place which reflects the Wales Safeguarding procedures. People who do not have the capacity to make decisions about their accommodation, care, and support have Deprivation of Liberty Safeguards (DoLS) in place which are reviewed as required. These are notified to care Inspectorate Wales (CIW) as required.

The provider has good systems in place to manage medication and monitor people's health. There is a designated medication room in Taith Cartref where the temperature is monitored to ensure safe storage of medication. The room is locked when unmanned and medication is locked in a medication trolley. We looked at two Medication Administration Records (MAR) and saw these were completed correctly with appropriate signatures in place. We were told that daily counts take place for all medication to minimise the risk of errors. The provider ensures all medication prescribed 'as required' (PRN) medication is accompanied by a detailed information sheet so that care workers can monitor any side effects. There is a consistent care team in Taith Cartref so staff are able to recognise any signs of ill health and seek medical advice promptly when required. Records of appointments with medical professionals were seen in hard copies in care files.

Environment

The provider ensures that individuals' care and support is provided in a location and environment with facilities and equipment that promotes achievement of their personal outcomes. Taith Cartref sits in its own grounds and is set back away from the village a little. There is a large patio area to the front of the building and a large, enclosed garden in front of this which is accessible down a relatively steep ramp. Inside the service there is a very welcoming and homely atmosphere, and the general state of the service is good, with new carpet and flooring throughout since the last inspection. There are two communal lounges in the service and a communal kitchen. Every bedroom is personalised, and all have en-suite facilities. Some of the rooms have kitchen facilities also. We found all communal areas to be welcoming and in good state of repair. The office is located on the ground floor and laundry is underneath the service in the basement and is locked when unmanned.

There are good procedures in place to maintain the environment in Taith Cartref, to mitigate risks to health and safety. We saw a maintenance book which had up to date daily, weekly, and monthly checks of different aspects of the environment including fire control checks, emergency exits and fire systems. We saw that all utilities in the service are serviced as required and saw certificates in place to evidence this, including, Gas, electricity, and Portable appliance Testing (PAT) testing. As Taith Cartref is one of many services of the provider, there is an external contractor in place to carry out maintenance in the service. These are requested by the service manager and once agreed, these works are carried out in order of priority. We saw that since the last inspection, new flooring has been laid in the service. We saw that the outdoor space in Taith Cartref needs some work. There is a lovely patio to the front of the service with outdoor seating, however the garden below is very wintered with a broken old, shed remnants visible. When discussing this we were told that there are plans for the garden area soon and the potential construction of a garden house, this was also documented in the last RI visit report.

There are procedures in place for the management of infection control in the service. The requirements of wearing full Personal Protective Equipment (PPE) are no longer always required in care homes, however, on arrival we showed our negative lateral flow test for Covid-19 and signed the visitors' book. During a previous infection in the service full PPE was worn as required however this outbreak has now finished. The provider has a Covid-19 guidance document in place which reflects the governmental guidelines.

Leadership and Management

There are arrangements in place for the effective oversight of the service through ongoing quality assurance. There is a long-established manager in the service who is supported by two deputies. The management team are held in high regard in the service. The RI of the service visits regularly and produces visit reports following these visits. We saw the last three reports and saw that the RI takes time to speak to all the people supported in the service where possible and to care staff supporting them. As part of these visits, documentation is also looked at and any improvements required are noted. We saw that the service produces bi-annual quality of care reviews and we saw the last two of these. These reports contain a good overview of the service and the people supported and celebrates achievements and notes any areas of improvement identified. We viewed the service's statement of purpose (SOP) and this gives an accurate picture of the service. The provider has policies and procedures in place which are reviewed as required and updated to reflect any changes in legislation.

People are supported by a care team who are recruited appropriately, feel supported and are trained to meet their needs. We looked at two staff files and found all pre-employment, and recruitment checks in place including up to date Disclosure and Barring Service (DBS). We saw that care staff receive routine supervision and annual appraisals as required. And those spoken with told us they feel valued and very supported in their roles, comments included *"I love working at Taith, I feel valued there and it is one of my favourite places to work."* The training matrix was seen and confirmed that nearly all staff are up to date with the providers mandatory training which includes infection control, health and safety and safeguarding. Most staff are also up to date with the service enhanced training units which is more specific to the supported individuals living in the service and includes mental health awareness and personality disorder. Feedback from care staff was very positive with comments including *"I absolutely love working for Taith Care"* and *"Taith is brilliant I enjoy it there."*

The service provider has oversight of financial arrangements and investment in the service. Staffing levels on the day of the inspection appeared appropriate, improvements in staffing have been made since the last inspection with less reliance on agency staff. When required, agency staff are block booked in advance with a consistent staff team who are now very familiar to the service and know people well. People can go out and do things that matter to them. There is investment in the service with improvements having taken place in the environment inside and further improvements planned for the outside space of the service.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
34	staffing levels, at present residents are anxious about going out so are not wanting to go as routinely as before however staffing levels should be in place to accommodate this. Also staff are feeling the pressure especially when there are only minimum in-house staff on duty with agency staff with some not as productive as others.	Achieved
59	Recordings are not being made to evidence sufficient cover is in place to support people's needs, and there is a high dependency on agency use. Improvements are needed to ensure recordings are made appropriately and ensure they are more concise for staff to use.	Achieved

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