



Inspection Report on

Taith Cartref

**Gellionnen Road
Clydach
Swansea
SA6 5HQ**

Date Inspection Completed

28 September 2021

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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	6 June 2019
Does this service provide the Welsh Language active offer?	The service are working towards the 'Active Offer'

Summary

Taith Cartref is a care home for adults with complex mental health needs. Located in Clydach, Swansea, the property is a large, detached three storey building. It is set in its own grounds with parking that it shares with another of the provider's care homes. People are supported by care workers who are trained and supported by a management team who are visible in the service daily. Personal plans are in place that provide care workers with a good oversight of people's needs. However daily recordings of routines need to be improved. People appear settled and comfortable in an environment that is homely but could be improved by further redecoration. There is currently a high reliance on agency staff to support the in-house staff team and action is being taken to resolve this. The Responsible Individual (RI) has good oversight of the service is already aware of the issues raised in this inspection and plans are in place to address these promptly.

Well-being

People are listened to and are treated with dignity and respect. We saw people are involved with the development and review of their personal plans which are written from their own perspective and how best to support them. These are up to date and reflect the current needs of people. Relatives spoken with are complimentary of the service and the level of care and support provided to people.

People's physical, mental health and emotional well-being is promoted. There are good procedures in place, for the recording, storing and auditing of medication in the service. Personal plans indicate how to support people when they display any mental health relapse. The service seeks medical assistance quickly to support people appropriately when required.

People are protected from harm and neglect. All care workers have received safeguarding training and those spoken with are aware of their responsibilities and procedures to report any concerns. Policies and procedures are in place which have been reviewed, this includes the safeguarding policy. We saw Deprivation of Liberty Safeguards (DoLS) are in place for people who do not have the capacity to make decisions about their accommodation, care and support.

People live in a home that is safe and homely. We saw there are suitable security arrangements in place for entering and leaving the building. Routine maintenance and health and safety checks take place to maintain the premises to ensure people and staff are safe. The service is homely and comfortable and bedrooms are personalised to give people a sense of belonging.

People are supported to maintain relationships. The service is following the current guidelines to promote visiting and appropriate infection control measures are in place. Relatives spoken with are complimentary of the level of communication with their loved ones in the service and its promotion by the care team.

Care and Support

People are involved in the planning of their care to ensure they are provided with the quality of care and support they need. Relatives we spoke with are very happy with the care provided to their loved ones and comments included: *“Their expertise in being able to provide the care and support that X needs is exceptional”* and *“I’m happy with everything there to be honest”*. We looked at two care files and saw that people were included in the development of their personal plans and were involved in regular review and progress meetings. Personal plans in place are specific to people’s particular needs and written from their perspective. Risk assessments correspond with these plans and provide care staff with details on how to deliver care appropriately depending on how individuals are responding. We saw recordings are required for each aspect of the personal plan and for timely observations. There were multiple gaps of records. We could see people had received the care required. However, this was not always found on the relevant record and was seen elsewhere in the recordings, (e.g. nutrition intake was logged within the well-being care plan record and nothing logged in the nutrition record). Improvements are required to ensure people’s daily records are completed consistently and accurately.

There are safe systems in place for the management of medication and to maintain people’s health. We saw medication is stored securely in trolleys within a designated clean, locked clinical room. We saw records of daily temperature checks for the room and refrigerator to ensure safe storage of medication. We saw Medication Administration Records (MAR) are completed appropriately with signatures of care staff present. There is information and records for medication used on an as needed basis (PRN) for care staff to understand possible side effects and actions to take when observed. The service has a high use of agency staff at present. However, those attending the service have been working in Taith Cartref for some time. Care workers on the whole know people well and are able to identify any health deterioration quickly and to seek medical support when needed. Details of medical appointments are clearly documented in care files with any subsequent action required noted.

The service promotes hygienic practices and manages the risk of cross infection. On entry we were asked to show our negative lateral flow test result and our temperature was taken to minimise any risk entering the premises. We saw this is the case for all visitors to the service. We saw all care workers wear Personal Protective Equipment (PPE) appropriately and the manager told us there was a good supply of this. Communal areas and bathrooms are kept clean and domestic staff were seen busy cleaning during the inspection. The home is part of multiple weekly testing to minimise the risk of Covid-19 to people and there is an updated guidance document in place reflecting current government guidelines.

Environment

The provider ensures that individual's care and support is provided in a location and environment with facilities and equipment that promotes achievement of their personal outcomes. Taith Cartref shares its location with another of the providers' services. However, has its own private garden and patio. There is a shared driveway and parking area. The Garden is down a steep path and is surrounded by mature trees and plants. There are plans in place to improve the area and replacement of the summer house. Inside the property there has been some refurbishment work carried out on the first floor. New carpet has been laid and walls and doors have all been painted to a high standard. The manager told us the ground floor was also due to be refurbished and the plans for this had recently been agreed. All bedrooms in the service have their own en-suite facilities.

The service also has flats for promoting and developing independence, where people also have access to a kitchen and dining area and have their own laundry facilities. We saw the laundry room is underneath the building and all machines were in working order. To the rear of this room we also saw a large stock of PPE. We looked in one flat and two bedrooms and saw that they are spacious and personalised. Communal areas seen were clean, homely and welcoming.

The provider has procedures in place to identify and mitigate risks to people's health and safety. The service has environmental checks and audits that take place routinely to ensure all environmental aspects are in good working order. This includes checking fire alarms, window restrictors, door locks etc. These checks ensure people remain safe within the service and the service is compliant with environmental and fire safety regulations. We saw the certificates for gas, electricity and fire safety in the service are all up to date. The provider has a contract with an external maintenance service provider who are responsible for carrying out any repairs and works on the properties.

Leadership and Management

People are supported by a dedicated care team> However, improvements are needed to minimise the use of agency staff and improve continuity for people using the in-house team. We looked at two staff personnel files and saw appropriate pre-employment and recruitment checks take place with up to date Disclosure and Barring Service (DBS) checks on file. We saw the training matrix and found almost all in-house care staff are up to date in all the mandatory training requirements of the provider. This includes safeguarding, first aid, food safety and others. We saw staff receive routine supervision and an annual appraisal. Care workers spoken to said that they did not always feel valued in the service as the high level use of agency staff added to the daily pressures of the job.

The provider has arrangements in place for the effective oversight of the service through ongoing quality assurance. We saw the recent bi-annual quality of care report. This report includes positive stories about people supported in the service, photos of events that have taken place, feedback from people using the service, relatives and care workers. As well as plans for the future and recommendations for improving the service. Quarterly visit reports completed by the RI have now resumed after a period of virtual visits due to the pandemic. We saw these reports include interactions with people and staff as well as oversight of the environment and administration at the service. The service's Statement of Purpose (SOP) has been reviewed and accurately reflects the service. Policies and procedures have also been reviewed and updated as required to include updated guidance from Welsh Government for care homes.

The service provider has oversight of financial arrangements and invests in the service. We saw the first floor of the service has recently been refurbished. However, on the ground floor, the carpets and door frames looked worn and tired. The manager told us the refurbishment for the ground floor had been agreed and would commence in the next few months. Overall the service is well maintained internally and there is good oversight to keep the home in a good state of repair. Care workers told us staffing levels were sometimes low however this was due to sickness and not pre-planned. Staffing levels on the scheduled rota's also appeared low on some days. The manager told us they are recruiting all the time. However, people coming forward looking for work is limited at present. All care staff spoken with said that they feel the service would benefit from more staff and people would be able to go out more often. The manager agreed and is hopeful that vacancies will be filled soon.

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

Areas for improvement and action at, or since, the previous inspection. Not Achieved

None	
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Areas where priority action is required

None	
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Areas where improvement is required

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.	
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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.	
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The area(s) identified above require improvement but we have not issued a priority action notice on this occasion. This is because there is no immediate or significant risk for people using the service. We expect the registered provider to take action to rectify this and we will follow this up at the next inspection.

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