



## Inspection Report on

**Cartref Croeso Ltd**

**Cartref Croeso Ltd  
Pencader  
SA39 9HL**

## **Date Inspection Completed**

20/02/2023

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## About Cartref Croeso Ltd

Type of care provided.	Care Home Service Adults Without Nursing
Registered Provider	Cartref Croeso Ltd
Registered places	15
Language of the service	Both
Previous Care Inspectorate Wales inspection	[20 January 2022 <a href="#">Manual Insert</a> ]
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People told us they are happy and well cared for at Cartref Croeso. There is a strong team who work hard to create a family atmosphere and who promote wellbeing goals with a positive and friendly attitude. A combination of electronic and paper based personal plans are in place which are detailed. However, further work is needed to ensure people can contribute to the development and reviewing of their care. People are encouraged to make daily choices and can undertake activities they enjoy with a natural flow taking place in and around the home. Staff enable people to do what is important to them and promote independence. Mealtimes are a pleasant social time, and the meals appear of a high standard. Whilst medication is administered and recorded effectively, storage of fridge medication requires improvement. A good staffing ratio enables people to receive care and support in a timely manner. Care staff offer support in a friendly person-centred way and understand individual needs and preferences.

The environment is homely, clean, and welcoming. Maintenance checks ensure the environment, it's facilities and equipment remain safe to use. All areas, including outdoor facilities are accessible. Confidential information is stored safely and access to the service is secure. Care staff receive core and specialist training. Policies and procedures are in place. Pre-employment checks ensure staff are suitable to work with vulnerable people. Staff feedback is overwhelmingly positive about their roles and support from the management team. The Responsible Individual (RI) has good oversight of the service to ensure practice remains of a good standard.



## Well-being

People are treated with dignity and respect. Staff are courteous and kind and know people well. We observed a good rapport between staff and people on the day of inspection. People have good relationships with those they live with and the staff who support them. The physical environment supports people's well-being. The service is a pleasant place to live; bedrooms are nicely decorated and reflect personal tastes. The environment offers people access to a range of communal areas as well as the privacy of their own bedrooms.

The service provides the "Active Offer" with a high proportion of staff communicating in Welsh. We saw people's language preferences recorded in care documentation. We overheard singing, conversations, and jokes in Welsh. Staff can offer reassurance in Welsh, which we observed to noticeably calm one person. Literature and care documentation could be made available in Welsh on request. The home celebrates many Welsh cultural events and ensures access to Welsh TV/Radio programmes as requested.

Personal preferences are understood and recognised by staff. The care and support reflects people's individual interests and routines. People are involved in the initial development of their care plans. Whilst care reviews do take place, these do not evidence outcomes, nor consistently reflect changes and people's involvement in the reviews. Mealtimes are a positive social experience shared around a well-presented dining table. Some people choose to eat their meals in their own room. The RI engages with people during visits and people's views are sought as part of the quality assurance process.

The service considers people's physical and mental health. Routine appointments and timely referrals ensure people remain as well as they can be. Sufficient numbers of staff support people to receive the right care at the right time. We spoke with visiting health professionals whom praised the staff, their attention to detail and the timeliness of referrals.

People do what is important to them with planned social activities and activities which take place naturally as part of their daily routine. On the day of the inspection people took part in an impromptu sing along to modern music, which was full of fun and movement. An afternoon birthday tea was planned for later in the week, with the cake design reflecting the person's hobbies. Other birthday celebrations included a trip to a rock tribute band concert. Chair aerobics, pet therapy, Jenga, bowls and gardening are all regular activities which people can choose to participate.

Systems protect people from abuse and harm. A range of up-to-date policies outline and reinforce positive care practices. Care staff receive safeguarding training and understand their responsibility to report concerns. The recruitment process supports safe staff recruitment. Ongoing training opportunities ensure staff are sufficiently skilled to carry out their duties. People are safe from unauthorised visitors entering the building, as visitors

must ring the front doorbell before gaining entry and record their visits in the visitor's book when entering and leaving.

## Care and Support

People receive positive care and support. We observed care staff engaging with people in a kind and friendly manner. Some staff have worked at the service for several years and spoke about having developed positive relationships with people living at the service. The importance of this was reinforced by visitors we spoke with who told us, "*The same carers, really helps that continuity.*" Relatives say they are informed and kept up to date about their loved one. Care staff understand the importance of individual routines as people told us they decide how and where they spend their day. A person's dog is now living at the service, and is seen as a welcome addition by others living at the service, "*love the dog, we used to have them on the farm, he makes me happy.*" We observe people interacting well with the dog, as well as the person taking the dog out for walks as and when required. Visiting arrangements are now reverted to pre pandemic arrangements. Staffing rota's show sufficient care workers are available to provide the right level of care and support. People we spoke with told us they feel comfortable and happy at the service. Comments include "*can't fault them*" and, "*I am very happy.*"

The service completes personal plans and daily notes are updated in real time electronically. Plans detail people's preferences, interests, and routines as well as details on each person's physical and mental health needs and offers guidance to staff on how to provide support. Whilst reviews are taking place, they are not detailed, nor do they evidence people's involvement. Whilst there is no immediate impact upon people this matter is an area for improvement and will be followed up at the next inspection.

Secure arrangements are in place for storing, ordering, and administering medication. Medication administration record (MAR) charts contain all required information and are completed correctly. The service told us it has a good relationship with health professionals and pharmacists. We saw evidence staff receive training on the administration of medication to ensure they remain sufficiently skilled. The completion of routine medication audits ensures practice remains safe and effective. Work is required to ensure best practice regarding storage in the medication fridge. There is no immediate impact upon people, however this matter is an area for improvement and will be followed up at the next inspection.

Mealtimes are a positive experience. The home has a five-star food hygiene rating (the highest rating). Menus reflect people's preferences, and alternatives are always available. Refreshments and snacks can be accessed as and when required throughout the day. One person told us "*The food is fantastic*". We observed people enjoyed a lunch of spaghetti bolognaise, which looked and smelt appetising.

## Environment

People are cared for and supported in an environment, which ensures their individual needs are met and their personal outcomes are achieved. They can safely access areas of the grounds to walk and exercise or just enjoy some outdoor space. People who wish are involved with gardening with access to a polytunnel. The service also keeps chickens in accordance with current guidance. A separate building styled as a “pub” is also available.

The manager and staff ensure the environment is suited to individual’s preferences and needs where possible. Bedrooms are personalised with people’s furniture and items from their homes if they wish. The home is decorated to a high standard, with a homely feel. Staff take pride in their surroundings, and take care to ensure it is well presented, clean with no odours. The lift ensures people with mobility concerns can access all areas.

Audits and a programme of periodic testing of equipment shows maintenance checks are carried out as required. We saw records of safety checks, electrical installation and lifting equipment are completed and within the recommended dates. The manager and housekeeper are completing training around legionella disease, and the recording of safe water temperatures. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002

A fire service inspection is scheduled for March. During our inspection we noted fire alarm test records are completed weekly and fire drill practises take place. All staff have completed fire training as required. Personal emergency evacuation plans (PEEPs) are completed and available to staff as required.



## Leadership and Management

A motivated and visible leadership and management team supports people and staff. There is strong oversight of the service from the RI. All staff we spoke with tell us the manager is “*excellent*” and “*so supportive*”, and approachable to support their needs. This results in high levels of morale and a staff team who genuinely appear to enjoy their jobs. Feedback from staff included: “*I love it*”, “*it’s amazing, great support*” and comparing to other places “*much better so kind, supportive.*”

Arrangements for governance and quality monitoring allow the service to identify areas for improvement and operate effectively. The RI visits regularly, engages with people and staff to inform improvements. The service produces a quality-of-care report on a six-monthly basis, which highlights the service’s strengths and areas for development. CIW have shared a template to support future completion. Statutory notifications relating to the smooth running of the service are not completed. This is being addressed to ensure correct access, whilst there is no immediate impact upon people living at the service it is an area for improvement which will be followed up at the next inspection.

People have information available to them. The statement of purpose is up to date and accurate. Staffing numbers are as stated in the statement of purpose, supporting a high staff to people ratio. The document is available in Welsh. The model of care documented accurately reflects the approach being followed during the inspection. Currently this document duals as a service user guide. Work is being completed towards creating a separate service user guide.

The provider ensures there are sufficient knowledgeable, competent, and skilled care workers to provide appropriate support for people to achieve their personal outcomes. Staff receive an induction in line with the Social Care Wales induction framework. Ongoing training is provided as required such as, Manual Handling, Food Hygiene, and Infection Prevention and Control. In addition to this staff receive face-to-face training, the service’s training matrix corroborated this. Regular staff meetings give care workers the opportunity to discuss their work and to keep up to date with developments in the service. Regular supervision happens, and steps are underway to make these discussions more in-depth. There are up to date and regularly reviewed policies and procedures in place to support staff. We also saw staff following appropriate infection, prevention and control measures, personal protective equipment is provided and worn as required.



### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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58	Medication is not stored appropriately free from risk of contamination.	New
60	no reg 60 s since Jan 22 and manager not on system to complete	New
16	Detailed review information as to outcomes for people is not evidenced , nor peoples involvement in their reviews.	New
35	The provider has not shown due care when completing the recruitment process , to evidence satisfactory references , ID and reasons to employ.	Achieved

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