



## Inspection Report on

**Croft House**

**89 Queen Victoria Road  
Llanelli  
SA15 2TR**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

## **Date Inspection Completed**

21/11/2023

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## About Croft House

|   |   |
|---|---|
| Type of care provided                                 | Care Home Service<br>Adults Without Nursing   |
| Registered Provider                                   | M&D Care Operations Ltd   |
| Registered places                                     | 12  |
| Language of the service                               | Both  |
| Previous Care Inspectorate Wales inspection           | <a href="#">21 November 2022</a>  |
| Does this service promote Welsh language and culture? | The service provides an 'Active Offer' of the Welsh language and is a bilingual service, demonstrating a significant effort to promoting the use of the Welsh language and culture. |

### Summary

People are happy at Croft House. The staff team promote a relaxed atmosphere throughout the service which helps people and visitors feel at ease. People are encouraged to make their own decisions in how they spend their time.

All employees demonstrate a good knowledge of the people they support. The enthusiastic staff team want to make a positive difference to people's lives and ensure people are invited to be fully involved in all discussions about their support. Care workers say they are well-supported by their managers and receive enough training that is relevant to their roles. Good communication channels are evident, with robust monitoring of the quality of care people receive.

### Well-being

People at Croft House have as much control over their day-to-day lives as they wish and know what opportunities are available to them. Care workers invite people to become involved in their support arrangements. Each person meets with their keyworker every month to make plans for their social lives and to discuss any anxieties they may have.

Personal plans contain personal preferences and backgrounds of the people they describe. The manager arranges regular house meetings for people to discuss any issues they want to raise. They also give people a copy of the service user guide when they arrive; this provides details of what they may expect as well as details of the complaints process should they need to use it. One person told us, *"I know exactly who to talk to if I have a problem."* People have access to independent advocacy services where they want support in issues that affect them.

People are relaxed, comfortable and know what opportunities are available to them. They do things that make them happy, such as personalise their surroundings in line with their interests and hobbies. Each person is as active as they wish to be. Care workers have good relationships with people and work alongside them in positive ways, with good-humoured conversations. Care workers are supportive and engage with people in positive ways, to remain positive and healthy. People say they feel safe, and employees protect their privacy and personal information at all times. Care workers have been through the provider's thorough recruitment process. Senior staff oversee care workers to ensure they are meeting people's needs as they should. All care workers receive support and training and they may access policies and procedures to understand their responsibility to protect the vulnerable people they support.

The home provides an 'Active Offer' of the Welsh language and promotes the use of the Welsh language and culture. There are several staff members who speak Welsh, and the manager recently completed an initial assessment meeting in Welsh at the person's request. The manager is a good champion of Welsh culture and is arranging for the home's statement of purpose and written guide to be available bilingually, so people will not have to ask for them.

## Care and Support

Care records describe how the staff team enable people to live their lives as they wish and be as independent as they can. Senior staff carry out initial assessments before people

move into their flat and use a range of information to ensure they can meet people's needs. This is an ongoing process, as people are encouraged to become more independent and move on to more independent lifestyles. One-page profiles describe what is important to people. Personal plans clearly describe each person's support needs. Assessments of physical and mental health and up-to-date risk assessments help to maintain people's independence as much as possible. Keyworkers and senior staff review care records every month, or more frequently, whenever support needs change, so they remain up to date.

People do things that matter to them and make them happy. Care workers are motivated and focused on what is important to each person. Care workers encourage people to make choices and decisions about how they spend their time. Plans are made each week but can adapt as people's preferences change. The staff team encourage each person to shop and cook their own meals, but people can also take advantage of staff support when they prefer. People also go shopping and visit local places of interest, watch the local rugby, go swimming, dog-walking and visit a local club for people with mental health issues. A small group went bowling during our visit. One person said, *"I go where I want when I want. I like the town and can use the car if I need to."*

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Care workers are knowledgeable about safeguarding and are aware of the whistleblowing procedure. They are confident to use it if the need arises and confirm they feel comfortable to talk to the manager or responsible individual (RI). They would also contact external agencies such as the local safeguarding office if they thought they needed to.

## Environment

Overall, people receive support in a suitable environment. People say they feel comfortable and happy. The building is easy to navigate. People live in their own flats and each person can choose to socialise with friends in a communal lounge or kitchen. Flats are spacious

and personalised to reflect peoples' tastes and interests, with items such as ornaments, soft furnishings and photos. Each flat, together with all communal areas, is safe, warm and clean. One person showed us their room and said, *"It's all here, Nice, isn't it."*

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry. Each person records their visit in the visitor's book when entering and leaving. Peoples' personal care records are stored electronically and are password-protected, so are only available to care workers and healthcare professionals who are authorised to view them. Other personal and confidential information that is not available electronically is stored securely in offices.

The provider has policies and procedures to manage safety and the risk of infection. The manager completes regular audits of the environment. Fire exits are free of obstructions and there are clear instructions displayed in the home on what to do in the event of a fire.

## **Leadership and Management**

Overall, the provider has a clear vision of the support it provides, and a positive regard to each person receiving support. The management team oversees the support people receive and say they are well-supported by colleagues within the organisation. Monthly audits monitor all aspects of people's care, including medication, infection control measures

and support plans. Any issues that arise are resolved promptly. People know how to make a complaint if they need to and are confident the provider would listen to them if they did.

Regular staff meetings give care workers the opportunity to discuss their work and to keep up to date with developments in the service. The management team has established a clear system for all employees to discuss any issues they wish to raise in three-monthly supervision meetings. People and their relatives and all employees complete surveys to comment on the quality of support they receive. All findings are summarised in a six-monthly quality of care report, which identifies all planned improvements for the home.

The provider generally ensures there are enough knowledgeable and skilled care workers to provide the right support for people. A core staff team know people well and are familiar to them. Pre-employment checks take place before new employees start work: these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction program links to individual learning outcomes and the 'All Wales Induction Framework for Health and Social Care.' All care workers are up to date with their essential training. This includes a range of specific training relevant to the people they support. For example, positive behaviour support and autism awareness.

### 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 |
|------------|---------|--------|
|------------|---------|--------|

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



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