



Inspection Report on

Cartref Celtiadd

Swansea

Date Inspection Completed

28/08/2024

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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 July 2023
Does this service promote Welsh language and culture?	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 receive care from committed care staff who treat people with kindness and understanding. Care staff levels are good and ensure that people do not wait for the care they need. Care documentation outlines what is important to people and how best to support them. There are risk assessments in place where required and all documents are kept under review. Medication processes are safe and people have access to health and social care professionals when needed. People are encouraged to do things they enjoy and maintain relationships with friends and family.

Care staff attend training appropriate to their roles and feel well equipped to do their jobs. Care staff enjoy working at the service and feel well supported by the management team. The Responsible Individual (RI) visits the service in line with regulatory requirements and has good oversight of the service. There are policies and procedures in place for the running of the service and regular quality assurance monitoring takes place.

People live in a safe and suitable home which has recently had the internal decoration and the outside garden area updated. People have their own bedrooms which are warm, clean and comfortable. Provider assessments have improved and are completed as needed.

Well-being

People and their relatives are happy with the care and support provided. There is good information available for staff to understand how to best meet people's care and support needs. People told us they get on well with staff. A relative commented "*The staff are good at what they do*" and "*Management always keep us updated.*" Records show people are offered choices to make everyday decisions. The RI regularly speaks with people who live at the service and their families about what is important and how to best support them. Care documentation outlines people's needs and guides staff on how these should be met. Documents are reviewed to ensure they are accurate and referrals are made to professionals when required.

People are protected from abuse and harm. The service has an appropriate safeguarding policy in place and staff receive training in the safeguarding of adults. The Service Manager has a good understanding of the safeguarding requirements and understands when a safeguarding referral needs to be made to the Local Authority.

People get the right care and support. Records show that timely provider assessments have improved, these are completed and referrals are made to a variety of healthcare professionals such as psychiatrists and physiotherapists. This is confirmed by comments from visiting professionals who told us they are satisfied with the care at the service.

People can do the things that matter to them when they want to do them. There are a range of activities available which are meaningful to people. During our visit we observed care workers supporting people to go out on activities. Relatives told us their family member is encouraged to stay active and to do as much as they can for themselves.

People live in suitable accommodation, which supports and encourages their well-being. People's bedrooms contain personalised items of their choice and are suitably furnished. They have facilities which encourage independence. The property has recently updated the décor and external maintenance. Safety checks are completed regularly.

At present, there is no demand to provide the service in Welsh. However, should this requirement change in the future, the provider would make the necessary arrangements to deliver as much of the support required in Welsh where possible.

Care and Support

People are supported in line with personal plans and risk assessments that reflect their needs. A sample of personal plans viewed contain detailed information regarding personal interests, likes and dislikes. We saw personal plans are developed following discussions with people and their family. Personal plans and risk assessments are regularly reviewed in consultation with people wherever possible.

People can do the things that matter to them when they want to do them. We saw there are a range of activities available which are meaningful to people. There was photographic evidence and written documentation as well as observations of people undertaking activities that matter to them. People told us they enjoy taking part in a variety of activities. Records show people regularly access local community facilities such as clubs, bowling, 'Bikability' and local events.

People are supported to maintain a healthy diet and fluid intake. Records show that people's diet and fluid intake is regularly monitored and meet the recommended levels. Menus are varied and healthy choices are clearly offered. People told us they enjoy the food.

People are protected from abuse and neglect. Policies and procedures have been reviewed to make sure they are relevant and up to date. Care workers are aware these are in place to guide them and are supported by management. Staff complete safeguarding training relevant to their role.

The service has safe systems in place for medicines management. There is an appropriate medication policy and procedure in place with regular audits completed by senior staff. Medication administration records (MAR) are accurate. We saw medication is kept in a secure cabinet in a locked room.

Policy, procedure and application of hygienic practices are in place to reduce risks of infection. Staff demonstrate an understanding of infection control and the use of personal protective equipment (PPE). Staff wear appropriate PPE and follow correct procedures when needed. The home is clean and uncluttered. Staff maintain appropriate standards of hygiene and cleaning schedules are in place with oversight from the manager. Oversight and auditing of infection control measures are in place. The home has sufficient stocks of PPE.

Environment

People live in a home that is suitable to meet their needs. Cartref Celtiadd is located in a residential area of Clydach that benefits from good transport links and local amenities. The home is set over two floors. There is suitable flooring and space that ensures that people can move around independently without restrictions. However, we discussed with the manager the need to ensure hallway carpet is secured appropriately in doorways as these had been loosened when the fire doors were fitted. There is sufficient communal space for people to enjoy social time together including a well-maintained, recently updated outdoor space. The home is warm, welcoming and clean. All bathrooms and toilets are clean and in good working order and have suitable equipment available. People have their own bedrooms which are clean, spacious and decorated to individual taste. We saw that bedrooms contain people's personal belongings and have been made as homely and comfortable as possible. Care staff respect people's bedrooms as their personal space and opportunity for privacy.

People are supported with laundry to promote independence and facilities are appropriate and well organised. All laundry equipment is in working order. There is an organised storage area for household waste. The storage of substances which have the potential to cause harm, such as chemicals used for cleaning are stored safely.

People can be assured they live in a safe environment. On arrival at the service, we found the main entrance secure and our identification was checked before we were permitted entry. We were asked to sign the visitors book which indicates that visitors to the service are monitored closely. We completed a tour of the building and found evidence of appropriate cleaning systems in place and hazards have been reduced. Window restrictors are in place. The building is well maintained and environmental safety checks including gas and electricity testing take place within legal time limits. There is a fire risk assessment in place and all residents have a Personal Emergency Evacuation Plan (PEEP) which guides care staff on how to evacuate people in the event of an emergency. Fire alarms are tested weekly and fire drills take place regularly. Fire doors have recently been updated to ensure these are fit for purpose.

Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service. Measures for the oversight of the service are in place, such as systems for care planning, monitoring, and reviewing to enable people to achieve their personal outcomes. The service is provided in line with the objectives of the Statement of Purpose, which is regularly reviewed. We saw policies and procedures are in place and reviewed regularly.

People can be assured the service provider and the management team monitor the quality of the service they provide to a high standard. The RI visits the home regularly and meets with people and staff. The latest quality monitoring report shows people's feedback. Recommendations for improvements are included and implemented effectively. The RI has good oversight of the service and the manager conducts quality assurance monitoring to ensure a high standard of quality care is delivered.

The service provider has extensive oversight of the financial arrangements and investment in the service. The RI assured us the service is financially sustainable to support people to be safe and achieve their personal outcomes. The RI told us of investment such as *"Since acquisition, there has been significant investment in Cartref Celtiadd with work already complete on fire doors, fire panel, emergency lighting and jacuzzi bath."*

There are enough staff on duty to safely support and care for people as determined by the Statement of Purpose. There is a core staff group in place which is stable with a mixture of experienced and new staff available, and this was seen during our inspection. People living at the service told us *"I like living here, the staff are good."*

Supporting and developing staff with supervision, appraisal and training is sufficient. However, we discussed with the manager the need to ensure that there is a process for oversight of staff supervision.

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.

Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this	N/A

	inspection	
18	Some people did not have provider assessments. Ensure all people have provider assessments completed within 7 days of the commencement of the provision of care and support.	Achieved

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