



Inspection Report on

Cartref Annwyl Fan Care Home

**Cartref Annwyl-fan
Colonel Road
Betws
Ammanford
SA18 2HW**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

29/08/2024

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About Cartref Annwyl Fan Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Cartref Annwyl (Ammanford) Limited
Registered places	70
Language of the service	Both
Previous Care Inspectorate Wales inspection	17/02/2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

The health and wellbeing of people are important to those working in the service. Care and support records give a sense of the person, their needs and what is important to them. People and their families speak very positively about Cartref Annwyl Fan.

People receive a service delivered through a respected manager and dedicated staff team. The manager is well supported by the organisation's senior management team and the Responsible Individual (RI). Through a range of quality audit tools and their Regulation 73 visits, the RI has good oversight of the service.

The service provides a safe environment for people to live and is well maintained. Communal living areas are welcoming and the gardens offer people and their visitors a range of safe places to socialise. Some communal toilets and corridors could be improved to better meet the needs of people who have visual difficulties. There is an ongoing refurbishment programme in place.

Well-being

People have their choices and views recognised. People can personalise their bedrooms, are able to choose their meal preferences and can get up and retire when it suits them. The individual and /or their representative are involved in the planning and reviews of their care. Their views about the service are actively sought by the RI through their Regulation 73 visits and through questionnaires used to inform the six monthly Quality of Care reports. People are able to converse in Welsh if this is their preferred language, however, bilingual information should also be readily available.

People are safe from the risk of harm and abuse. Care workers are knowledgeable, well trained and care about the individuals living in the service. They also have a good understanding of people's needs and how best to meet these. Care records provide information about the requirements and preferences of people. The service liaises with health and social care professionals to make sure people remain as healthy as possible. People and / or their representatives are able to raise concerns about the service should they have the need to do so. There are good recruitment, supervision and training procedures in place to ensure staff have the right skills, knowledge and approach to care. Staff respect the manager who is in turn well supported by their line manager and the RI. Care staff are clear on their responsibilities to protect people and are supported by regularly reviewed and updated policies.

In the main people achieve their well-being because of the environment. Whilst internal decoration supports people to orientate themselves around the corridors or to their bedrooms, contrasting handrails could better support people, particularly who have difficulties with their sight. The gardens offer safe places for people to relax, meet visitors and socialise.

Care and Support

People receive the care and support they require to meet their needs. Care records are detailed and reviewed regularly. However, additional information about the person, their interests and background are required to better inform care workers. People and /or their representatives are involved in the planning and reviewing of their care. Health and social care professionals and services are involved with people when required. This is well documented in care records. Whilst people can enjoy activities, their interests and hobbies and the outcomes of the activities for the individual need to be better recorded.

People and their relatives feel they receive the care they need and speak positively about the staff; they told us; *“the carers are lovely, they are very kind”, “the staff are helpful, respectful and look after my mother well”* and *“I don’t have any concerns about the care staff, nothing is too much trouble for them.”*

Staff are knowledgeable and speak positively about supporting people living in Cartref Annwyl Fan. They told us *“I really enjoy looking after the residents, they are like family”, “It’s great working here, the residents are lovely”* and *“I take great pride in my role as a carer, the residents are at the heart of what I do”*. A range of communication techniques are used to talk with people who have more complex needs. A number of the staff team communicate in Welsh with people, however, bilingual information is not always readily available for people to read. During a number of observations throughout the period of the inspection care staff interacted very kindly with people.

People are able to choose when to get up and retire, there are always a range of meal options readily available. People told us *“I like a bit of a lie-in sometimes”, “the food is very good. I know I can choose different meals if I want”* and *“It’s a lovely home, I enjoyed my lunch, it was very tasty”*

People feel safe. During discussions people told us they feel safe living in Cartref Annwyl Fan and are able to raise concerns if they need to. They told us *“I speak to the carers if there is a problem”* and *“I’ll let [manager] know if I need to”*. Relatives feel able to raise concerns and believe these would be addressed by the manager. There are details of the organisation’s complaints procedure provided to people when they move into the service and displayed in communal areas.

Environment

The risks to people's health and safety are minimised. There are a range of comprehensive maintenance checks and audits undertaken. Testing and servicing of firefighting and moving and handling equipment is completed within the required timescales. Personal Emergency Evacuation Plans (PEEPS) are individualised and readily available.

Communal areas and emergency exits are uncluttered and free from hazards. Substances harmful to health (COSHH) are stored safely. Keypad entry systems are used where considered necessary and all visitors are required to sign in and out of the service. Emergency pull cords and alarms are accessible for people to use and are responded to in a timely manner. Housekeeping staff work hard to ensure the service is kept clean and odour free.

In the main people are supported to achieve their personal outcomes. Communal gardens are well maintained and safe for people to use and enjoy including a Dementia friendly garden. There are a range of raised beds, plants, flower displays and shrubs located around the service. Communal bathrooms are clean and pleasant for people to use. However, some communal toilets can be improved upon by giving thought to providing colour contrasting furniture to support people with visual difficulties. Bedroom corridors have pictures, art works and displays for people to enjoy and orientate themselves around these areas. Consideration could also be given to having contrasting handrails in the corridors to better support people to safely mobilise around these areas. There are some bilingual displays and signage used within the service.

Bedrooms are personalised according to people's choices including pictures, photos, ornaments and items of furniture. Communal lounges and dining rooms are well decorated, furnished and welcoming for people to use and socialise in. There is an ongoing refurbishment programme in place.

Leadership and Management

There are good governance arrangements in place. The RI undertakes Regulation 73 visits to the service within the required timescales. Care Inspectorate Wales (CIW) have received copies of reports which demonstrate people, their representatives and staff are spoken with as part of the RI's visits to the service. Staff and people living in the service confirmed this with us. There are a range of quality monitoring tools and audits undertaken by the management team. Actions required from these audits are acted upon and reviewed regularly.

The manager is well respected by the staff teams, their senior manager and the organisation. Staff told us the manager is approachable, helpful and caring. *"[Manager] has an open door policy, I know I can always speak to her if I need to and she allows the time to discuss any issues or concerns"* and *"[manager] is really kind and helpful"*.

People and their families speak highly of the management and staff including, *"this is a really good home, the staff are great, as is the manager. I know I could speak to any of them if I had a concern"* and *"[manager] and all the staff work hard to ensure all the residents are really well cared for."*

There are detailed recruitment and selection processes in place. Staff records hold all the required checks and clearances which are in place prior to a staff member commencing employment. Staff receive an induction, have regular supervision and an annual appraisal. All staff attend a range of mandatory and specialist training to enable them to support people living with sometimes complex needs. Care workers told us about the range of training they have received and the benefits it brings to them and the people they support. The service's training matrix and care records corroborates this. All staff spoken with demonstrate a clear understanding of their role in the protection of individuals.

The service operates in line with its Statement of Purpose and on-line notifications are submitted to CIW in line with requirements.

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	
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