



## Inspection Report on

**Cartref Croeso Ltd**

**Cartref Croeso Ltd  
Pencader  
SA39 9HL**

## **Date Inspection Completed**

01/05/2024

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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 February 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 living at Cartref Croeso receive high-quality, person-centred care from a well established team of caring, experienced staff. The staff are led by a committed and conscientious manager who is supported by an experienced Responsible Individual (RI). Personal plans and reviews are detailed and created in collaboration with people and their representatives. People have control over their day to day lives and their voices are listened to. There is a relaxed and calm environment which supports people's well-being.

The home is maintained to a high standard and systems are in place to ensure the building and equipment are kept safe for people living, working and visiting the home. Staff are safely recruited and receive ongoing support and training to undertake their role. Policies are available to staff and individuals and are regularly reviewed. Quality of care review reports are completed by the RI and identify areas of strength and any areas where improvements can be made.

## Well-being

People's rights are upheld and they have control over their day to day lives. People told us they are respected and supported to make decisions by care staff who are kind and helpful. People get up/go to bed when they want, stay in their own room or spend time in communal areas and choose what they eat throughout the day. Meals are prepared and cooked with fresh ingredients and if people do not like what is on the daily menu they are offered an alternative. We saw people enjoying a variety of food for breakfast including fresh fruit. One person told us, *"I fancied some mushrooms, tomatoes, and eggs the other day and they cooked it for me. The food is fantastic."* Another person said *"X' gets tea and a sandwich in the middle of the night, it's the best place around"*.

Individual needs are recognised and people are supported to do things that matter to them. One person was able to bring her pet dog to live with her following a risk assessment and consultation with everyone living at Cartref Croeso. Activities are provided according to people's preferences and needs. We saw people knitting, watching television, playing chess, singing, chatting, having their nails painted and out walking in the grounds during our visit. People told us that they enjoy trips out from time to time, to coffee shops and recently to a Pantomime. People are encouraged to voice their views and wishes. Meetings are held, questionnaires given out and people participate in the reviews of personal plans.

The importance of maintaining relationships with friends and family members is recognised and we saw people visiting throughout the day. One person told us they were awake early one day and decided to visit at 6.30 am and were welcomed by the staff. Another person told us how staff support their relative to video call them on a tablet when they are unable to visit in person. Visitors can spend time in communal areas or people's rooms if they prefer more privacy.

Systems are in place to keep people safe and protected from harm and abuse. Staff are trained in safeguarding procedures and know how to report any concerns they may have. A robust recruitment system is in place to ensure care staff have the necessary skills and experience to undertake their role. Checks are also undertaken and references are obtained to ensure they are of suitable character to provide care and support to vulnerable adults. These checks include a Disclosure and Barring Service (DBS) and identity checks. Staff are registered with Social Care Wales (SCW) which is the regulatory authority for social care workers.

## Care and Support

People are happy with the care and support they receive. Representatives told us, *“It’s first class, everything is perfect”* and *“It’s absolutely brilliant, I only have praise for them (staff)”*. We saw staff providing support to family members and having sensitive conversations, demonstrating compassion and empathy. Staff are highly skilled and have developed positive and trusting relationships with people. Care staff know people well and anticipate people’s needs, noticing any changes in a timely manner. We saw numerous thank you cards on display that show people’s appreciation for the exemplary care provided. One person told us, *“I settled straight away, they (staff) are so nice, nothing is too much. They come straight away to help (when I ring the call bell)”*.

Initial assessments are undertaken in collaboration with people, their representatives and health and social care professionals when appropriate. Personal plans are very detailed and include people’s likes and dislikes in all areas of care and support. People and their representatives told us they are consulted routinely and when care and support needs change. We saw evidence that people are involved in the review process and reviews are undertaken regularly. Improvements have been made in this area since the previous inspection. People’s views are important and the provider will do their utmost to accommodate people’s needs and preferences. Records evidence that risk assessments are undertaken to promote independence whilst keeping people as safe as possible. Detailed daily recordings are kept on a computerised system and provide information on the support that has been provided. These are completed by staff in real time.

The service provides an ‘Active offer’ of the Welsh language. Some staff members are Welsh speaking and those that are not fluent have learnt simple words and phrases. We heard conversations between staff and individuals in Welsh along with Welsh songs being sung. Documentation is available in Welsh on request and people have access to Welsh radio and television programmes.

There is a robust system in place for the safe storage and administration of medication. Medication administration records have recently been changed to an online system which provides very accurate records and will identify and alert senior staff of any mistakes immediately. There is an up to date medication policy in place and senior staff are trained to administer medication. The storage of medication was an area for improvement at the previous inspection and has now been resolved.

## Environment

The environment is welcoming and homely and supports people's wellbeing. It is maintained to a high standard of repair and décor and is clean and comfortable. Relaxing background music is played at a volume that enables people to chat. There are spacious communal areas for people to relax and socialise or to watch tv. The dining area is bright and inviting. High standards and attention to detail of the environment demonstrates a commitment to making the home aesthetically pleasing to people living at Cartref Croeso. We saw the dining table laid out for lunch with napkins, a printed menu and a vase of flowers. The kitchen is clean and functional and they have been awarded a five star rating following an Environmental Health inspection. People's bedrooms are decorated to their own taste and we saw personal belongings displayed and some people had brought their own items of furniture.

A gardener is employed to maintain the outside area. There is a polytunnel where people can be supported to grow vegetables. Chickens are also kept. There are several outdoor areas, in and around the garden where people can sit and relax. A path provides a safe walkway around the grounds. A wooden cabin has been made into a bistro where people can sit with their families in a social environment. This is currently not being used but there are plans to get it up and running again for the summer.

The building is secure, visitors are let in by staff and a signing in book is used. Checks and audits of the building and equipment are carried out to ensure it remains safe for people, staff and visitors. This includes auditing and servicing of moving and handling equipment and firefighting apparatus. We saw fire exits were clear of clutter and obstructions. Substances hazardous to health are locked in cupboards, in line with Control of Substances Hazardous to Health (COSHH) regulations. There are window restrictors in all bedrooms and bathrooms viewed.

## **Leadership and Management**

There is a strong team of staff led by a highly supportive, passionate, and approachable manager. Staff spoken with were very complimentary of the manager and the provider and one staff member told us, *"You can talk to them (manager) and they don't mind getting their hands dirty when you need help"*. Another staff member said, *"They will always find a way to work around a problem"*.

The manager's ethos and person centred values filters throughout the staff team and there is a high commitment to providing people with the best possible outcomes. There is a low turnover of staff which contributes to a strong, effective team providing continuity of care to people. A staff member told us, *"I am proud to work here, it's easy to work here, it's a nice atmosphere"*. Staff receive regular supervision and an annual appraisal, which provides an opportunity to reflect on their practice and identify any areas for training or support. Staff undertake mandatory training on a regular basis to ensure they remain up to date. A staff member said, *"They (manager) are so supportive, they encouraged me to do my level 3 and now we are discussing doing level 4 (Social Care qualification)"*. Staff files viewed held the correct legally required information.

The RI has excellent oversight and governance of the service and visits regularly. We saw records of the RI's quarterly visits which demonstrate that people and staff are consulted. Quality of care assurance reports evidence that there are systems in place to audit, assess and identify areas that are working well and areas where the level of care and support can be improved. We looked at key policies and the Statement of purpose (SoP), which hold relevant information. Care Inspectorate Wales (CIW) are notified as required of any reportable events such as allegations of abuse involving the provider and/or a member of staff and any serious accident, injury or illness of an individual. This was an area for improvement at the previous inspection and has now been rectified.

### 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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N/A	No non-compliance of this type was identified at this inspection	N/A
58	Medication is not stored appropriately free from risk of contamination.	Achieved
60	no reg 60 s since Jan 22 and manager not on system to complete	Achieved
16	Detailed review information as to outcomes for people is not evidenced , nor peoples involvement in their reviews.	Achieved

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