



# Inspection Report on

**Cartrefle Residential Home**

**Cartrefle  
Betws Road  
Llanrwst  
LL26 0HG**

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

**This report is also available in Welsh**

## **Date Inspection Completed**

13 April 2021

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## About Cartrefle Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Akari Care Cymru Limited
Registered places	24
Language of the service	Both
Previous Care Inspectorate Wales inspection	15/01/2020
Does this service provide the Welsh Language active offer?	Yes

### Summary

This was a focussed inspection, primarily to look at the quality of infection prevention and control measures at the service. We found the environment is clean and homely and there are good infection control measures in place to keep people safe. People are treated with kindness by caring and friendly care workers who know people well. Overall, personal plans and risk assessments are reflective of people's current individual needs. However, they could be developed further to ensure they include more detail and are written in a more person centred and outcome focused way. The service is well managed, care workers spoke positively about the manager and how they are supported within their roles. The responsible individual maintains oversight of the service and undertakes visits to the care home. There are processes in place to monitor and review the quality of care provided.

## Well-being

People have control over their day-to-day lives. People we spoke with told us they were able to make choices and influence their daily lives. Resident meetings are held to enable people to voice their views on range of topics that affect them. We saw people are settled and comfortable with the care workers supporting them; individuals are treated with courtesy and kindness. We observed positive relationships have developed between care workers and people living at the home. People are currently able to receive visits from family and friends by means of a visiting pod in the grounds of the service.

People's well-being is maintained and enhanced. Care documentation illustrates people are referred to healthcare professionals as required. Overall, personal plans demonstrate that assessments and care documentation enable people to receive the care they need. However, personal plans could be enhanced by including more detail about the individual and being written in a more person centred and outcome focused way. We saw people received timely care, which was supportive of their independence. We saw that people are consulted about the choice of meals provided.

People are protected from harm. People's well-being is achieved as systems are in place to support this. Discussions with care workers demonstrated they were clear about how to deal with safeguarding matters and they would feel confident to report any concerns they had. Care workers had received up-to-date safeguarding training. An up to date safeguarding policy is in place that provides care workers with the information and guidance needed to recognise and report abuse should it occur.

People live in suitable accommodation which meets their needs. We noted the home was comfortable, clean, and homely. We saw the home has good infection control measures, following latest guidance from relevant public bodies. The Responsible Individual (RI) oversees the service and continue to make improvements to the service.

## Care and Support

Overall, people are supported by care workers who have the information required to provide the appropriate care and support. Personal plans are in place and outline the actions expected of care workers to support individuals. Care documentation are mostly current, and are regularly reviewed. We highlighted where one person's personal plan required updating and found that this had already been highlighted by the service provider as part of their audit of people's care documentation. Risks identified as part of the care planning process are supported by risk assessments. People's personal plans are developed in consultation with people and their relatives. Improvements are required to ensure people's personal plans are written in a more person centred and outcome focused way. Care plans would benefit from more detail meeting people's communication needs; end of life care; and people's conditions. Personal plans would also benefit from further detail where people are subject to Deprivations of Liberty Safeguards (DoLS) and the personal impact of Covid-19 on people, including what this means for the individual and what is required from the staff supporting them. We found that staff had good understanding of people's needs. People benefit from staff who are Welsh speaking, where a large proportion of the staff team are able to converse in or are learning Welsh.

People maintain regular contact with people who matter to them, through telephone conversations or by means of visiting via the visiting pod. We saw care workers supporting people in a kind and caring manner; and residents, their relatives and visiting professionals were complementary of the care people receive. There are opportunities for people to be active and engage in things they enjoy. We observed the activities coordinator keeping residents stimulated and interacting with each other through conversation and games which was well received by residents. The service benefits from a reality I.T. system which has many interacting and visual sensory features, we witnessed residents enjoying interacting with the device. We saw that an Amazon Alexa was being used in one lounge and saw that an Amazon Dot was in use in another lounge. We found that these devices had been requested by residents and the service provider had purchased these devices to benefit the people within their care. The service provider works with people to ensure they are stimulated as far as possible.

People are supported by care workers who understand how to keep them safe from harm. We spoke with care workers who demonstrated they know how to protect individuals they support. There is a safeguarding policy and procedure in place for staff to follow and staff are trained on how to keep residents safe.

## Environment

People live in a homely environment that meets their individual needs. We saw that all areas of the home were clean. People had chosen the décor at the service which promotes choice and aids to promote a sense of belonging. Observations demonstrated people were relaxed in their surroundings.

The service provider identifies and mitigates risks to health and safety. During our inspection, we found appropriate health and safety measures are taken to reduce the risk of Covid-19 infection. Care workers have access to sufficient supplies of personal protective equipment (PPE), we saw care workers use PPE appropriately and regularly wash their hands to reduce the risk of cross-infection. Visiting professionals are requested to complete a Covid-19 questionnaire, temperatures are taken and evidence of Lateral Flow Testing (L.F.T.) are requested. We spoke with visiting Health professionals who confirmed appropriate measures are taken when they visit the service. All areas of the environment were clean and maintained to a satisfactory standard. The service is responsive to the requirements caused by the Covid-19 pandemic and ensure residents and staff are kept informed and have the necessary measures in place to promote staff and residents' safety. We identified areas where infection control practices could be strengthened through ensuring there are no unexplained gaps in cleaning rotas.

## Leadership and Management

People are supported by care workers who are safely recruited and fit for the role. Staff are employed with the appropriate checks carried out to ascertain their fitness. Care workers benefit from team meetings to keep them up-to-date with information that is relevant for their work. We saw evidence of care workers' last formal supervision session which was completed in the last three months. However, the regularity of the manager receiving formal supervision would benefit from improvement. Staff spoke very highly of the support they receive from the manager. We identified gaps in care workers training, we did not evidence that this was resulting in poor outcomes for people living at the home or for care workers and the manager has arranged for care workers to complete up-to-date training. During the inspection care staff were busy, but this did not impact on the care provided to people. The manager has been proactive in recruiting new staff and increasing staffing levels. The service has a staff dependency tool in place which assesses how many care workers are required to meet people's needs. We recommend that the service provider actively reviews staffing requirements in line with people's changing needs and the number of residents living at the service. The manager stated they are supported by the RI, and care workers were very complimentary about the manager's leadership and support.

People have access to information about the service and there are arrangements in place to keep the quality of care and support provided under review. The RI formally visits the service and has completed a quality of care review which monitors the quality of the service provided, the quality of care review could be improved further by ensuring the regularity meets regulatory requirements. People receive a service as specified within the statement of purpose and written guide. We reviewed these documents, which contained information to allow people to make an informed decision about the service. Relevant policies and procedures are in place relating to areas such as admissions, safeguarding and infection prevention and control.

**Areas for improvement and action at, or since, the previous inspection. Achieved**

**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None	
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**Areas where priority action is required**

None	
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**Areas where improvement is required**

None	
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