



## Inspection Report on

**Cartrefi Cymru Co-operative Cwm Taf**

**CARTREFI CYMRU  
284 BRITHWEUNYDD ROAD  
TONYPANDY  
CF40 2NZ**

**Date Inspection Completed**

17/12/2019

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## **Description of the service**

Cartrefi Cymru Co-operative supports around 180 adults at home in the Bridgend and Rhondda areas. The majority of them are in supported living situations (for which people hold their own tenancy). The service has offices in Tonypandy and Bridgend.

Jill Nicholson is the Responsible Individual (RI) providing strategic oversight, and there are managers appointed who are registered with Social Care Wales.

## **Summary of our findings**

### **1. Overall assessment**

People supported by the service seem to be happy and contented. They benefit from knowledgeable support, dedicated staff, and the service's commitment to accomplish positive outcomes with them. The care workers encourage their rights, independence and confidence, and they know the needs and likes of the individuals well. Individual's physical, mental and social requirements are recognised, respected and assisted with in a warm and positive way. The service has developed an exemplary way of documenting participation orientated support delivery and person centred outcomes. Staff are well trained, and they feel supported by their teams and management. Robust organisational and governance arrangements ensure the service runs smoothly and delivers good quality support.

### **2. Improvements**

As this was the first inspection since the service registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA), improvements will be considered as part of the next inspection.

### **3. Requirements and recommendations**

The service met all legal requirements and we made one recommendation regarding security.

# 1. Well-being

## Our findings

People's rights are upheld. We found care workers encouraged individuals to be as independent as possible, and to make decisions. We saw each person was on-going involved in planning their support and having goals they wanted to achieve. People and staff met monthly to discuss their support, organise housekeeping, and any issues. The service helped people to understand their rights, and supported them with safeguarding and advocacy if required. This means people have influence and control over their day-to-day lives and support to understand their rights.

The service has systems in place to protect people from abuse and neglect. The entrances to the office and the supported living accommodations were locked and had bells to notify that somebody wanted to visit, however when visiting the office we were not asked for our identification and to sign the visitor book. We found staff and management understood their roles in protecting the individuals they supported, there was a corresponding policy and mandatory training to recognise signs of abuse and poor mental or physical health. Staff knew when and how to report relevant concerns. Risk assessments were in place, identifying individual's particular vulnerabilities and strategies to protect them. Individuals confirmed with us that they felt safe in their homes. We conclude people's safety and well-being is actively promoted by the service but recommend to consistently ensure visitors to the service are known and accounted for.

Being supported by the service positively impacts on people's health, independence and well-being outcomes. We found people were treated as individuals and supported to be confident, as well as to have and to achieve their goals and ambitions. Care workers anticipated individual's physical and emotional needs and supported them with respect and understanding. They supported every person in a wide range of individual and group activities, in the house and in the community. On the day of our visit for example a person from a supported living house went to the choir which was formed by people in the service and also has members who are residents in a nearby care home; the next performance of the choir was to be at the local Co-op to entertain the public with Christmas carols. Individual's goals and needs were set out in their personal plans and we found that support was adapted to suit their circumstances. The service continuously encouraged each person to participate and contribute to their care and support. When we visited, the individuals seemed comfortable in the company of staff and each other. We saw people got on well with staff and were at ease approaching them for help and advice. We noted that staff interacted with people in a warm and caring but respectful manner. They were attentive and had a good awareness of everyone's needs and dignity. We also saw there was good support to maintain contact with friends, family and to be in the community. We conclude that people are supported to be well and active.

## 2. Care and Development

### Our findings

Cartrefi Cymri Co-operative encourages participation and person centred support. We saw people's needs were assessed before they came into the service to make sure the support was suitable for them and the service was able to support individuals to achieve their outcomes. We looked at six service user care files and saw evidence of robust care planning and timely reviews, we also found the documentation was detailed and up-to-date. The files further illustrated how each person was continuously involved in shaping their support, making their wishes and preferences known, and working on their goals and outcomes, as well how staff could support them with it and maintain their safety. One page 'this is me' summaries, in-depth 'pen pictures', communication help and important details such as people's likes, dislikes, friends, etc. gave staff further insight into specific needs, and the support required. The risk assessments in place were appropriate, and strategies to support positive risk management were seen. A well designed and person centred 'goal book' provided an effective way for staff to record daily information, goals and outcomes for each individual. The service regularly reviewed with each person their physical and mental well-being, activities and achievements to identify change in, or concerns about, their conditions and to see what worked positively for them. People told us "*I don't want to be anywhere else*", "*I can do what I want*" and "*I like it here*". We conclude that everyone participates in their care planning, and care and support is well informed and person centred.

People are supported to stay well and their health is monitored. We saw from the care records that appropriate health and social care professionals were involved with people's care, such as general practitioner (GP), social worker, mental health team and more, on a regular basis as well as when needed. Important health information and outcomes of consultations were recorded. We noted the staff in the service promoted a healthy lifestyle in food and activity choices, and they also supported people to be as independent as possible with personal care. We saw there was encouragement to participate in daily activities, such as cooking, cleaning and washing clothes, and to get out and about in the community. This shows people's health and wellbeing is promoted.

People are safely supported with their medicines. We noted that if able, individuals could administer their own medication or they had the support of staff if required. Staff gave support with going to the pharmacy to get medicines and renewing prescriptions. Staff were trained in medication administration and had yearly refreshers. There were risk assessments for medication in the individual care files. We noted medication administration and stocks were appropriately checked and audited, and suitable policies were in place, thus contributing to safe practice. We noted secure arrangements for storing medications and supplements in the houses we visited. This shows the service minimises the risks associated with the management of medication.

### **3. Environment**

#### **Our findings**

We do not consider the environment as part of our inspection remit for a domiciliary care service but we noted the office we visited had appropriate security arrangements, training spaces, and rooms for private conversations. We found also that there was satisfactory safe storage for confidential files.

## 4. Leadership and Management

### Our findings

The service has satisfactory processes to ensure staff are suitable to work with vulnerable people. The electronic and paper staff files we saw evidenced robust recruitment and vetting, and contained the legally required checks and information. Staff had pertinent qualifications and some were working towards higher levels. New staff went through a formal induction programme, and all staff undertook mandatory and additional training in a variety of subjects including manual handling, safeguarding, medication administration, food safety, first aid, positive behaviour management, fire safety, GDPR, dementia and more, with further training scheduled. Staff were positive about their training and said they felt competent and comfortable in their roles. They had regular supervision meetings with their manager and used the opportunity to reflect on their work, receive support and discuss goals and training needs. Formal and informal meetings with management kept staff up-to-date with changes and developments and provided a platform for discussion. We noted that managers received good support from senior management and peers, and management meetings provided opportunities to share ideas and learn. All this indicated a culture of shared learning, reflection and development in the service. Staff commented positively to us about the leadership of the service, indicating they felt valued and supported. They said *“it’s a good service to work for, and management is approachable”*, *“if there is a problem I can speak to anyone”*, and *“we all work good as a team”*. We conclude that people benefit from a well supported team with appropriate knowledge and skills.

Robust governance, auditing and quality assurance arrangements are in place to run the service smoothly and to deliver good quality support. We saw from documents the service hosted regular meetings with people and their representatives, and conducted surveys in order to get feedback. The documents gave evidence of reflection and outcomes, and they informed conclusions and plans; for instance management noted from incident reporting that there was a small cluster of medication errors and we saw evidence of immediate actions taken service-wide to remedy this. We also looked at evidence of the legally required RI visits and the care quality review, and found they were satisfactory. We found internal quality assurance systems were helping the service to self-evaluate and improve. We noted suitable policies and arrangements for dealing with complaints, compliments, incidents and safeguarding. We spoke with staff about those and found them well informed about their roles in them. We also noted management acted in a timely and appropriate manner with any issues arising and we were shown how the service acted with incidents and complaints. Notifications were routinely forwarded to CIW, and appropriately actioned and recorded in line with regulations. We conclude that people benefit from a service which has an ongoing commitment to reflection and improvement.

The service provides good information. A comprehensive, up-to-date statement of purpose set out the service’s aims, values, and how it intended to deliver the service. It also contained pertinent information about processes and policies such as for complaints or safeguarding issues. A written guide was available for people and their representatives, containing practical information about the support provided. We conclude people benefit from a service that is transparent with its values and purpose, and makes its objectives and provisions clear.

## 5. Improvements required and recommended following this inspection

### **5.1 Areas of non-compliance from previous inspections**

This is the first inspection since the service was registered under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

### **5.2 Areas of non-compliance identified at this inspection**

There were no areas of non-compliance identified at this inspection, the service meets all legal requirements.

### **5.3 Recommendations for improvement**

We recommend to:

- Ensure staff ask consistently for unknown visitors to identify themselves, and to sign the visitor book so in case of an emergency it is known who is in the building.



## 6. How we undertook this inspection

We undertook a full announced inspection, the first for the agency since re-registration under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

Information for this report was gathered from:

- an announced visit to the Tonypandy office on 17 December from 920hrs to 1530hrs, and to two supported living houses afterwards
- conversations with service users
- conversations with manager, team leaders, office and care staff
- conversations with the responsible individual including feedback
- observations of daily routines and activities in the houses during the visits
- examination of six care files relating to people in the service
- examination of six staff files to consider their recruitment, supervision and training
- review of sessional run and supported living rotas
- review of house and team meeting minutes
- examination of records and policies such as accident/incident reporting, staff training and supervision matrix, privacy, safeguarding, medication, complaints
- review of information about the service held by CIW
- review of the service's statement of purpose and written guide
- review of the service's quality assurance, RI visit evidence and other relevant reports
- feedback from 13 questionnaires

Further information about what we do can be found on our website:

[www.careinspectorate.wales](http://www.careinspectorate.wales)

## About the service

<b>Type of care provided</b>	<b>Domiciliary Support Service</b>
<b>Service Provider</b>	<b>Cartrefi Cymru Co-operative Ltd</b>
<b>Responsible Individual</b>	<b>Jill Nicholson</b>
<b>Date of previous Care Inspectorate Wales inspection</b>	<b>This was the first inspection for the service under RISCA.</b>
<b>Dates of this Inspection visit</b>	<b>17/12/2019</b>
<b>Operating Language of the service</b>	<b>English</b>
<b>Does this service provide the Welsh Language active offer?</b>	<b>A service is available in Welsh for those who wish this and therefore the service provider promotes the Active Offer.</b>
<b>Additional Information:</b>	

**Date Published 12/02/2020**

