



Inspection Report on

Cartef Residential Care Home

**Brecon Road Hay-on-wye
Hereford
HR3 5PJ**

Date Inspection Completed

06/11/2019

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Description of the service

Cartref Care Home provides personal care and accommodation for up to 23 people over the age of 18. This includes people living with dementia. The provider, Shaw Healthcare (Group) Limited is registered with the Care Inspectorate Wales (CIW). They have nominated Mr Jeremy Nixey to represent them as the responsible individual, (RI). There is a manager appointed who has responsibility for the daily operation of the home and is registered with Social Care Wales, (SCW).

Summary of our findings

1. Overall assessment

People are treated with dignity and respect by staff who are familiar with their care and support needs. Staff are well supported by an experienced manager and receive training to enable them to support people to achieve their personal outcomes. People have opportunities to do things they enjoy in the care home and in the community. Information about the service is available to people but is not an accurate reflection of the service provided. Improvements are needed to some facilities and furnishings. Further consideration of the environment would enhance the well-being of people living with dementia.

2. Improvements

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

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. These include the following:

- Information,
- Policy and Procedures,
- Record keeping,
- Quality assurance,
- Environment.

1. Well-being

Our findings

People have choice over their day to day lives. We spoke to a person in their bedroom who said they could spend their time wherever they wanted to and could have meals in their bedroom or the main dining room. They said staff respected their choices. Bedrooms seen were personalised and people said they were comfortable. Other people were sitting in various parts of the home including the reception area and small lounge, depending they said, on their choice. Some improvements to the environment would help people living with dementia to be more independent including clearer signage on bedroom doors. We saw visitors were welcomed throughout the day. Those spoken with said they were always made welcome and offered a hot or cold drink. The manager and staff were aware of people's cultural and linguistic needs. No-one living in the care home spoke Welsh but pictorial signage around the home was in both languages and the manager had recently recruited a staff member who spoke Welsh which they said would be an asset and support with promoting the 'Active Offer' in the home. Information was available to people to help them decide if they wanted to live at Cartref. People told us they knew how to raise a concern if they needed to. One person told us, "*staff are very good and will do anything*" and a visitor told us the manager would sort out any issues if they had any. Resident and staff meetings were held so people could give their views on the service and suggestions to improve it. People's individual identities are recognised and respected.

People do things they enjoy and are interested in and their physical, mental and emotional well-being is promoted. People, and their relatives, spoke positively about the care and support they received. Comments included, "*staff are lovely, they take me out when I want to go*", "*lovely home*" and "*staff are always good, polite and accommodating*". A relative of a person living with dementia told us that staff knew how to communicate with their relative to help them achieve their best outcomes. We saw staff being kind and patient with people, they responded quickly when people asked for help. We spoke with one of the three staff members who arranged activities both in the home and the community. They told us people were supported to be involved in the community. This included going to the local market where they could meet friends and have coffee, attending a luncheon club or the dementia café. We heard people saying they had enjoyed a firework display at the home the evening before our visit, and during our visit, a visitor was playing the piano, which they have done weekly for many years. We saw a bookshelf in reception with books and games for people to use if they wanted to. Rummage mittens, dolls and robotic cats were in various places around the home for people to pick up if they wanted to. There was evidence throughout the home of artwork that people had been supported with, some with help from local schoolchildren who visited weekly. Staff had arranged for family to bring in photographs, which a person living in the home had taken when they travelled. They planned to have a discussion group involving the schoolchildren, the person and their family. People are provided with opportunities to be active in line with their preferences, interests and abilities.

2. Care and Support

Our findings

Staff are clear about how to care for the people they support. Staff spoken with were familiar with people's needs and how they wanted to be supported. They told us they thought they supported people with dementia 'well', but welcomed more training to increase their knowledge and skills. One person told us the care of people living with dementia had improved but more work and training was needed to make sure staff understood how best to support people to achieve their best outcomes. Staff were complimentary about recent dementia training they had which they said helped them see things from people's perspective. Staff who were doing a care qualification told us they had chosen units about dementia as part of the qualification. This demonstrated their commitment to wanting to understand how best to support people living with dementia. Due to a change in the registered provider, care records were being rewritten and personal plans used were from the previous provider. We were told staff would use the current provider's personal plans from 1 December 2019. Staff told us they had good support to re-write the documentation but they would need support to implement the new plans to ensure they contained accurate up to date information. We saw people's care needs were assessed before coming into the care home to make sure they could be met but there was no admission and commencement of service policy, which supported the admission process. Whilst the manager and staff told us, they involved people in assessing and planning their care, this was not evidenced in documentation seen. People said staff spoke to them about their preferences and family spoken with said they were always contacted if there were changes to their relatives care needs. Records showed people were supported to have access to healthcare professionals whenever necessary and their medication was reviewed regularly by the GP. We reviewed how medicines were managed and found good systems in place to ensure people had their medicines as prescribed. People receive care and support that meets their needs but further training and guidance to support people living with dementia would enhance their well-being.

Systems are in place to keep people as safe as they can be. Staff spoken with told us they had received safeguarding training. This was confirmed in records we reviewed. There was a safeguarding policy which staff told us they were aware of and they knew what to do if they had any concerns about people's safety. Records showed staff had Deprivation of Liberty Safeguards (DoLS) training and we saw systems were in place to apply for a review/renewal of authorisations before they expired. The manager had a good understanding of this process. People are as safe as they can be.

3. Environment

Our findings

People live in a home that generally meets their needs. Some improvements are needed to the facilities. The home was clean, tidy, and free from odours. We saw people were able to personalise their bedrooms in line with their tastes and preferences. People spoken with told us they had all they needed in their bedrooms to be comfortable. Rooms were personalised with photographs and personal belongings. One person had a digital clock and calendar and there was one in the large lounge. This helped with orientation for people living with dementia. Communal lounge areas allowed people to socialise or spend quiet time alone. Some areas had small clusters of seating which promoted discussion. In the main lounge, chairs were arranged around the outside of the lounge area. One staff member told us they felt the lounge areas could be, '*more sociable*' but it was difficult due to the space available. We discussed ways to further improve the environment for people living with dementia including personalising their bedroom doors and making signage around the home clearer. We saw one of the toilets was in need of refurbishment. The provider told us this work had been arranged. Some walls and woodwork in the corridors needed painting. One of the bedrooms was being painted during our visit. Outside space was accessible to people and safe but staff felt this could be further improved but one said they were, '*working on it*'. People are able to spend time where they want to but improvements to the environment would enhance the well-being of people living with dementia.

Systems are in place to manage health and safety. Records showed regular checks of the environment and equipment in the home were carried out including fire safety equipment. Records showed staff had completed fire safety training and had fire drills to make sure they knew what to do in an emergency. Staff spoken with confirmed this and were aware of their responsibilities. A fire risk assessment had not been undertaken by the current provider but the manager told us this was being addressed. Systems were in place to address any environmental issues that could be addressed by the maintenance officer. We found that one of the window restrictors on a bedroom window was not attached correctly. This was addressed immediately by the maintenance office. The provider must make sure that the window restrictors fitted are in line with the Health and Safety Executive guidelines (HSE). Systems identify and as far as possible, eliminate risk to people's health and safety.

4. Leadership and Management

Our findings

Information is provided about the service but this is not an accurate reflection of the service. The Statement of Purpose, (SOP) and guide to the service had been amended but still reflected elements of the previous provider. The SOP was not an accurate reflection of the service provided and was stamped, '*not for general circulation*'. For example, the manager told us staffing levels had increased but the SOP had not been changed to reflect this. The Customer Feedback' policy, (22 July 2019), contained information about how people could make a complaint. People spoken with, relatives and staff, were aware of how to raise any issues and were confident they would be listened to. Staff told us they had contact numbers for Shaw Healthcare management if the home manager was not available. Policies and procedures were available to support the running of the home. People are provided with information about how to raise a concern but information about what they can expect from the service needs improvement to help people make an informed choice about living in the care home.

Systems are in place to monitor, review and improve the quality of the service people receive but further improvements are needed. We saw that RI visits were not carried out in line with the legal requirements. The manager was not clear about who the RI was but felt very well supported by their immediate manager. We saw evidence of regular visits from the quality officer and a full compliance audit was undertaken by the provider on 4 September 2019. Not all the required actions had been met within the set timescales set but we saw evidence the manager was working towards this. A resident and relative meeting was held in August 2019 and we saw regular staff meetings were held, including a housekeeping meeting during our visit. The manager completed audits of the service, which we saw, and accident/ incident forms were signed by the manager and actions recorded. People benefit from a service that has quality assurance systems in place to ensure continued improvement.

People are supported by trained and well led staff. The manager told us five new staff were currently going through the recruitment process. Staffing levels had recently increased which the manager and staff welcomed. One staff member told us the extra hours would help to make sure people were supported to do things they wanted to do including strengthening links with the community. The manager told us staffing levels at nighttime were currently being reviewed. The two recruitment files we checked of staff going through the process showed appropriate processes were being followed. Staff were positive about working in the home. When asked what was good about it, comments included, '*lovely relaxed feel to the home*' and '*family feeling*'. A comment in the compliments file echoed this, '*friendly, happy home*'. Staff received training. We saw staff were having an induction as part of the training programme set up by the new provider. Staff spoken with confirmed this. Staff told us they had regular supervision with their manager. Records seen confirmed this. The manager said they felt very well supported in their role by their immediate

management team. People's well-being is enhanced because they are supported by motivated staff who are well supported by the manager.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

This was the first inspection of the service since the new provider was re-registered under The Regulation and Inspection of Social Care (Wales) Act 2016.

5.2 Recommendations for improvement

- The provider must make sure people have a guide to the service that reflects the current provider and is reflective of the service provided.
- People must have access to a statement of purpose that accurately reflects the service provided.
- A policy should be developed which reflects the admission and commencement of service process for staff to follow.
- Documentation used in the service must refer to the current provider.
- Care records used must be relevant to the current provider and should evidence people's involvement in planning and reviewing their care and support. They must be offered a copy of their personal plan.
- A plan must be in place to ensure the facilities are adequately maintained and furniture and furnishings are in good condition. Improvements were needed to the environment to better support people living with dementia.
- The fire risk assessment must be relevant to the current provider.
- The provider must make sure the window restrictors fitted are in line with HSE guidelines.
- The RI must carry out visits to the care home at least once every three months.

6. How we undertook this inspection

This inspection was part of the CIW Review of outcomes for people living with dementia in care homes. We made an unannounced visit to the care home on 06 November 2019 between 9:00 a.m. and 7:00 p.m.

The following regulations were considered as a part of this inspection:

The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.

The following methods were used:

- We spoke with four people living in the care home, the manager and six members of staff.
- We spoke to one relative and two visitors.
- We spoke to one health professional.
- We considered three questionnaires completed by staff members.
- We looked at a wide range of records. These included staff recruitment and training records and three care records.
- We reviewed the statement of purpose, (SOP), and compared it with the service we observed. The SOP sets out the vision for the service and demonstrates how the service will promote the best possible outcomes for the people they care for.
- We used the Short Observational Framework for Inspection, (SOFI2). The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.

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

www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	Shaw Healthcare (Group) Limited
Responsible Individual	Jeremy Nixey
Registered Service	Cartref Care Home
Registered maximum number of places	23
Date of previous Care Inspectorate Wales inspection	This was the first inspection of the service since the new provider was registered under The Regulation and Inspection of Social Care (Wales) Act 2016.
Dates of this Inspection visit(s)	06/11/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	The provider is working towards actively implementing the “active offer” of the Welsh language as required under the Welsh Government’s Strategy “More than just words 2016-2019”.
Additional Information:	

Date Published 06/01/2020