



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

17/02/2023

Welsh Government © Crown copyright 2023.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk You must reproduce our material accurately and not use it in a misleading context.

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	26/10/2021
Does this service provide the Welsh Language active offer?	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

People's individual health and wellbeing needs are understood by care workers who are knowledgeable, trained and well supported. People feel they are safe living in Cartref Annwyl Fan. In the main, care records provide a sense of the person and help staff to carry out their roles.

The service is led by a manager who is well supported by their line manager and is respected by staff, people living in Cartref Annwyl Fan and their relatives. The Responsible Individual (RI) uses their Regulation 73 visits and a range of quality audit tools to ensure they have good oversight of the service.

There have been extensive improvements to the environment and communal gardens since the last inspection. The environment is well maintained and helps give people a sense of community and to live as independently as they can be.

Well-being

People are protected from the risk of harm and abuse. Care workers are knowledgeable, well trained and care about the individuals living in the service. They respond to emergency situations and when people are distressed in a timely and kind way. They have a good understanding of people's needs and how best to meet these. In the main care records provide information about the requirements and preferences of people. There is good evidence of the service liaising with health and social care professionals to make sure people remain as healthy as possible.

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 in turn is supported by senior managers and the RI. Care staff are clear on their responsibilities to protect people and are supported by regularly reviewed and updated policies. There are appropriate infection prevention and control measures in place and staff are clear about their role and responsibilities. The service is clean and well maintained and tailored to people's needs. The improvements to the internal and external areas of the service can positively enhance people's well-being.

People's choices and views are recognised. The RI seeks the views of individuals living and those working in the service during Regulation 73 visits. People can personalise their bedrooms, are able to choose their meal preferences and are involved in their care when able to.

Care and Support

People living in the service are cared by staff who have a good understanding of their needs. Care workers told us about people's specific care needs and daily preferences, and these are mostly reflected in their care records. Interactions between staff and people are kind and caring. Care workers and ancillary staff enjoy supporting individuals and working in the service. They told us; *"it can be tiring work, but it is very rewarding"*, *"we support people with complex needs, it's great to be able to make their day better"* and *"I love having a chat with the residents, particularly if I am cleaning their bedroom. It is their room so I am respectful"*.

We saw care staff responding to an incident in a timely, caring and professional manner. People receive the care they need and compliment the staff. They told us; *"everyone is very friendly and helpful"*, *"all the staff are marvellous"* and *"I am well cared for, I have no concerns"*.

People and/or their representatives can raise a concern if they need to. There is a clear complaints procedure included in the information given to people and / or their relatives on moving into the service.

Care and support plans have good details and give a sense of the individual, however, details of the individual personal histories, interests and activities they like to be involved in should be better recorded. This has been discussed with the manager during the inspection. Where possible, people and/or their representatives, sign their care plans to demonstrate they are involved in their care. Health and social care professionals are involved with people's needs and this is well documented. Some staff can communicate in Welsh, which we observed during the inspection.

The kitchen has a five star food hygiene rating with varied menus offering daily choices. People told us: *"the food is really good here"* and *"I have no complaints about the food, there are always choices available if I want"*. We saw people's personal meal preferences are catered for. Menus are updated according to the season and in consultation with people. Mealtimes appear to be a very positive and an enjoyable social event. Meals are well presented to people eating in the dining areas or having their meals in their bedrooms. People who require assistance to eat and drink are given "protected time", so staff can give them the attention they need to enjoy their meals.

Environment

The environment minimises the risks to people's health and safety. Testing and servicing of firefighting and moving and handling equipment are completed within the required timescales. Staff spoken with are clear about the checks they need to undertake prior to using moving and handling equipment. Personal Emergency Evacuation Plans (PEEPS) are individualised and readily available. Emergency alarms are accessible and when activated are responded to in a timely manner. Maintenance issues are resolved promptly and there is an ongoing refurbishment programme in place. Health and Safety audits of the property are completed. Consideration should be given to handrails in corridors being painted in a contrasting colour to walls. This will better support people with eyesight difficulties to enable them to orientate safely around the service.

Infection prevention and control measures are in place. There are appropriate and safe measures to facilitate relatives and friends to visit. This is being kept under review. Substances hazardous to health are stored safely and emergency exits are uncluttered and free from hazards. Domestic staff have the appropriate equipment to carry out their tasks safely and the service is kept clean. There are comprehensive maintenance checks, servicing, and audits in place.

Furniture and fixtures are well maintained and replaced when needed. People's bedrooms are personalised with items of furniture, pictures, photographs and items important to the individual. There are communal lounges and dining areas for people to socialise in each of the communities. These feel homely with pictures and points of interest. There are bilingual signs used in the service to orientate people who communicate through the medium of Welsh.

Since the last inspection extensive refurbishment works have been completed to an area of the service. The improvements provide people with spacious en-suite bedrooms and access to a well-designed garden with raised beds, paths, seating and a decked area. It is an enclosed garden so people can use this area safely for their own personal enjoyment and to socialise with friends and family.

Leadership and Management

People receive care from staff who are knowledgeable and well supported by the manager and the organisation. Staff told us *“I love coming to work – it’s a great place to work. Everyone is friendly and helpful. The manager is lovely, can speak to her at any time”* and *“[manager] is really good has an open door policy”*. Care staff also feel valued by the organisation, they told us *“It’s great working for Caron Group. I think they are caring to the residents and recognise the stress associated with social care and working in a care home”* and *“I enjoy working for Caron Group”*.

All staff attend a range of mandatory and service specific training and records confirm this. Care workers and ancillary staff told us about the training they attend including *“I have had Dementia training – I think this is important to have a better understanding of people and how best to talk to them and what to consider when I am doing my job”* and *“I am up to date with all my training. We have lots of training both online and face to face now”*. Staff also demonstrate a good understanding of their role in the protection of individuals and safe moving and handling practices.

Personnel records show they receive a thorough induction, have regular supervision and an annual appraisal. Pre-employment checks take place before new employees start work. These include references, right to work and Disclosure and Barring (DBS) checks. We found the staff records we looked at held the required information.

Staff follow appropriate infection prevention and control measures and are able to explain their responsibilities in reducing the spread of COVID-19. There are up to date and regularly reviewed policies and procedures in place to support staff.

Staff interact and support people in a caring and respectful manner, which adds to the welcoming and happy atmosphere in the service. People we spoke to told us *“I am very happy here, and to be honest I’m glad I moved in. The carers are great, they listen to you and take an interest in you”* and *“I am very happy here, it’s a lovely home”*.

The service operates in line with its Statement of Purpose. There are robust governance arrangements in place. The RI is in regular contact with the service and has undertaken the three monthly Regulation 73 visits. CIW have received copies of their reports, which demonstrates they speak to people and staff as part of the visits to the service. Staff and people confirmed this with us, one staff member said; *“[RI] asks how we are and speaks to the residents when he visits”*. There are a range of monitoring tools and audits undertaken to support the manager and the oversight by the RI. Actions from the audits are acted upon and reviewed regularly. The manager feels supported by their line manager, the RI and the organisation.

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. 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

N/A	No non-compliance of this type was identified at this inspection	N/A
-----	--	-----

Date Published 23/03/2023