



Inspection Report on

Plas Cwm Carw Care Home

**Plas Cwm Carw Care Home
Oakwood Lane
Port Talbot
SA13 1DF**

Date Inspection Completed

24/05/2024

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About Plas Cwm Carw Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	HC One Limited
Registered places	66
Language of the service	English
Previous Care Inspectorate Wales inspection	02 February 2023 & 03 February 2023
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

Plas Cwm Carw Care Home has a warm, welcoming atmosphere. Managers have made changes to improve people's everyday experiences. The home has a new layout that gives people more space to safely explore indoor and outdoor areas. These are homely and suitably adapted. People have many opportunities to socialise with others and do things they enjoy. Their care and support needs are accurately reflected in risk assessments and personal plans, which are kept under review. Medication systems and standards of hygiene and infection control have improved.

The staff team is growing following a successful recruitment drive. Staff are recruited, trained and supervised appropriately. People have developed good relationships with care staff, who support them in a kind, dignified way. Care staff feel valued and supported in their roles. Managers are approachable and passionate about providing a good quality service. They have robust systems of audit to monitor and improve standards. The Responsible Individual (RI) values people's views and commits to making changes that will enhance their experiences.

Well-being

People are content in their home, which has a lively yet homely atmosphere. People told us *“It’s alright, I’m looked after well”* and *“Wonderful – I can’t fault it at all”*. People have ample opportunities to socialise and keep occupied. Care staff are friendly and attentive to their needs and wishes. People receive appropriate support with their medication and have input from medical and specialist services. There are up to date personal plans outlining how care staff should meet people’s care and support needs. Care staff share information in various ways to keep team members updated about changes to people’s well-being. Managers are planning to roll out an electronic care planning system to improve overall standards of record keeping.

People influence the service they receive. Their needs are assessed before they move into the home, and they are involved in developing and reviewing personal plans. Care staff accommodate personal routines and support people to make daily choices. People have a say in the design and layout of their individual rooms. There are opportunities for people to share their views about the home during resident and relative meetings. The RI also speaks to people about their experiences and reflects these within detailed quality assurance reports.

The service promotes people’s health and safety. Personal plans and risk assessments identify the measures needed to help keep people safe. Safety equipment is in good working order and stored safely. Care staff carry out routine safety checks and are confident dealing with incidents. Recruitment procedures are robust and ensure people are cared for by a suitable workforce. Care staff complete mandatory and specialist training relevant to the needs of the people they support. This includes training in relation to safeguarding adults at risk. The manager monitors staff practice and takes action to address poor performance. There are robust systems of audit to help identify and drive forward practice improvements.

People live in a stimulating environment. The home has been redesigned to improve people’s access to indoor and outdoor space. There are dementia friendly features to help people identify with their surroundings. Private and communal rooms are suitably furnished and adapted and include some personal, homely touches. Regular environmental upgrades help keep the home fresh and inviting.

Care and Support

The home has improved its care planning and review process. Personal plans are developed following pre-admission assessments and include details regarding people's own abilities and preferences. People and/or their representatives are involved in the process and may visit the home beforehand if moving in on a routine basis. Relatives told us *"So far, I can't fault them. I always receive a warm welcome"* and *"It's early days, but they've been wonderful"*. Managers have completed work to remove unnecessary paperwork in preparation for transferring care records onto an electronic database.

People regularly discuss their care and support as part of a 'Resident of the Day' scheme. Work is underway to strengthen the quality of information being recorded, so people's views and goals are clear. The manager routinely checks supplementary charts to ensure people are being supported in line with their personal plans. The quality of record-keeping varies, although managers believe the new database will help care staff make more accurate, detailed recordings. Care staff are updated about people's needs through shift handovers, daily diaries, staff meetings and daily 'flash meetings'. Communication with relatives is mostly good, although can be compromised following staff changeovers. People and their families are invited to attend meetings so they can discuss their experiences and keep updated about home life.

Care staff are kind and considerate in their approach to care, which visibly lifts people's mood. They often sing and reminisce with people, creating a relaxed atmosphere. People are offered choice regarding their everyday activity and care staff respect their decisions. They support people calmly and confidently, so people feel safe and comfortable when receiving physical assistance. One person said, *"Staff are good, they look after me"* and a visitor commented *"They're lovely here, they really are"*.

The home organises many activities and events that allow people to connect with others. These include garden parties, pottery classes and live entertainment. A relative told us one person is *"loving every minute"*. People have formed new friendships as they frequently attend clubs with people who share similar interests. The home uses a 'wish tree' to encourage and support people to fulfil their dreams. This has enabled people to enjoy various outings and visits from their favourite sports teams.

Care staff support people to keep healthy. Medication systems have improved and are being audited by the manager every month. People receive the right medication at the right time. The home receives excellent support from local health services and care staff support people to attend routine medical appointments. People enjoy a range of meals, although would like mealtimes to be more flexible. Care staff prompt people to take regular drinks and snacks. They monitor people's health needs appropriately and carry out routine safety checks. The manager completes monthly clinical audits, which include a review of incidents and follow up actions.

Environment

The layout of the home has been redesigned since the last inspection, giving people more freedom to explore their surroundings safely. Some lounge and dining rooms provide access to enclosed gardens where people can relax and enjoy the outdoors. We saw people moving between lounge, dining and garden areas with staff support. A garden bar is being created and will provide a focal point in one garden. People have a choice of bathing and showering facilities. First floor corridors have been repainted and fitted with new wall lights, which has increased the brightness and feeling of space in these areas. Further environmental upgrades are planned, and we discussed with the RI the benefits of setting timescales so progress and priorities can be closely monitored and adjusted.

People can easily identify with their surroundings. The décor and facilities within communal areas include colour contrasts to help people distinguish between fixtures and furniture. There are various features of interest, including a Welsh-themed display and map of Wales. People told us they have contributed to the design of their rooms. Each has a unique layout, and many are furnished with people's own items. Bedroom doors have also been personalised with meaningful messages, pictures and craftwork. Noticeboards are used in various parts of the home to inform people about upcoming activities and events.

Standards of hygiene and infection control have improved. The home's food hygiene rating increased to 4 (good) in November 2023. We found all parts of the home to be generally clean and tidy. Infection control measures are routinely observed during internal quality assurance audits. Environmental Health officers are satisfied that the home's improved standards of cleanliness are being maintained. The home recently hosted a coffee morning as it participated in the World Hand Hygiene Day campaign.

Overall, staff are vigilant in identifying and reducing risks to people's health and safety. We found the home to be free from hazards, with equipment being stored safely and securely. The equipment and utilities are serviced and inspected within required timescales. The environmental controls needed to help keep people safe are outlined within their risk assessments and personal plans. Window openings above ground level are restricted to minimise the risk of significant falls. People with access to a call bell confirmed that staff usually respond promptly when called. Each person has an emergency evacuation plan, which can be accessed quickly and easily. Staff complete fire safety training and practise fire drills regularly. They also receive training in relation to the Control of Substances Hazardous to Health (COSHH) and health and safety.

Leadership and Management

The home is actively recruiting new staff to support its growing occupancy. Recruitment procedures have improved, with staff's suitability for care work being carefully considered following employment checks. There is a system in place to ensure Disclosure and Barring Service (DBS) checks are renewed every three years. The manager works with the relevant agencies to address concerns regarding staff conduct and performance. Agency staff are currently working regular shifts to maintain safe staffing levels. Many have become familiar with people's individual needs and internal policies and procedures. Staff told us shifts are appropriately staffed and allow them to provide safe, timely care. However, the high use of agency staff increases their workload and creates additional pressures. Managers assured us they will review and adjust staffing levels as needed to maintain an appropriate mix of skills. Shift patterns are flexible and allow staff to enjoy a good work-life balance. Staff complete a comprehensive induction programme after commencing employment, followed by a range of mandatory and specialist training. They described the quality of training as *"really good"*. Managers support staff to register with Social Care Wales (SCW).

Staff feel motivated and supported. They said, *"I love it here"*, *"It's a nice place to come to work"* and *"I can't see myself doing anything else"*. The personal well-being of staff is valued by the manager and administrator. One staff member said, *"They're great – it's like talking to a friend"*. Staff are clear about how to deal with incidents and report concerns regarding people's welfare. They feel confident managers would take their concerns seriously. Staff receive formal, individual supervision every three months to reflect on their performance and discuss their role and responsibilities. Most staff have received an annual appraisal, and the manager has arranged to complete those that are overdue. Staff achievements are celebrated through 'Employee of the Month' awards.

The manager leads the home effectively with the support of the area director and RI, who are both visible and approachable. There are plans to fill a vacant deputy manager post, which will further improve the support network and provide more visible accountability. The RI has clear oversight of the service and is respected by the team. One staff member said, *"Always thankful, will listen to ideas. I can't speak highly enough of her"*. The RI gathers feedback from people during formal visits and six-monthly quality of care reviews. Quality assurance reports provide an excellent insight into how the home is performing and the experiences people have had. They consider the outcomes of audits, an analysis of significant events and areas for future improvement. The manager takes pride in the home, having brought about many positive changes. We can conclude that the service is being provided in line with its statement of purpose; a key document that explains what the home sets out to provide and how.

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

16	Personal plans are not always accurate and up-to-date. There is little evidence that people and their representatives are involved in the review of personal plans.	Achieved
58	The service has not maintained clear, accurate records relating to the receipt, storage and administration of medicines.	Achieved
57	The service has not always reduced or eliminated environmental hazards, where possible.	Achieved
56	The service has not maintained a good standard of hygiene and infection control.	Achieved
35	The service has not always obtained full and satisfactory information before employing new staff.	Achieved

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