



## Inspection Report on

**Cartrefi Cymru Co-operative Gwent**

**Cartrefi Cymru  
Mill Road  
Pontnewynydd  
Pontypool  
NP4 6NG**

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

**This report is also available in Welsh**

**Date Inspection Completed**

**20, 25 & 26 May 2022**

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## About Cartrefi Cymru Co-operative Gwent

Type of care provided	Domiciliary Support Service
Registered Provider	Cartrefi Cymru Co-operative Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies, and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People are happy with the service they receive. Personal plans of care are person centred, detailed, and provide guidance for staff to follow. The support provided enables people to maintain and improve their independence and domestic skills, and to enjoy community life. People have control over their own lives and are able to make their own choices as far as possible. It is apparent that staff know the people they care for well and their likes and preferred choices. People remain as healthy as they can be due to timely referrals to healthcare professionals. Improvements in the administration of medication is required. Staff spoken with during our inspection were generally happy in their roles. However, low staffing levels and recruitment issues throughout the recent pandemic have impacted on staff's wellbeing and support. Improvements in formal staff supervision are required. Governance arrangements are in place that support the operation of the service.

## Well-being

People are positively encouraged to engage in rewarding and meaningful activities and are encouraged to maintain an active social life. Care workers build relationships with people, and seek their views and preferences on an ongoing basis. Personal plans of care highlight people's strengths, preferences, and personal goals. Care workers are encouraging, kind and available to assist people to do what they want to do. People are encouraged by care staff to have a routine and get involved in activities. Suitable systems are in place to support people to visit and have visits from their family and friends. Support is provided to access community events, attend social events with family and friends.

A range of opportunities for people to both formally, and informally express their views and opinions are in place. People we spoke with confirmed they were given choices and were listened to. Arrangements were in place for effective oversight of the service and people's views are used for the continued development and improvement of services.

People are supported to remain as healthy as possible. Care workers encourage people to make healthy food choices. For those people who need support with eating and drinking, care workers ensure assistance is provided. People have developed good relationships with care workers whom they know well and this helps to support people's well-being and emotional health. Appointments with health and social care professionals are arranged for regular checks or if individual needs change.

There are measures in place to safeguard people. Appropriate risk assessments are in place where required according to individual needs. Identified risks to people are managed and monitored so they are supported to stay safe and their freedom respected. Care workers know what to do if they are concerned about someone, are familiar about the types and indicators of abuse and told us what action they would take. Staff said they are confident to report any concerns and they felt they would be listened to and actions would be taken. The rights of people who may be unable to make decisions regarding their care are protected. We saw evidence of capacity assessments being undertaken and best interest's records within individual files.

This is a service that is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture. Preferred language to receive care and support is asked during assessment. The provider can offer key documents in Welsh if requested.

## Care and Support

People we spoke with are positive about the care they receive and complimentary about care staff and the provider. One person said, *“I am very happy with the support I get”* and another said, *“staff are great and they are always there to help me”*.

Personal plans are individualised and set out what is important to each person. Plans contain information about the best way for staff to support individuals. These include detailed daily routines, activities enjoyed and how people express their feelings. Also include how to support people safely if they demonstrate any challenging behaviour. Where there are necessary restrictions in place made in people’s best interests to manage their safety, these appear proportionate. Gaps in the review of plans were seen in schemes with vacant manager posts. The provider is actively recruiting to vacant positions and relocating managers to maintain some managerial support across each scheme. Due care and attention is required to ensure daily records are reflective of care and support being provided and the impact this has on people’s lives. We visited one supported living scheme and was told and shown by people receiving a service how they completed their own daily diaries. Care provided is planned and designed through consultation with people, their families/representatives, and professionals.

People can access the necessary health services to maintain their health and wellbeing. This includes access to GP services. We saw individuals have been referred to other healthcare professionals as and when needed. We saw detailed eating and drinking plans, including support to maintain a healthy diet. Care workers interact with people in a natural friendly caring and compassionate manner. Care workers have a very good knowledge of people and are, therefore, able to notice any changes quickly and respond promptly.

There are systems in place to manage people’s medication. Service medication policies and procedures are up to date and in line with current medication legislation. There are secure arrangements for storing medication. Care staff receive training in medication. Improvements are required in the recording and administration of medication. For example, gaps in staff signatures on medication administration records were seen. Liquid medication did not consistently have date of opening to ensure the use by date had not expired. This is an area for improvement, and we will follow this up at our next inspection.

## Leadership and Management

Governance arrangements are in place that support the operation of the service. The model of care documented in the service's statement of purpose and service guide reflects the support provided. A range of comprehensive policies and procedures are in place to support the delivery of care, which are kept under review. Reports evidencing regular visits to the service by the responsible Individual (RI) are available. They show discussions with people receiving a service and care staff and identify any areas for improvement. Quality of care reports are produced on a regular basis.

There are suitable selection and vetting arrangements in place to enable the service provider to decide upon the appointment of staff. We viewed staff files and found the necessary pre-employment checks have taken place. Identification and references further support the individual fitness of staff to work at the service.

Most care workers told us they are happy in their role and spoke positively about their employment. Some care workers talked about the pressure they felt due to staff and management vacancies and skill mix of staff they were working with. The provider has an ongoing recruitment process in place. The provider utilises agency staff to cover gaps in staffing. Care workers told us this can sometimes place additional pressure on more experienced staff. Support for care workers, including agency staff following incidents of challenging behaviour is not always provided. Gaps in staff supervision were noted and confirmed by the staff we spoke with. This one-to-one support provides an opportunity for staff members to discuss any concerns or training needs they may have and for their line manager to provide feedback on their work performance. This is an area for improvement, and we will follow this up at our next inspection.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
36	Care workers do not receive support and supervision on a regular basis.	New
58	The recording of medication administration was inconsistent and confusing, liquid medication did not	New

	have dates of opening.	
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