



# Inspection Report on

**Cartref Mynydd**

**Pontarddulais**

**Date Inspection Completed**

**19 October 2022**

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## About Cartref Mynydd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Orbis Education and Care Limited
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

This was a focused inspection to test if the service provider had made the necessary improvements to meet the priority action notice (PAN) in relation to staffing. The service is within CIW's Securing Improvement and Enforcement Pathway and this is the third inspection, which raises concern the service provider is not satisfactorily addressing the issue of the staffing shortfalls.

People are cared for by committed and responsive care staff who support them with their daily routines and assist them to achieve independence skills. People are making progress and there is a more open, active culture of people using the shared facilities regularly and spending time in the communal areas together. These developments, however, are set against a continued backdrop of significant staffing shortfalls, which are having an impact on people's ability to consistently achieve their planned outcomes and which continue to present potential risks to people and their care staff. Whilst CIW acknowledges the national workforce issues, the service provider's decision to admit new people to the service significantly contributes to the staffing difficulties and evidences a lack of oversight and governance by the service provider. Despite team leaders frequently stepping into the care staff numbers and regular, agency care staff usage, the number of care staff is frequently not meeting the commissioned staffing levels to meet people's needs and keep them safe.

Agency care staff profiles do not contain all the necessary information to assure the service provider of their suitability to work at the service. The service provider needs to take action to ensure the consistent safety and well-being of people and care staff at the service.

## Well-being

People express their views and are listened to by care staff, they make daily choices about their clothes, food and activities and are consulted about their outcomes in suitable visual formats. People are supported to make choices about the outcomes they wish to achieve, however, they are not consistently able to achieve these due to staffing shortfalls.

Care staff respond to people's emerging health needs and they support people to attend appointments with medical professionals. Healthy food options are made available and some people engage in regular exercise. Several people choose swimming as an outcome they wish to achieve, however, the staffing shortfalls mean they are not consistently able to do this.

People are safeguarded. Care staff are trained in safeguarding and the manager makes referrals to safeguarding as required. Some people regularly see their families and others have regular visits from external professionals.

The home is suitable to meet people's needs. People personalise their own rooms and they regularly use the communal areas. The garden area has facilities to promote people's sense of fun and well-being.

## Care and Support

This area was not fully reviewed as this was a focused inspection, however, during the inspection we observed people being supported by care staff with patience and sensitivity. Boundaries were reinforced and distraction techniques were used to reduce anxiety. Parents were positive about the care received and how settled their family member is in the home.

We saw pictures of people happily engaging with visual consultation exercises with staff to choose the outcomes and activities they wished to achieve, however, the regular staffing shortfalls mean people are not able to achieve these in a consistent and planned manner. Their daily diaries and the staff handover records show their planned activities in the community such as swimming and rugby are cancelled on occasions due to staffing shortages and people are not participating in their chosen activities regularly, as per their activity planners. Records show people's access and participation in activities in the community is variable with some regularly going out and others where it is more limited.

The staffing shortfalls mean care staff are not able to develop some people's ability to regularly participate in activities in the community. On occasions, people go out with their families and this then reduces the staffing shortfalls for a limited period and allows care staff to focus on the people remaining at the home. In these situations, care staff do their best to offer some form of outing in the community or activity within the home, but people are not getting into regular, consistent routines to achieve their identified outcomes in the community which promote their well-being.

## Environment

This area was not fully reviewed as this was a focused inspection however, we found the home to be clean, comfortable and meeting people's needs. People's bedrooms are personalised and the communal areas are open and regularly accessed.

## Leadership and Management

The service provider has an on-going recruitment drive for the service, however, people cannot be assured there is always a suitable number of qualified, experienced, trained and safely recruited care staff, to ensure the service operates in line with the statement of purpose. We found at times, this is impacting on people's well-being outcomes. On the day of inspection, the staffing levels were sufficient, albeit with the team leader's inclusion in the numbers and the manager also being included in the afternoon. A number of care staff have left the service and other care staff have been redeployed. Despite team leaders regularly being within the number of allocated care staff, rotas show staffing levels are at times, significantly under the required numbers of care staff to meet people's assessed needs and keep them safe. There is a significant use of regular agency staff to bolster care staff numbers, particularly on night shifts. Most night shifts have a sufficient number of care staff, however, when the numbers are reduced it can pose potential risks to the health and safety of the people who require 1:1 staffing at night.

A risk assessment is in place in relation to periods of critical short staffing, however, this requires review to ensure it is sufficiently robust and to confirm the commissioning local authority are in agreement to the reduced staffing levels. Care staff are provided with alarms to call for assistance when needed, however, there are not enough alarms available. The service provider provided assurance they are addressing this shortfall and putting contingency arrangements in place. This is particularly important in a context of staffing shortfalls where care staff maybe working with people on their own.

Agency care staff files do not contain sufficient information to demonstrate the service provider has ensured they are suitable to work at the service. Up to date information of core training requirements were absent from the profiles of agency care staff. During the inspection, the agencies were contacted by the service provider and the updated training was confirmed. Agency care staff receive an induction, although they do not always read personal plans and risks assessments before working with people as advised by the manager. Induction forms are not always signed by Orbis staff. The service provider needs to ensure they receive full information from agencies before agency care staff work at the service and the induction process requires improvement. This is an area for improvement and we expect the service provider to take action.

The Priority Action Notice remains in place in relation to staffing and it is a concern the service provider has admitted new people to the service, without fully considering the long-term impact such a decision would have on the overall well-being of all people living in the home.

This is the third inspection where shortfalls in meeting the regulations have been found; the service provider must ensure that they take the necessary action to ensure there are at all times, sufficient numbers of care staff to meet people's needs and to ensure the service

operates in line with the statement of purpose. The service provider needs to demonstrate robust governance and oversight of this service to ensure compliance with the regulations.

### 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
34	The service provider has not ensured that , at all times a sufficient number of suitably qualified , trained, skilled, competent and experienced staff are deployed to work at the service having regard to the statement of purpose and individual's care and support needs.	Not Achieved

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
35	The service provider is not ensuring agency profiles and induction processes are sufficiently robust	New

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