



Inspection Report on

Pantanas Care Centre

**Pantanas Care Centre
Pantanas
Treharris
CF46 5BN**

Date Inspection Completed

28/02/2023

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About Pantanas Care Centre

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	PANTANAS CARE CENTRE LTD
Registered places	30
Language of the service	English
Previous Care Inspectorate Wales inspection	07 April 2022
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 told us they are happy and well looked after at Pantanas Care Centre. Personal plans are produced in conjunction with people and their representatives and on-going reviews make sure they reflect people's current needs. People are encouraged to make daily choices and can participate in activities they enjoy. Care staff provide care and support in a dignified, respectful manner and there are adequate numbers of staff to ensure people receive care and support when they need it.

Care staff say they enjoy working at the home and feel supported and valued as employees. They have access to a rolling programme of training and development. Regular team meetings and supervision sessions keep staff up to date with developments and gives them the opportunity to voice their opinions. The environment is homely, clean, and comfortable. Regular servicing and checks ensure the environment and equipment is safe to use. There is a safe recruitment process and there are policies and procedures in place promoting safe practice. The Responsible Individual (RI) visits the service regularly and appears to have good oversight of service provision.

Well-being

The service has systems in place that help protect people from harm and abuse. Care plans and risk assessments set out safe ways of supporting people. Care staff receive safeguarding training and know how to report concerns. There are policies and procedures in place underpinning safe practice and are reviewed regularly to ensure they contain up to date information. Care staff adhere to infection prevention and control measures and have access to a plentiful supply of personal protective equipment to reduce the risk of cross contamination.

There is an experienced team of care staff who treat people with dignity and respect. We saw positive interactions between people and care staff. People told us care staff are kind and respectful. Personal plans are tailored to people's specific needs and are produced with input from people and their representatives. Positive feedback from people and their representatives suggests the service provides a good level of care and support.

People's health and well-being is monitored, and they have access to healthcare professionals. Monitoring tools such as re-positioning, mouth care, and personal care charts show people receive care and support in line with their personal plans. Care staff know the people they support well and can recognise changes in people's condition and report to the relevant healthcare professional for advice and support.

A pleasant environment helps support people's well-being. The home has several communal areas to ensure people have a choice where they spend their time. There are suitable furnishings and décor throughout. People's rooms are personalised to their preference and there is specialist equipment available for people who need it. The service is clean and maintenance work is completed to ensure environmental safety is maintained.

Care and Support

Personal plans detail people's care and support needs. We viewed a selection of personal plans and found they clearly highlight people's outcomes and provide information instructing staff on the best ways of supporting people to achieve their outcomes. Care staff we spoke to told us personal plans contain the information needed to support people well. We saw care and support is delivered in line with people's personal plans with supplementary charts in place detailing when and what care and support has been provided. Routine reviews ensure information recorded in personal plans remains relevant. We saw evidence suggesting people and their representatives are involved in the review process. This is positive as it gives people the opportunity to provide feedback on the care and support they receive.

People are happy with the care and support provided at the service. We observed positive interactions between people and care staff throughout the time we spent at the home. We could see care staff know the people they support well and are familiar with their preferences and routines. Many of the care staff have worked at the service for several years. People told us they have developed positive relationships with care staff and are treated with warmth and kindness. One person told us, "*The staff are brilliant. All of them, carers, nurses, they're all lovely*". Another person commented, "*The staff are wonderful, I can't fault them*". There is an activities coordinator who organises activities to keep people engaged. People told us they enjoy the activities on offer. We saw people participating in an arts and crafts session, making a display for St David's Day, and later enjoying a game of prize bingo.

There are arrangements in place for the safe storage and administration of medication. We saw medication is securely stored and can only be accessed by authorised personnel. Care staff receive medication training and there is a medication policy which is aligned with best practice guidance. We noted administrations of 'as required' (PRN) medication lacked detail regarding the effect the medication has had on the person. We discussed this with the management who assured us they would address this issue. We were told the service has a good relationship with health professionals and pharmacists and there are suitable arrangements in place for the ordering and disposal of unwanted medications.

Environment

The environment is clean and appropriately furnished and decorated. The home is set over two floors with lift access to the upper floor for people who have poor mobility. There are a number of communal areas with their own themes. For example, one upper floor lounge has a 'bar' theme, and the lower floor lounge has been decorated to resemble a café. We were told there are plans in place to develop another area into a cinema room where people can enjoy films. There are sufficient bathroom and toilet facilities throughout the service with specialist equipment such as hoists available for those who need them. We viewed a selection of bedrooms which were personalised with items such as photographs and ornaments. The service benefits from a rolling programme of refurbishment. On the day of our visit, we saw some areas of the home were being re-decorated and one of the bathrooms was being upgraded. Standards of hygiene in the kitchen have been assessed as satisfactory by the Food Standards Agency and menus show there is a good variety of nutritious foods on offer. One person said, *"The food is brilliant; they make me anything I want"*.

We saw evidence of a rolling programme of maintenance, checks and servicing in place to ensure the home, its facilities and equipment are safe. We saw appropriate checks and safety certification in place for utilities, equipment, and fire safety features. Each person living at the service has a personal emergency evacuation plan in place. This document ensures care staff understand the level of support people require in the event of an emergency. Items hazardous to health such as cleaning products are securely stored, and the building is secure from unauthorised access with visitors having to sign in on arrival and sign out on departure.

Leadership and Management

Care staff enjoy working at the service and feel supported in their roles. Records relating to supervision show staff are receiving the required levels of formal support. This helps aid their professional development and gives them the opportunity to discuss things like workload or concerns they may have. Care staff we spoke to confirm the management team are always accessible and provide a good level of support. One staff member said, *“The management are always there for you. They have supported me to work whilst being a single parent”*.

There is a safe recruitment process and care staff are trained to meet the needs of the people they care for. We examined a selection of personnel files including nurses and care workers. We saw the service completes all the necessary pre-employment checks before offering a new employee a contract. Following this, new employees complete a structured induction where they get the chance to shadow experienced members of the team. Care staff have access to an ongoing programme of training and development opportunities to ensure they are sufficiently skilled. Care staff we spoke to were positive about the training they receive. We looked at the services training statistics which shows most staff are up to date with their training requirements.

Quality assurance measures support good practice. Documented evidence shows the RI visits the service regularly and discusses operational matters and service delivery with staff and people. The RI also analyses a range of different areas relating to people, staffing and the environment to look for areas of good practice and identify where improvements are needed. On a six-monthly basis a quality-of-care report is produced which highlights the services strengths and areas where it can be developed further.

Written documents including policies and procedures support the smooth running of the service and promote safe practice. We saw policies are reviewed regularly so they remain aligned with current legislation and best practice guidance. Other written documents we saw included the statement of purpose and the service user guide. Both documents accurately describe the service and contain all the required information.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
19	The provider is not compliant with regulation 19(3) as the services user guide does not contain information relating to the availability of advocacy services.	Achieved
21	The provider is not compliant with regulation 21(2). This is because there is lack of clarity regarding peoples care and support recorded in their end of life care and support plans.	Achieved

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