



# Inspection Report on

**Caldey Grange Care Home**

**Caldey Grange  
Templebar Road  
Kilgetty  
SA68 0RA**

## **Date Inspection Completed**

11/09/2023

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## About Caldey Grange Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Caldey Grange Care Ltd
Registered places	18
Language of the service	English
Previous Care Inspectorate Wales inspection	5/12/2022
Does this service promote Welsh language and culture?	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

Overall people and their relatives are very happy with the care and support provided at Caldey Grange and speak highly of care staff. People are encouraged to be as independent as possible and make choices regarding how they live their lives. Care staff treat people with dignity and respect and have a good understanding of the needs of the people they support. Care documentation is accurate and up to date, helping care staff deliver good quality care and support. Care staff feel supported in their roles and receive regular, relevant training so they remain sufficiently knowledgeable and skilled. A safe recruitment process ensures care staff have the necessary skills and qualities needed for working in the care sector. Governance and quality assurance is overseen by the Responsible Individual (RI) who visits the service regularly to discuss provision with people and staff. Written information such as policies and procedures are kept under review and guide staff to ensure best practice is followed. The environment is maintained to a high standard and promotes the independence and well-being of people living at the home.

## Well-being

Generally people living in Caldey Grange are protected from harm and abuse. The management and care staff regard any incidents which do occur very seriously and quickly establish measures to prevent such an incident happening in the future. People have risk assessments and management plans in place, helping to keep them healthy and safe. There are also generic risk assessments which highlight possible risks within the home. Care staff receive safeguarding training and there is a safeguarding policy which is aligned with current national statutory guidance. Care staff we spoke to said they are aware of their safeguarding responsibilities and the process for reporting concerns. Any safeguarding incidents are reported appropriately.

People are very actively supported with their health and well-being and their independence is promoted whenever possible. Care staff know the people they support well and can recognise physical or mental health issues quickly. We saw strong evidence that advice is sought from relevant professionals in order to promote people's physical health and well-being. There are robust medication management systems in place ensuring people's medication is stored and administered safely.

People are encouraged to voice their opinions and are treated with dignity and respect. People are involved in their care planning and contribute to reviews of their care documentation. Personal plans are up to date and accurately reflect people's needs. People, and their relatives, told us they are very regularly consulted and are encouraged to voice their opinions. People's views on service provision are collated to help inform improvements. The positive feedback from people and their relatives regarding care staff indicates they are kind, considerate and respectful.

People live in a home which supports their well-being. The home is clean and comfortable throughout. People are encouraged to personalise their rooms to their preference if they choose to and there was clear evidence of this. The home is maintained to a good standard. An ongoing programme of maintenance, checks and servicing promotes environmental safety.

## Care and Support

All people living at the service have personal plans in place. These set out the best ways of supporting people to achieve their personal outcomes. Personal plans are person centred, meaning they are specifically tailored to each individual. We examined a selection of personal plans and found they are clear and concise. Risk assessments are also included. These highlight potential risks and strategies for keeping people safe. They also highlight the benefits of taking risks, allowing people to experience positive risk taking. Care staff we spoke to told us personal plans contain the right level of information for them to provide effective care and support. Personal plans are regularly reviewed to ensure they remain relevant. We saw evidence people participate in person centred planning and reviews, where they discuss the effectiveness of the plan and any changes which might be necessary.

People have very good relationships with care staff. We observed positive interactions between people and care staff throughout our inspection. It was evident care staff know the people they support well and are familiar with their needs and daily routines. We saw care staff engaging with people in meaningful conversations, speaking in a friendly, informed and respectful manner. People, and their relatives, provided complimentary feedback regarding care staff.

Medication management systems are effective, ensuring medication is stored and administered safely. Medication is stored securely and temperatures are recorded. People have medication support plans detailing how and when they take their medication. They also contain information about their medication and any risks associated with it. There is a medication policy and care staff receive training to help them administer medication in line with best practice guidance.

Written information is available for people to view. The statement of purpose sets out the service's aims and objectives and evidences how it can meet the range of needs which are catered for. People are informed about the ways in which any concerns or complaints can be reported.

## Environment

Caldey Grange can accommodate up to eighteen people. Accommodation is on two floors and there is a lift and a stair lift if people need assistance to move between floors. Bedrooms are comfortable and well furnished. They are personalised with items that are important to people, for example, photographs, ornaments and small items of furniture. The large and bright conservatory is well utilised by people and visitors. The dining room is well equipped and comfortable, offering people an opportunity to socialise if they wish to.

There is a good standard of cleanliness throughout the service. There were no malodours and both care workers and people living in the service are satisfied with the standards of cleaning. The housekeeping staff are part of the team and they engage with people in a friendly and relaxed way.

Clear signage helps, especially those living with dementia. Pictorial and written signs show where bathrooms, toilets and communal areas are. The doors to people's own bedrooms are designed to look like a front door in order to assist people to feel a sense of ownership and belonging.

The service is well maintained and in good decorative order. There is a rolling programme of checks and maintenance ensuring the environment, its facilities and equipment are safe. Utilities such as gas and electricity are regularly inspected by appropriately qualified people and have the necessary safety certification in place. There is a fire risk assessment and fire safety features such as alarms and fire fighting equipment are regularly serviced. There is sufficient storage space available and substances hazardous to health are securely stored. The home is secure from unauthorised access with visitors having to sign in on arrival and out on departure. The kitchen has been awarded the maximum rating of five by the Food Standards Agency. It is clean and has all the equipment needed.

The garden areas are safe, accessible and well maintained. They offer a pleasant place for people to spend time when the weather permits.

## Leadership and Management

Care staff are subject to a thorough recruitment process. This is to ensure they are suitable to work with vulnerable people. Pre-employment checks include references from previous employers and Disclosure and Barring Service (DBS) checks. On commencement of employment, new employees must complete a structured induction. Care staff are required to register with Social Care Wales, the workforce regulator. This is to ensure they are suitably qualified.

Care staff are trained to meet the needs of people living at the service and feel valued and supported. Care staff receive core and specialist training. Core training covers generic topics such as health & safety, safeguarding and infection control. Specialist training is specific to the needs of the people living at the service. We looked at records relating to training and found the service is compliant with its training requirements. We also looked at records relating to supervision and appraisal and found care staff are receiving the required levels of formal support. Care staff we spoke to said they feel supported in their roles. They told us they are supported well by their manager, who they can approach at any time, and by their colleagues. They reported a high sense of team morale and said the home is a good place to work in.

Governance and quality assurance measures help the service run smoothly. The Responsible Individual (RI) has good oversight of service provision. They visit the home regularly and meet with people and staff to discuss their experiences and gather their views to inform improvements. During these visits the RI also analyses records relating to staffing, care and support and the environment. Satisfaction surveys are also distributed to people, professionals and staff and these are collated for the quality of care report which is produced on a six-monthly basis. There is a high level of satisfaction for the service provided at Caldey Grange.

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