



Inspection Report on

Capel Grange Nursing Home

**2 Capel Court
Capel Crescent
Newport
NP20 2FG**

Date Inspection Completed

11 October 2022

Welsh Government © Crown copyright 2022.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

About Capel Grange Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Linc Cymru Housing Association
Registered places	72
Language of the service	English
Previous Care Inspectorate Wales inspection	04 December 2019
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

Since the last inspection, a new manager has been appointed and working well. The Responsible Individual (RI) regularly visits the service and there are systems in place that can be relied upon to keep the RI well informed of the quality and safety of the service. Staff felt well supported and confident that the manager and RI would act on any concerns.

People are happy with the care provided and with the staff team. People's voices are listened to, and they are given the opportunity to be involved in influencing their care and support. Care plans are in place to identify people's needs and preferences, but some improvement is required to ensure they are fully up to date. There is good access to health care services to monitor and treat people's health and well-being. The service is aware of the importance the role that activities play in supporting people's well-being.

The environment is homely, and people are supported safely. Equipment is suitable for people's needs, including those who require more bespoke nursing care. A good standard of hygiene and infection control is maintained to reduce the risks of infection.

Well-being

Staff are kind, caring and treat people with respect. People are supported to communicate their wishes and feelings. We saw people having light-hearted conversations with care workers. People are given choice about where they would like to spend their day and some people have bespoke chairs to enjoy the company of others. A relative told us '*The staff go over and above what is expected of them, they are brilliant*'. Another said, '*The carers are wonderful*'. Individuals are consulted about the range and frequency of activities. The service understands the value of supporting people to have access to stimulating activities. People are actively supported to maintain regular contact with their family and friends which they looked forward to.

Overall, people receive care and support to meet their personal outcomes. Care plans are in place to inform staff how best to support people, but some information was incorrect, or needed to be updated. This can lead to incorrect care being received which can place people at risk. The dining room experience requires improvement to ensure people receive the correct nutritional requirements and staff assistance to maximise their nutritional intake. People's health and well-being is well monitored, and appropriate referrals are made to other professionals, when needed. The service provider took immediate action to address the issues. Visiting professionals are complimentary of their experience when visiting the home. There are arrangements in place for the safe administration of medication but there needs to be improved oversight of some 'when required medication'. Individuals and their representatives are consulted about their review meeting, and where necessary professionals are involved to support changes.

People live in an environment that keeps them safe. The environment and equipment are maintained to a high standard to support people safely. People are satisfied with their individual bedrooms and can easily access their en-suites and outdoor areas if they wish. Equipment is suitable for people's needs, including those who require more bespoke nursing care. There are emergency evacuation plans in place for each person to inform care staff of the assistance required to safely evacuate in the event of an emergency. The standard of hygiene and infection control is maintained to reduce risk of cross infection and in line with current guidance.

People can be confident in the governance arrangements at the home. Since the last inspection, a new manager has been appointed and working well. Staff spoke highly of the manager and felt well supported. The manager told us that they receive good support from the senior management team and RI. The RI regularly visits the service and there are systems in place that can be relied upon to keep the RI well informed of the quality and safety of the service. Staff are trained and understand the people they support, but some additional training areas are being planned.

Care and Support

Care is being delivered in a dignified way and staff encourage people to maintain as much independence as possible. We observed staff being respectful and positively engaging with people. People appeared comfortable and well-kempt. Care records show that people receive regular personal care, and they are well supported. However, further improvement is required to ensure care plans are fully reflective of people's preferences about the frequency of showers. When showers are not provided an explanation should be recorded. People told us *'I am happy living here' and 'Staff are very caring'*.

People are given information about the service which describes what the service provides. Pre-assessments are undertaken prior to admission to confirm that the home can meet the person's needs and requirements. People's needs and wishes are set out in personal care plans and risk assessments to inform staff how best to support people and their preferences. Generally, the plans are detailed but we found some instances when care information was incorrect or not easily identified in the relevant care plan, which can cause people to receive incorrect care and support that can place people at risk. Accident and incidents are reported, and the appropriate action is taken. Individuals and their representatives are consulted about their review, and where necessary professionals are involved to support changes. People who find decision making difficult are referred for appropriate support and advocacy currently visits the home.

Group activities are offered in addition to individualised one to one time and records confirmed this. There are currently two motivated activity coordinators employed at the service for five days per week. Staff told us *"There is a big emphasis on interaction and involving residents, ensuring that their lives are enriched"*. The home has a restricted access social media page for relatives to keep informed about events happening in the home, which they find valuable. On the day of our inspection visit, the local Choir provided a concert which people thoroughly enjoyed. We saw posters displayed to invite friends and relatives to future events. The suitably trained activity coordinators can assist with care provision, when required.

People generally complimented the food, although some commented they would like more choice when having a modified diet. People told us that the food was varied, and the meal appeared well presented and appetising. There are alternative food options available for people. The menu is not displayed in the home to inform people and their representatives of the food options for the day. The manager assured us that this would be looked into. People should be encouraged to sit by the dining tables to enjoy socialising with others at mealtimes. We observed the dining room experience and found that overall, there was a mixed experience for people. Most people we observed received a positive involvement when they are assisted by staff to eat their meal at their pace, which promotes people's nutritional intake. However, we found an individual had been given the incorrect consistency of food and not given the appropriate assistance to eat the meal which is

contrary to their care plan. This resulted in the food becoming cold and a lack of nutritional intake. This led us to look at people's nutritional requirement information in the dining room and care documentation. This showed some incorrect dietary requirements recorded for a few people. We are aware that the manager took immediate action to address the issues as this could significantly compromise people's health and well-being. We found that dieticians inform the home of the appropriate diets for people who have difficulty swallowing and are at risk of choking. Weights are regularly monitored but we found some gaps in this information. Audits are in place to ensure people's weights are monitored and when needed we found appropriate referrals are made to the Dieticians. All staff receive nutritional training, but some staff require IDDSI training for modified diets and thickened fluids.

People can be assured that there are effective arrangements in place to monitor people's health and well-being. There are good relationships with the GP practice, and they visit on a weekly basis. We found appropriate professional referrals are made to seek advice and support. There are care and support plans in place to inform staff of the clinical health risks and how best to support the person. The management of medicines was not fully examined at this inspection. However, there is a robust medication policy in place for staff to follow. Staff administering medication are appropriately trained and their competency is regularly assessed. The medication administration charts confirm that people receive their regular medication but there needs to be improved oversight of some 'when required' medication. We found daily notes that identified the need for "as an when required medication" to be administered, but this was not given when looking at the medication charts. This was a missed opportunity to identify changes and take prompt action. The manager immediately addressed the issue. There are treatment plans in place for effective management and monitoring of wounds. Records show that people receive regular treatment and appropriate pressure relief, in line with their personal plan. Regular mattress checks take place to encourage wound healing and relief. We found people are appropriately assessed when bespoke equipment is required such as, wheelchairs and comfy chairs to provide comfort and encourage people to spend time with others in the communal areas. This is particularly important as the needs of people can place them at risk of increased isolation.

Environment

The service provider ensures people's care and support is provided in an environment that promotes their personal outcomes. The home offers a few communal areas for people to socialise together or spend some quiet time. The gardens are well maintained and in the warmer weather people can enjoy. People we spoke with are complementary about the environment and felt at home. A relative said '*It is such a pleasant atmosphere*'. There are a variety of aids and equipment available to enhance people's mobility and ensure their comfort. We saw staff appropriately using the equipment to ensure people safely transfer. The environment is fully accessible for people with mobility difficulties which promotes people's independence. People have accessible en-suite showers and toilets, but there is also a communal bath available to accommodate people's preferences. People told us they are encouraged to have personal items displayed to make the environment more homely. The home is pleasant and welcoming.

There are safe arrangements in place to identify and mitigate risk to people's health and safety. The building is secure and there are locks in areas where people are particularly vulnerable and would pose a risk. Visitors are asked to record the times and people they are visiting, to ensure they are authorised and for fire purposes. People living in the home have a personal emergency evacuation plan which informs staff of the assistance they require to safely evacuate in an event of a fire. There are servicing arrangements in place to ensure all equipment in the home is regularly serviced. We found the home free from clutter and hazards. All staff told us that they understand the importance of health and safety and records show they have undertaken training in this area.

The service promotes hygienic practises and manages the risk of cross infection. We saw that staff wear personal protective equipment appropriately. There is sufficient supply of personal protective equipment (PPE) available throughout the home for staff to use. The home appeared clean and free from any unpleasant odours. Staff understand the importance of infection control as they have undertaken training in this area. There are good arrangements in place for visiting, which enables people to regularly see their family and friends safely in their personal room, quiet lounges, and the family meeting room.

Leadership and Management

Since the last inspection visit, there is a newly appointed manager, but they have worked at the home for several years so knows the home well. The manager has the appropriate experience, expertise and suitably qualified for their role. Staff told us that the manager is approachable, supportive, and visible in the communities. A staff member told us *'I feel valued, and any concerns are considered'*. A relative told us, *'The management are approachable and always there to help'*. The manager confirmed that they receive regular support and advice from the service provider.

People can be confident that there are good governance arrangements in place to assess and monitor the quality and safety of the service. The RI regularly visits the home to test the quality of care provided but these visits should also consistently include speaking to people to seek their views. However, the RI has formally met with people living in the home and their representatives to discuss the service and future developments. A detailed quality care review is carried out to monitor and review the quality of care provided at the service which is shared with the service provider. This report demonstrates that the service is providing a quality service and identifies areas for improvement. There is robust auditing of information which analysed such as, accident/incidents, call response times, wound management etc, to identify any patterns and trends for prompt action to be taken. The quality assurance arrangements in place keeps the RI well informed of the performance of the home.

People told us that they could raise concerns and records shows that the service responds in line with their complaint's procedures to ensure people felt heard and take the opportunity for lessons learnt. The staff understand their role in safeguarding people and can recognise different types of abuse as they have undertaken training in this area. The staff felt confident and at ease to identify concerns to management and confident they will be acted upon. The safeguarding policy is available and up to date for staff to follow.

Staff understand the needs of people they support. Staff morale in the home is good and a staff member told us *'I feel happy and proud of where I work'*. Records show that staff receive an induction and regular mandatory training to understand the role they perform. However, for staff to understand specific conditions of the people they support, core training is needed in some additional areas. This is being planned. Staff appeared knowledgeable, and competent to care for people living in the home. Staff told us they receive regular opportunities for supervision with the manager which they find of value. We saw that the staff skill and experience was mixed to ensure experienced staff are available to mentor and guide new staff. The home is working hard to use innovative ways to recruit new staff to maintain continuity for people, however, this is challenging for all providers in Health and Social Care Services. People can be assured that the service is run in accordance with up-to-date policies and procedures which underpins staff practice when supporting people.

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
------------	---------	--------

21	Care and support plans to be kept up to date to ensure people's personal outcomes are fully reflected for staff to follow. People to receive the appropriate assistance and encouragement at mealtimes to ensure their nutritional outcomes and requirements are met.	New
----	---	-----

Date Published 18/11/2022