



# Inspection Report on

**Capel Grange Nursing Home**

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

## **Date Inspection Completed**

15/11/2023

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## 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	11 October 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

Capel Grange is a purpose-built care home which is divided into five separate units, known as individual communities by the home. Three of the community's care for people with general nursing needs, the other two communities provide specialist dementia services. All of the relevant safety checks are carried out and records kept. The home is generally well maintained. The specialist dementia communities are designed to meet the needs of people living with dementia. Some areas of the home would benefit from redecoration.

The home benefits from a passionate and experienced management team. All systems within the home are extremely well organised. Care staff treat people with kindness and genuine warmth. People are happy living in the home and are complimentary about the support they receive. Individual plans are produced for each person which clearly inform staff about the person and their care preferences. Care records are generally good but we found some gaps in recordings so we could not be assured everyone is being supported in line with their plans at all times. A new head chef has recently been appointed to improve the quality and choice of meals provided.

## Well-being

The home has a group of residents who represent the communities they live in. The group is called 'The Voices of Capel Grange' and currently consists of nine people. Everyone is encouraged to join in the group or to talk about their suggestions with their representative. The group meet with the management team frequently to discuss upcoming events, activities within the home, ideas and suggestions, food choices, and the environment they live in. The group is effective in supporting people to have a genuine voice in how the home is run. The management team are committed to this process, and we saw evidence of actions being taken as a result of the discussions.

People have individual choice about the time they get up each morning, what they do throughout the day, and when they go to bed at night. The home employs two activity coordinators, who are very popular with the residents. A wide range of group and one to one activities are organised. A hairdresser visits three times a week. A number of entertainers visit the home, including singers, a jazz band, and the memory man. We saw people enjoy having a sing-along with the 'forget me not' choir and joining in an armchair exercise class during our inspection.

People are very complimentary about the support they receive. One person told us "*Staff come straight away if I call for them, they are really excellent. I get treated so well.*" Another person's relatives were visiting and told us "*It is excellent, the staff are very caring. The home is always very clean, and the activities are amazing. We are always kept well informed of what is going on, it's so reassuring.*"

People are protected from the risk of harm and abuse. Care workers have a good understanding of the people living in the home and are aware of how to report a concern if one arises. The management team work closely and openly with external agencies to ensure people are kept safe.

## Care and Support

People receive care and support as and when they require it. Personal plans are clearly written to inform care staff about the person, and their social history, as well as their care needs and preferences. Plans have a focus on what the person can do for themselves, and what outcomes they would like to achieve. We saw care workers supporting people with genuine warmth and compassion throughout our inspection. Care staff refer any changes in people's health or presentation to qualified nurses promptly for the nursing team to review. People are supported to be as independent in their day-to-day lives as safely as possible. Care records have recently been transferred onto an electronic system. We found some gaps in records of care and one occasion where a person's risk assessment had not been clearly updated. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Referrals are made to health and social care professionals when needed. People are registered with a local general practitioner (GP). Records are kept of all appointments and outcomes for review as required within the daily notes. People are supported to maintain a healthy weight and diets are reviewed when required. Drinks are readily available for people throughout the day. People are supported to be as independent as possible. Where people are unable to keep themselves safe, the necessary procedures are followed. Appropriate arrangements are in place with the Local Authority to ensure decisions are made in people's best interests, when required.

People enjoy their meal experience which is a pleasant, relaxed and social time of the day; people are encouraged to be as independent as possible and supported when required. We saw people enjoying their lunchtime meals whilst chatting with each other and care staff in a relaxed and friendly manner. We had some mixed feedback about the quality and choice of meals. The home has recently employed a new head chef to make improvements in this area.

Systems are in place for the safe management of medication within the service. We saw accurate records are kept, including when the home has liaised with the persons GP. Infection prevention and control procedures are good. The standard of cleanliness is high throughout the home. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance.

## Environment

The home is generally maintained to a good standard. The home is clean and tidy throughout. The two communities where specialist dementia care is provided are known as 'memory lane' communities. The décor in these communities is well designed to help people orientate themselves. There are stimulating colours and designs throughout these communities, with well thought out designs such as old shop fronts and a bus stop with a bench. The other communities have more calming décor, some of which would benefit from redecoration, the manager assured us this would be considered. People's bedrooms throughout the home are spacious and personalised to their own tastes. Individuals have personal mementos and keepsakes which helps to provide a familiar and homely room. Bedrooms all have en-suite shower facilities. The communal bathrooms are well equipped to meet people's needs.

Each of the units has a designated lounge and dining room. The lounges are laid out to encourage small groups to socialise. The dining rooms include kitchenettes for food to be served from and allow for people to make their own drinks if they choose to do so. The entrance to the home is spacious and inviting. A Christmas tree was decorated, and raffle prizes displayed for the upcoming Christmas festivities. The entrance leads into a large room which is used for various events, celebrations, and has a large screen for movie activities for people from all communities in the home. This room, in turn leads into a sun lounge which is a pleasant room often used by visitors to spend time with their loved ones.

The outdoor space is enclosed with areas of imitation grass, some memorial raised flower beds, trees, and wind chimes giving a calming effect. The garden furniture is sturdy and in good condition, there are covered areas and patio heaters. The manager told us a sensory garden was planned after discussion with the residents group. People benefit from a secure environment; the front door is kept locked. We viewed the maintenance file and saw all serviceable equipment is checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency. The home has a five-star rating from the food standards agency which means that hygiene standards are very good.

## Leadership and Management

People benefit from effective leadership and management. We saw the manager and deputy manager interacting warmly with people throughout our inspection visit. Care workers told us they feel valued, and the management team are very approachable. Staff are complementary about the service as an employer, and about the care and support residents receive. One care worker told us *“The residents are all really well looked after. The manager is great, if I have any questions, I can go to her or one of the nurses, they are all good listeners.”* Another told us *“I love it here; the teamwork is really good, and the manager is very supportive. The relatives are very well looked after, we are like one big family.”*

There are a sufficient number of care workers on duty to support people in a relaxed and unrushed manner. Care workers receive one-to-one supervision with their line manager on a regular basis. This is where any concerns or suggestions can be raised, and the performance of the staff discussed. Care staff told us they are confident in their roles. They complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm. Care workers personnel files are well organised, and contain all of the required information, such as references from previous employers, Disclosure and Barring Service (DBS) checks, and evidence of registration with Social Care Wales (the workforce regulator).

The RI undertakes regular quality assurance checks by visiting the home to talk to individuals and care staff and review documents. The RI completes detailed, thorough, and comprehensive audits of the quality of the support provided as well as the wider running of the home. The reports highlight where the home is performing well, as well as areas for improvement.

### 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
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.	Not Achieved

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