



## Inspection Report on

**The Forge Care Centre**

**The Forge Care Centre  
287 Cowbridge Road West  
Cardiff  
CF5 5TD**

## **Date Inspection Completed**

03/01/2024

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## About The Forge Care Centre

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Forge Care Homes Limited
Registered places	76
Language of the service	English
Previous Care Inspectorate Wales inspection	6 October 2022
Does this service promote Welsh language and culture?	This service is working towards an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of Welsh language and culture.

### Summary

The Forge Care Centre provides care and support to people, some with complex nursing needs and dementia. People like the dedication of the staff team who treat everyone with dignity and respect, describing them as “*amazing and really hard working.*” An extensive activity programme is “*stimulating,*” improving opportunities and people’s well-being. Overall, people’s clinical needs are monitored, and external support from health professionals arranged when required. Documentation around care is in place and reviewed regularly.

The home is warm, bright, clean and smells fresh. A programme of renewing and refreshing furnishings and décor is taking place to improve the environment. People have suitable equipment to meet their needs.

The provider has a nominated responsible individual (RI) who oversees the service and quality of care delivery. A newly appointed manager is effectively addressing some shortfalls in the service that have occurred due to the unavoidable absence of the previous manager, including communication. The daily monitoring and improving of the service needs to improve. Care workers and nurses are safely recruited, feeling valued and supported.

## Well-being

People have the right information to help manage their well-being. A 'statement of purpose' tells people what to expect from the service. An initial assessment where care and support needs are discussed with a senior member of staff helps to inform people how their care will be delivered. People or their representative are involved in agreeing the plan of care and help to review this regularly. People or their representative are kept informed of anything that may require decision making, including for example, vaccinations available to them through visiting health professionals. Families are regularly consulted and updated about health and care management so they can take an active role in supporting the person to make the best choices for them, but some families report that information is not always accurately passed on. A closed social media group for family helps keep them informed of activities offered to loved ones, and are invited to join in with these. People are encouraged and supported to take part in an array of stimulating activities which are planned and advertised in advance, including trips into the community and places of interest further afield.

Mechanisms are in place to keep people safe but there is room for improvement. Recruitment processes are robust to ensure staff are fit to work in the home. Staff are trained in safeguarding procedures, so they know when to report concerns and one family told us, "*Staff are exemplary in safeguarding loved ones.*" The service has not identified specific training to support people's needs as part of monitoring and action needs to be taken to address this. Policies and procedures are in place to support people and staff, giving information how to raise concerns and complaints if necessary. People have access to family or advocates if they find decision making difficult to ensure their best interests are considered when action is being taken. The building is secure.

Voices are heard and listened to. When people are unable to verbally communicate, staff understand subtle body language to help provide the care needed, and day-to-day support is provided without more formal consultation. People and their families are invited to attend formal meetings, and a quality assurance system invites them to respond to a questionnaire. This helps inform management on how the service can improve, but further information could be gained by more in depth one-to-one consultation. Improvements have been made in response to people voicing ideas, including the provision of a varied activity programme.

People are treated with dignity and respect. Families and their loved ones give consistent feedback about the staff, confirming they are "*hardworking,*" "*thoughtful,*" "*very caring,*" "*patient and calm,*" and treat people with "*respect and genuine care.*" People mostly confirm that they feel uplifted by the interactions from staff and "*feel loved.*"

## Care and Support

Personal plans include sufficient detail to inform and enable staff to meet the individual's care and support needs. People are consulted about the care and support they would like before admission to the home. Personal plans are developed from this, providing nurses and care workers with information they need to support the person in their preferred way. Risk assessments help to consider the level of support people need. Daily notes record the care delivered, demonstrating that this is in line with the agreed plan, but this is not consistently recorded in one place. Medication administration records are good. Supporting documentation is contained within personal plans to ensure a person's wishes can be followed, such as 'advanced care plans' to let staff know what to do if the person is coming towards the end of their life. Personal plans are audited, and the RI reviews a selection as part of their quality control. People or their representatives are involved in the review of the plans, and these are updated or made if change is required.

People are supported with their clinical and physical needs. Nurses and care workers know people and their individual needs and preferences well. Health professionals are consulted when clinical needs require additional support. Some preventative measures are taken to stop people's physical health deteriorating, including managing good skin care. More in depth monitoring of people's weights, fluid and nutritional intake is being arranged to ensure prompt action is taken if required. When people are unwell or towards end of life, they have access to the right support, including medication.

The provider ensures people's emotional and mental health needs are considered, and where possible, supported. The service has driven improvements, now providing opportunities for people to be involved in activities to promote mental health and well-being seven days per week. People's wish not to be involved is respected. One family member told us their loved one, "*Has blossomed, now dancing and singing,*" since moving into the home, and another told us there are an "*Amazing array of activities.*" Families like that they can see activities happening through photos and videos on a closed social media group and told us they feel welcomed into the home. We observed warm, compassionate interactions between people and staff that offers tender reassurance and comfort. One family member told us how their relative feels "*Cared for and loved,*" and another told us, "*Love and care is second to none.*" Support of people with dementia who present with behaviours that challenge can, on occasion, be disruptive, but external professional involvement is arranged to help reduce the risks to the individual and others.

## Environment

The provider maintains a safe environment that supports care delivery. Regular monitoring and maintenance of the building takes place. Services, including gas and electricity are serviced and tested as required. The service has improved ratings with the Food Standards Agency, and the manager continues to work with newer chefs to ensure the record keeping around food hygiene meets the required standard. The home is secure. Risk assessments are in place for example, Fire and Legionella, with external contractors providing advice and regular reviews. Routine testing and maintenance takes place. Passenger lifts are available to support movement throughout the building and these are serviced, tested and maintained. Action is taken when, for example, the lift breaks down or the heating is not working effectively, ensuring people have a comfortable and safe environment in which to live. The outdoor garden area is accessible and provides a space where people and families enjoy gathering for events. A programme of refreshing and renewing is underway, and one family told us, "*The environment is tired but there's absolutely no impact*" on people and their care. Some people commented that they would like repairs addressed quicker. The home is bright and is clutter free to prevent trip and fall hazards.

The building is suitable to meet people's needs. People have their own bedroom which is personalised, often with family helping to make rooms a 'home from home.' Communal areas are different sizes. These are mostly well managed. People who prefer smaller gatherings have the option to be in a space that feels safer to them. People are supported to move to communal areas that help meet their social needs. Notice boards display information, including activity schedules and posters encouraging the use of the Welsh language. People with more physical needs can access bathing facilities and are encouraged to do this on a regular basis to promote good skin care.

Furnishings and equipment are provided to meet people's needs. Adjustable beds and mattresses to help prevent skin damage are in place for people who need this. Appropriate seating is available to support those less mobile. Some dining spaces have smaller tables so that care workers can sit alongside someone to assist with eating. Some furnishings need replacing, but this is underway as part of the refreshing and renewing of the environment.

Infection control measures are followed. We saw staff routinely using personal protective equipment such as gloves and aprons to prevent any spread of infection. There are ample supplies of hygiene materials and routine cleaning takes place. The home smells fresh and overall people told us the environment is kept clean.

## Leadership and Management

A responsible individual (RI) has oversight of the service. The RI, who is also the provider, visits the service, considers the quality of care provided and demonstrates that they listen to people and staff to inform decision making around how the service can improve. One family member told us, *“Even if they’re not right all the time, they care enough to listen and where able, improve.”* Policies and procedures are in place, and the ‘statement of purpose’ is regularly reviewed and updated, telling people what the service offers.

Safe recruitment systems are followed, and staff are supported to learn and develop, but the service is not always identifying training required. Robust systems are in place to check that members of staff are fit to work with vulnerable people before they start working at the service. Personnel files contain all relevant information. Nurses and care workers maintain their registration with their professional workforce regulator. All staff have an induction to the service and mandatory training is provided. Through supervision meetings, staff can identify their learning and development needs, and where possible, this is supported, but as part of the monitoring and improving of the home, further work is required to ensure the provider identifies training requirements for the whole staff based on people’s needs.

Staff feel supported and valued. The ethos of the provider extends throughout the service, with support and care shown to everyone. Most of the staff tell us that the staff work together as a team and are supportive of one another. There is an ‘open door’ policy where senior managers are available, and most staff tell us that *“they always listen.”* A newly appointed manager is showing strong leadership, and many staff tell us the manager is *“all about the residents,”* prioritising their needs, which is respected.

The service is run smoothly but there is room for improvement. Due to unavoidable absence of a manager over the past year, with pressures on other managers to help cover, some aspects of the home’s monitoring and improving systems have been disrupted. Changes are now taking place to address this. While systems are in place and followed, these are not always effective in identifying actions that need to be taken. Communication systems in general need improvement to ensure consistent messages across the staff team and accurate messages from people, or families, are passed on. Improvements required have been discussed in depth with the manager and RI, who have taken immediate action to start addressing these. The day-to-day monitoring and improving of the service is an area for improvement and though there is little impact on people using the service at present, there is potential for greater risk. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

### 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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8	The provider is not ensuring that the day-to-day 'monitoring and improving ' systems within the service are effective.	New
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