

# Inspection Report on

**Baltimore Care Ltd** 

Baltimore House 1-2 Park Road Barry CF62 6NU

## **Date Inspection Completed**

05/08/2024



#### **About Baltimore Care Ltd**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Baltimore Care Ltd
Registered places	26
Language of the service	English
Previous Care Inspectorate Wales inspection	25 January 2023
Does this service promote Welsh language and culture?	This is a service that is working towards an 'Active Offer' of the Welsh language and intends to become a bilingual service.

#### **Summary**

Baltimore Care Ltd can accommodate 26 residents with personal care needs. This inspection was unannounced. The service has recently changed directors and the responsible individual (RI) is in the process of registration with Care Inspectorate Wales. (CIW) There is a newly nominated manager who is registered with Social Care Wales, the workforce regulator in accordance with legal requirement.

People receive appropriate care and support from a friendly team of care staff and there are a sufficient number of care staff to cover any shortfalls. Management demonstrates appropriate oversight of the service, aided by audits and policies. People receive an improved range of social and recreational support in accordance with their interests.

The management team are visible and engaged in the day-to-day running of the service. Care documentation reflect the care and health needs of people living at the home. People live in an environment which is suitable for their needs. There is an ongoing scheduled refurbishment plan in place and additional building works planned to improve the environment. The home is clean and secure throughout. People are consulted about the care and support they receive. Infection prevention and control processes are in place to reduce the risk of infectious diseases being spread throughout the home.

### Well-being

People have a good choice of meals and drinks to suit their nutritional needs and preferences. The home has achieved a 5-star (very good) food hygiene rating. We saw people enjoying the meals provided and observed the mealtime experience to be a calm and sociable time for people to enjoy. Care staff treat people with respect and have good relationships with those they care for. During our visit, we saw care staff interacting positively and people told us they had a good working relationship that was respectful. We saw staff putting people at ease through conversation and support.

Management oversees the training and supervision needs of staff. Team meetings take place specific to each worker's role. There is robust recruitment process in place. Care staff are trained in safeguarding and have policies and procedures to guide them. Safe recruitment checks are undertaken to ensure staff are suitable to work with vulnerable people. Staff training is mostly up to date and additional training available for care staff. The service makes safeguarding referrals when required and notifies CIW of notifiable events in a timely manner. Feedback about the service describes it as unanimously 'very good' from people living in and visiting the home. Measures are in place to promote best practice throughout the home. There is appropriate oversight of incidents, accidents, complaints and safeguarding matters. A statement of purpose is present which reflects the service.

People receive appropriate person-centred care and support. Their wishes and aspirations are considered, and care staff demonstrate a friendly, helpful approach. Care documentation supports the delivery of care and support however we discussed where some improvements could be made. People are encouraged to have visitors to the home and supported to stay in touch with important contacts. People are supported to have control over their day-to-day life wherever possible. People mostly follow their own routines with support, assistance and encouragement from the staff team. The care staff we spoke with were familiar with people's individual preferences and needs and these are recorded in the care documentation. People told us their views and opinions are listened to and they can raise any concerns with the staff team or management.

People are safe and protected from harm. The entrance to the home is secure. Arrangements for fire safety and general maintenance are in place. The home is clean and suitable for the needs of the residents. However, we saw some areas appeared tired and worn throughout. We were told that a planned schedule of works had commenced and planned for the next few months which will be followed up at the inspection visit.

#### **Care and Support**

Systems are in place to protect people who use the service. We observed people's body language and expressions indicating they felt safe and secure around the care staff who support them. Comments from people using the service included "This home is very good; I feel listened to here," "the staff are very kind to us" (resident). During the visit we observed banter and laughter around the home providing a homely environment and people feel a sense of belonging. Care staff told us they understood the importance of reporting concerns and that they feel able to approach the manager with any issues or concerns and feel extremely well supported. Care staff are visible, and we found there to be appropriate oversight of staffing arrangements.

Care staff know the people they support well and some staff told us they had worked at the home for many years and one person told us; "there have been lots of improvements here, staff morale is really good". We saw care staff interact with residents in a friendly and respectful manner spending time sitting and chatting with them. Activities are carried out daily specific to each person's interests, group activities are available and the service is in the process of recruiting additional activity coordinators.

People receive their medication by staff who are trained in how to administer medication safely. Medication is securely stored, and we saw Medication Administration Records (MARs) contained all the required information. The service promotes hygienic practices and manages risk of infection. Discussions with care staff confirmed they are aware of the infection control procedures, and we saw them wearing personal protective equipment when required.

People have timely access to health and other services to maintain their ongoing health and well-being. Information within people's care files evidence referrals and contact with various health and social care services. We saw these referrals were made in a timely manner and whenever people's needs changed. Personal plans include details of people's personal preferences, we found these preferences are valued and respected by staff and management. Care and support are designed through involvement with people and tailored to achieve personal outcomes to a very high standard. However, we identified one care file did not contain a recent change and review. The deputy manager told us this matter would be addressed immediately.

Care staff show excellent knowledge of people's wishes, needs and how to respond to them. People's choices are promoted, for example regarding meal, drinks and various snack options and how people wish to spend their time. We observed the meals provided and the dining experience and saw consideration given to people who required assistance.

#### **Environment**

People have a sense of belonging. The home is large and spacious offering a wide choice of communal areas for people to sit and enjoy time with others or spend quiet time if preferred. We saw people are able to access all areas of the home for activities or any special events. Bedrooms are personalised with items of people's choice and personal belongings. There is good access and egress for people with reduced mobility or who use specialised equipment living or visiting the home. We considered various records relating to health and safety, including gas, electricity and environmental audits which were satisfactory and up to date. This evidenced the provider maintained effective oversight to ensure the environment was safe. All confidential files including care and staff files were stored securely in lockable areas. Various fire-related safety checks are carried out and residents have personal emergency evacuation plans (PEEPs) in place. There is a fire safety risk assessment and care staff receive training in fire safety and first aid.

People are cared for in a clean and homely environment. The home offers improving accommodation for the residents living at the home and management have shown a commitment to developing and improving it for their benefit. Due to the busy nature of the service some areas show signs of wear and tear. A schedule of works is currently underway which includes painting, flooring and general refurbishment throughout. The internal and external improvements include; new stair carpets/flooring, plans to completely redecorate the dining areas and the rear garden areas cleared for future building plans which include a staff training room. There are three floors to the home each accessible via a passenger lift. From our walk-around we noted window openings which may pose a risk to residents are secure. People are protected from environmental health and safety risks. We found call bell checks are carried out and call bells available throughout all areas of the home. Environmental audits to ensure areas are clean and safe are carried out daily/weekly. People can be confident that there are effective arrangements at the home that will protect public safety and minimise cross infection. There is oversight to ensure staff follow the correct infection guidance. All confidential files including care and staff files are stored appropriately.

#### **Leadership and Management**

People can be assured that care staff are competent to undertake their roles and there is a robust recruitment process. We looked at a sample of care staff recruitment files and saw they contained all the pre-employment checks required in respect of any person working in regulated services. Staff discussions evidenced there is an established staff team in place. Care staff told us they work well as a team and they feel extremely well supported, appreciated, and valued by the new management team. Care staff told us about the special staff appreciation week which management arranged for all the team. This included monetary enhancements and meaningful events for staff.

Management oversee staff training and supervision needs, and we saw one-to-one supervision in accordance with regulatory requirements. Supervision provides each member of care staff with opportunities to discuss their performance, development, and any concerns they may have. Care staff benefit from the learning and development opportunities provided; we saw evidence they had carried out mandatory training courses as well as any additional training ensuring they are skilled to meet the needs of people to whom they provide care. Staff are supported to register with professional bodies such as Social Care Wales the workforce regulator.

People have opportunities to express their views and lodge complaints. The home has a complaints policy in place and the written guide to the service informs people how to raise their concerns formally. Residents can be/and are confident that the home is operated with their best interests at the forefront of care provision. Mechanisms are in place to protect people and the documents in place set out and provide people with an understanding of the service they can expect to receive. People using the service and staff know who to approach if they have concerns and people have access to independent advocates if they wish and feel safe to do this should the need arise.

People benefit from the new leadership and management in place to support the smooth running of the service. The management team spend time at the home, engaging with staff, relatives, and residents seeking feedback. We requested information relating to monitoring and we saw the recent quality monitoring report, illustrating they are completed within timeframes stipulated by regulation. The information demonstrated formal monitoring is carried out as legally required. Systems and processes help promote the smooth running of the home. We identified some documentation required updating and review which the management team told us would be addressed immediately. Detailed audits are in place in relation to key areas of service delivery, including nutrition, medication, and skin care. We saw this information is reviewed and analysed as part of the quality-of-care report produced every six months. The management team, work with external agencies and notify the Regulator of any incidents in a timely manner.

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.

Area(s) for Improvement			
Regulation	Summary	Status	
N/A	No non-compliance of this type was identified at this inspection	N/A	

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