



## Inspection Report on

**The Newton Grange**

**Langland Care Ltd**  
**26 Southward Lane Newton**  
**Swansea**  
**SA3 4QD**

## **Date Inspection Completed**

19 & 20 May 2022

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## About The Newton Grange

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Langland care LTD
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	16/01/2020
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People are very happy living at The Newton Grange and receive consistently good support from a knowledgeable, caring and experienced team. The service is well-led by an enthusiastic manager, supported by an established senior team. There are strong governance arrangements in place, led by a Responsible Individual (RI) who is actively involved in the day to day running of the service. Communication is strong and care workers are well supported by their manager and receive regular supervision. Staff recruitment supports safe practice and staff have good access to training to ensure they are sufficiently skilled to undertake their roles.

Staff have developed mutually trusting relationships with people and their relatives, treating them with dignity, kindness and respect. Care and support is of a high standard. People receive support and encouragement to lead active lives and make daily choices. Personal plans provide clear information and direct care workers on how best to support individuals. Medication is very well managed and consistently good protocols are in place to ensure this continues. The service maintains open lines of communication with professionals, people and relatives. People benefit from living in an environment which continues to adapt and improve around their needs.

## Well-being

The service positively impacts on peoples physical and emotional well-being. Timely referrals to healthcare professionals and good medication management support people to remain as healthy as they can be. Personal plans and risk assessments are accurate and up to date. Reviews consider changes in care and include the relevant people. Care workers ensure people occupy their day by participating in a range of activities they enjoy. Daily routines are based around peoples wishes and place a focus on healthy lifestyles and diets. The service actively encourages visitors into the home as often as they like. Language needs are considered, and the home is working towards a Welsh active offer.

People live in a happy, well-maintained environment which supports their well-being. The service has a homely atmosphere where people enjoy the company of others. The home is pleasant and maintains its original charm. As an older building there continues to be an ongoing programme of refurbishment and redecoration. Communal and private areas are very clean and free from clutter. People have access to a developing outdoor space to enjoy. People said, *“it’s a lovely place to live”* and *“I have settled well and have some new friends”*.

There are consistently good measures in place to protect people from harm and abuse. The service undertakes a range of health and safety checks to make sure people remain as safe as possible. There are effective infection control measures following current guidelines in place. The building is secure and only authorised individuals can enter. Any risks and/ or hazards have been assessed, recorded and safeguards put in place. Up to date policies such as Safeguarding, and Whistleblowing support the service to maintain good practice. Staff are fully aware of their safeguarding responsibilities and how to report any concerns. Recruitment checks ensure staff are suitably skilled and of good character. The service promptly notifies relevant bodies of any incidents or concerns.

There are very strong governance arrangements in place to ensure people live well and receive a consistently good service. Staff have good communication and support from senior members of the team when required. External professionals and relatives felt communication was very good and are confident in how the service is managed. There are clear arrangements in place to support staff through regular formal and informal supervision. Staff feel well trained and supported, and evidence gathered during the inspection supports this. There are extensive quality assurance processes in place. The Responsible Individual (RI) maintains regular communication with the home and is actively monitoring the quality of the service.

## Care and Support

Staff know people well and have a positive impact on their health and well-being. People are placed at the heart of the service by a team who really do care. There is a core team of staff having worked at the service for a number of years. They are very familiar with people's needs and understand their likes and dislikes. There are a high number of people living with dementia who benefit from staff knowledge of their interests and hobbies. This is helped by care workers spending quality time with people supported with good information gathered at assessment and within personal plans. They also share their knowledge with new care workers as part of the induction process.

We saw people having access to both group and individual activities. The service benefits from additional support from a dedicated activities coordinator who was actively engaging with people throughout the inspection. Daily activities are not pre-arranged they are based on what people enjoy and would like to do that day. We saw people living with dementia sitting together enjoying the company of each other. They were assisted by staff to paint and make items in readiness for the Queens Jubilee celebrations. Another we met attends a weekly dementia choir outside of the home. This was watched live via social media at the service sparking singing and dancing amongst people living at the home.

Care planning documentation gives a real sense of the individual and reflects people's current circumstances. Initial assessments and personal plans include input from professionals, people, and/or their representatives. Each person's file has a cover that reflects their interests. There is also a useful document highlighting how the key worker can assist people to achieve their goals/ outcomes. Personal plans are up to date, outcome focussed and being reviewed on a regular basis. The service recognises the importance of maximising people's strengths and achieving positive outcomes. Any identified hazards have plans in place to minimise risks to self or others. There is input from specialist health and social care professionals when needed and action is taken to address any health concerns in a timely manner. There are clear protocols in place around areas such as fluid intake, nutrition and skin integrity.

Medication is well managed in the service. There are clear systems in place for the safe management of medication. Experienced trained senior staff administer medication on each shift. Medication administration records (MAR) are accurate and appropriately signed. Senior staff carry out regular audits. The medication room is very well organised and locked when not in use. Temperature checks are being completed. The service holds correct authorisations for those people who lack understanding around their medication needs. The service ensures people taking anti-psychotic medication are closely monitored and have their medication regularly reviewed.

## Environment

People feel safe and comfortable in their surroundings. The service is situated in an elevated position in the village of Llangland overlooking the Swansea Bay coastline. The home is in a quiet location and surrounded by mature gardens. Although some areas of the garden are not accessible to people with reduced mobility. The provider is actively looking to improve access and further develop the grounds for people to use safely. There are good security measures in place in the form of an electronic keypad system. People under Deprivation of Liberty Safeguards (DoLS) are safe from leaving the building unaccompanied. People with capacity to go out are given the code. Visiting arrangements follow current Public Health Wales (PHW) guidelines. Visitors are actively encouraged and made to feel welcome.

The home is a well looked after older building, which maintains its character. There is a large communal lounge and separate dining area which are a hive of activity. There is a real sense of community with people having developed friendships. Care workers interact with people naturally ensuring they are happy, stimulated and safe. The dining area has recently been redecorated and was bright and airy. There are plans to revamp and redecorate the lounge and refreshment areas. Bedrooms vary in size are personalised and nicely decorated.

Overall, there are good health and safety audit systems in place ensuring the service is safe and maintained to a high standard. Domestic and maintenance staff are experienced and keep the environment clean, uncluttered and generally free from hazards. Mobility equipment is stored appropriately, and regular safety checks carried out. Substances hazardous to health are in a locked area with the relevant safety certificates. Maintenance records evidence utilities, equipment and fire safety features have regular and up-to-date checks and servicing. The risk assessment relating to legionella at the time of inspection was being updated and additional training for the maintenance officer was being arranged. Each person has a personal emergency evacuation plan in place which is under regular review. Care files and medications are locked away to ensure safety and confidentiality.

## Leadership and Management

The service is very well managed by a manager who actively supports staff and maintains consistently good lines of communication. There is a recently qualified manager in place who places people at the heart of the service. They are respected both internally and externally. Staff, people, relatives and external professionals all feel communication is strong, feeling included in the decision-making processes. There are daily handover meetings discussing any changes to circumstances medication or the health and wellbeing of people. Staff engage in regular supervision meetings and annual appraisals are being arranged. Care workers and people referred positively to the management team. Comments from staff include *“my support from the manager is excellent”* and *“the RI is very approachable and listens”*. People living at the home said *“I love the staff, the manager is very kind”*. A relative told us *“it’s a well-managed service”*

There are consistently good staff recruitment, induction and training processes in place. Care workers spoke positively on the induction and training they receive. Feedback includes *“my induction was a good experience”* and *“training is really good here”*. A good induction process is in place including a period of shadowing experienced colleagues. Personnel records satisfied regulatory requirements in relation to staff recruitment. Staff training has predominantly been in the form of e-learning throughout the pandemic. More classroom-based training is now being reintroduced. Overall core training for care staff is current and in date. In discussion with the manager further staff training will be arranged on key areas including dementia care, mental health and end of life care.

Governance and quality monitoring arrangements are strong in the service. Overall, policies and procedures are clear and fit for purpose, only requiring minor changes. The Statement of Purpose (SoP) has been reviewed and reflective of the service. This can be made available in Welsh on request. The RI is easily available and visits the home a number of times a week. Visits include gathering the views of staff, people and relatives resulting in regulatory reports. The RI and manager also carry out regular audits of the environment noting any areas which need upgrading/ redecorating or any health and safety issues that need addressing. These are recorded and monitored through action plans. In addition, the manager and senior staff complete regular audits of key areas such as medication, personal plans and risk assessments. The service notifies the relevant professionals of incidents and significant events.

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



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