



## Inspection Report on

**The Grange**

**Carmarthen**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

## **Date Inspection Completed**

13/02/2023

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## About The Grange

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Consensus Support Services Limited
Registered places	6
Language of the service	Both
Previous Care Inspectorate Wales inspection	<a href="#">21 December 2021</a>
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

People lead happy lives at The Grange. The staff team ensure people are fully involved in all discussions about their care. Each person is encouraged to make daily choices in how they live their lives and to do things that are important to them. Keyworkers ensure people are invited to contribute to the care planning review process.

The enthusiastic and professional staff team want to make a positive difference to people's lives, where people they support are at the heart of the service. The staff team approach people with respect and support them to communicate effectively. All employees feel well supported by senior staff, receive training relevant to their roles and demonstrate a thorough knowledge of the people they support.

The management team continually strives to develop people's care and support wherever possible. Good communication channels are evident, with robust monitoring of the quality of support people receive. In addition, a relaxed atmosphere throughout the home helps people and visitors feel at ease.

### Well-being

Overall, people at The Grange have control over their day-to-day lives. Each person knows and understands what support and opportunities are available to them. Care workers know the people they support well. Keyworkers work with people to ensure they receive the support and information they need. Support plans are detailed and provide the staff team with a wealth of information about the individual, especially their communication preferences where the person does not use speech to convey their wishes. Regular house meetings give people opportunities to raise any issues with the staff team. The home's Statement of Purpose document accurately describes what the service provides and is readily available to people in the home and their relatives. All people using the service have a copy of the Welcome Guide: this is presented in easy-read format with information given pictorially of what they may expect from living in the home. People have access to advocacy services where they want independent support in issues which affect them.

People are relaxed, comfortable and do things that make them happy. Care workers encourage people to make choices and decisions about how they spend their time. Each person is as active as they wish to be. People personalise their surroundings in line with their interests and hobbies. Care workers have a good rapport and relationship with people.

The home provides the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. There is some bilingual signage around the property. Some people in the home are Welsh speakers and some staff members are too. In addition, some key documents, such as the home's Statement of Purpose and the Welcome Guide, are available bilingually in English and Welsh.

There are up to date plans for how the staff team enable people to live their lives as they wish. The staff team carry out initial assessments before people move into the home and consider a range of information to ensure they can meet people's needs: they take information from various sources, including family knowledge and social worker reports. Risk assessments help to ensure people retain their independence as much as possible. Keyworkers and senior staff regularly review care records, especially if support needs change.

Care records clearly state any risks to people's well-being and detailed risk management plans help to keep people healthy, safe and as independent as possible. Senior staff protect people's personal information at all times

People do things that matter to them and make them happy. The home has its own transport. People enjoy visiting a local hydrotherapy pool, going into Carmarthen for the shops and parks, and we saw a happy group preparing to go out horse-riding. There is a weekly timetable of activities for everybody in the home and each person appears happy with the plans they have in place.

All care workers receive support, guidance, and training and access policies and procedures to understand their responsibility to protect vulnerable people. They recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach the manager or RI but would also contact external agencies such as the local safeguarding office if they thought they needed to.

The provider has detailed policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers refer to infection management policies when necessary. Cleaning products are stored securely in locked cupboards and there are guidance notes for anyone who handles them.

## Environment

Overall, people receive support in a suitable environment. The home is safe, warm and clean. People appear comfortable and happy. The building is on three floors but easy to navigate via stairs or a lift. People can choose different areas to socialise in: there are two lounges and a large conservatory. Externally, there is a garden to the rear with a summer shed and benches where people can take meals in nice weather or spend time with friends. We saw people casually throwing their coats over the banister on return from their morning out, genuinely treating it as home. Bedrooms are personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture.

People are safe from unauthorised visitors entering the building, as all visitors must ring the front doorbell before gaining entry and record their visits in the visitor's book when entering and leaving. Peoples' personal care records are stored securely and only available to care workers and healthcare professionals authorised to view them.

Clear infection control procedures are in place. Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002. There are clear instructions displayed in the home on what to do in the event of a fire and the manager completes regular audits of the environment.

## **Leadership and Management**

Overall, the provider has a clear vision of the care it provides, and a positive regard to each person receiving support. Regular audits monitor all aspects of people's lives and any

issues that arise are promptly resolved. Regular discussions take place with people and healthcare professionals involved in their care. People and relatives know how to make a complaint if they need to, although there have been no complaints over the past year. We were shown several compliments from people and their relatives that detailed various events and aspects of the support provided by the staff team. The Responsible Individual (RI) is in frequent contact with the home and regularly provides practical, hands-on support to the manager.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before any new employee starts work: these include reference checks and Disclosure and Barring Service (DBS) checks. The staff induction programme is detailed and links to individual learning outcomes and the 'All Wales Induction Framework for Health and Social Care.' Care workers are up to date with their essential training, together with specific training relevant to the home, such as autism and PBM (positive behaviour management). Care workers say this provides them with a good understanding of their roles and responsibilities and the best ways to support people. Regular staff meetings give care workers the opportunity to discuss their work and to keep current with all developments in the home. All aspects of the service are summarised in three-monthly visits from the RI and six-monthly quality of care reports. Employees may discuss any issues they wish to raise in three-monthly supervision meetings.

### 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
36	The service provider does not ensure staff consistently receive an induction, core training and specialist training.	Achieved

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
16	Support plans were due for review in December 2021 and have not yet been done.	Achieved



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