



# Inspection Report on

**Cwmcelyn Nursing Home**

**High Street Blaina  
Abertillery  
NP13 3AQ**

**Date Inspection Completed**

09/11/2022

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## About Cwmcelyn Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Shaw Community Living (SLS) Limited
Registered places	24
Language of the service	English
Previous Care Inspectorate Wales inspection	16 December 2020
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

People were complimentary of the staff and services provided. There has been investment in the property and its decoration. We found there was a relaxed atmosphere where people looked comfortable and cared for. We saw warm, and positive interactions between staff and residents. Individuals told us they were happy living at the service. Previously, the organisation had found it difficult to recruit nurses. At this inspection we were told the staff team is complete with nurses having a range of skills to support the needs of individuals living at the service.

People live in a clean and comfortable environment with audits in place to monitor the health and safety of the premises, facilities, and equipment. There are effective governance systems in place which support the responsible individual's (RI) oversight of the service. People's personal plans outline the care and support they receive. We found reviews of people's plans need to consider if individuals personal outcomes have been met. This is an area of improvement which the service providers need to address before our next inspection.

## Well-being

Individuals are encouraged to make everyday choices and maintain their independence as much as they are able. Routines are flexible to support individual's needs and preferences. Arrangements are in place to enable individuals to participate in the running of the service. Individuals are routinely asked their views about the service. We found people are complimentary of the staff and generally satisfied with the service. One person said, *"the staff are brilliant and I love it here."* Another person told us, *"Some (staff) are ok most are fab."* Another person when asked about the service said, *"10 out of 10"*.

People's physical, mental health and emotional wellbeing is considered. The service supports individuals with a range of physical and emotional needs. People's health is monitored according to their needs and to ensure timely referrals to GP's and other related healthcare professionals. People's personal plans direct staff to deliver care and support to meet their health needs. The staff team have a range of skills to respond to individual's specific and changing needs. We saw individuals being treated with dignity and respect.

People are protected from harm. There are suitable arrangements in place to monitor and assess events involving the wellbeing of residents. Care staff are trained in safeguarding protocols. Individuals' capacity is considered and the service providers ensure care and support are in the person's best interest. Individuals are supported to access advocacy services, as necessary. There are safe medicine management systems and suitable infection control measures in place to further safeguard people.

People are supported to do things that matter to them. Activity staff support individuals to visit groups and events in the local community. People had the opportunity to go on a summer holiday and day trips earlier in the year. In house events have been organised for those individuals who prefer to attend them. People are supported to maintain contact with their families.

The environment provides a clean, homely, and comfortable feel. Individuals have participated in selecting colour schemes for their bedrooms and communal areas. Increased signage supports people's orientation around the property. There is ongoing health and safety monitoring of the environment.

## Care and Support

The service provider ensures care and support is provided in keeping with any assessment and personal plan and meets the individual's needs. People's personal plans include sufficient detail to inform staff how to meet their care and support needs. We found the plans are person centred and individuals are consulted about their care and support needs. Service providers are proactive in identifying and mitigating risks and supporting positive risk taking where it is deemed appropriate. Routine reviews are conducted of people's plans to see if care and support needs are being met. However, we noted there was no review of individuals personal outcomes. While no immediate action is required this is an area of improvement and we expect the provider to take action.

Arrangements are in place to cover staff sickness or absence to ensure people's care and support needs are met. During the inspection, we were told the service has successfully recruited enough nurses to the staff team. Care workers make up a stable staff team. We were aware in October 2022 night staffing levels were below those set out in the service's Statement of Purpose. We were assured a risk assessment is conducted to assess staff sufficiency during unforeseen events such as Covid/ flu to ensure people's needs are met at all times. Bank staff further supplement the staff team.

Medicine management systems have been strengthened. The service has recently introduced an electronic medicine management system which includes regular audits. An up to date medicine policy is in place. Nursing staff administer people's medicines. Staff receive training to ensure they have necessary skills to perform their role. Peoples' personal plans set out how the individual prefers to take their medication.

## Environment

The environment is clean, comfortable, and homely. The design and size of the premises is suitable for the service as described in the statement of purpose. Cwmcelyn comprises of four flats with six bedrooms and communal living room, kitchenette, and bathrooms in each. A central kitchen and laundry further support people living in the service. Individuals participated in choosing colour schemes during the redecoration of the property. We saw photographs of people living in the flats displayed in the lounges. We viewed people's bedrooms which are all individually decorated. Individuals are said to be "*proud of their rooms*" which contain their possessions, keepsakes and things that are important to them. People can access the garden which was renovated during lockdown and serves to commemorate residents lost during the pandemic.

The service providers ensure the premises comply with legislation in relation to health and safety. A maintenance person is employed at the service who attends to general repairs and decoration. They are responsible for routine health and safety checks and the upkeep of maintenance records. During a walk around the property, we found a number of broken door handles which could cause injury to people. The replacement of door handles was ongoing. In addition, new radiators had been installed throughout the property. We were told they were low surface heaters and did not require covers as they safe if they did not exceed a maximum temperature of 19 degrees. However, we found the majority of radiators were displaying temperatures above this. Following our inspection, we were informed the service providers have agreed to the radiators being replaced.

The service promotes hygienic practices and manages the risk of infection. Staff are trained in infection control. A monthly auditing tool is completed for Covid 19. Revised cleaning schedules have been introduced and the local authority have visited the service to support good hygiene practices. During our inspection visit staff wore personal protective equipment (PPE) to reduce the spread of infection from an outbreak of seasonal flu.

## Leadership and Management

There are suitable governance arrangements in place to support the operation of the service. A manager who is registered with the social care force regulator, Social Care Wales is responsible for the day to day operation of the service. Policies and procedures are available to staff and provide guidance. Routine audits are carried out to monitor the quality of care in the form of accidents, incidents, complaints, care reviews and medication. People's views are considered and their opinions of the service regularly sought. Satisfaction surveys are conducted to gather individual's views about meals, care, and support and if they can pursue hobbies and interests. The responsible individual (RI) visits the service in accordance with the regulations. A compliance team visits the service on a six monthly basis to monitor the standards and quality of care. We were supplied with a copy of the last quality of care review (Jan-July 2022). Recommendations for the improvement of the quality and safety of the service are included which the service provider will monitor.

There are robust selection and vetting arrangements for staff to safeguard people living at the service. We looked at newly appointed staff personnel files. Pre-employment checks are completed in the form of a disclosure and barring (DBS) check, satisfactory reference are sought and gaps in employment explored for all new employees. Proof of identity is retained on file for each person. All staff are subject to an induction and a satisfactory probationary period to further safeguard people living at the service.

Staff are trained to perform their duties. A staff training plan showed individual staff members training. Each staff member has a training account. Individuals are responsible for their own training. Staff receive a mixture of learning including on-line and face to face training to maintain their skills and practice. The organisation routinely monitors staff training compliance. The organisation is supporting staff to register with the social care regulator, Social Care Wales. A record of nurses PIN (personal registration number) numbers are maintained. Staff supervision is being conducted in line with the regulations.

### 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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16	Reviews of people's personal plans did not consider if their personal outcomes had been achieved.	New
	The appointed manager is not registered with SCW	Achieved

**Date Published** 17/01/2023