



## Inspection Report on

**College Fields Nursing Home**

**College Fields Nursing Home  
College Fields Close  
Barry  
CF62 8LE**

## **Date Inspection Completed**

13/02/2025

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## About College Fields Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Middlepatch Limited
Registered places	68
Language of the service	English
Previous Care Inspectorate Wales inspection	02/09/2024
Does this service promote Welsh language and culture?	The service is working towards providing an 'Active Offer' of the Welsh language. It is making an effort to identify and meet the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

College Fields Nursing Home can accommodate 68 people with nursing and personal care needs. This inspection was unannounced to consider the care, support and well-being of people. Organisational structure is clear with recent changes providing sound management arrangements.

The manager and responsible individual (RI) are visible in the day-to-day running of the service. Systems are mostly in place to ensure the quality of care. At the last inspection we identified areas where improvements are required, and the provider continues to strengthen their systems and oversight of care and health and safety of the environment. Care documentation reflecting the care and health needs of people living at the home is an improving area and we saw some good examples of detailed personal plans.

People live in an environment which is suitable. At the last inspection we identified areas throughout the home which require attention, and the provider is continuing to update and improve the environment. We saw some recent refurbishments are complete as part of an on-going schedule. The provider continues to make positive progress in the areas for improvement identified at the last inspection which will be considered at the next inspection.

## Well-being

People are safe and mostly receive timely care and support. During our visit, we saw care staff interact with people with genuine warmth and sincerity. People hold the care staff and nurses in high regard. People told us of the firm bonds they have made with some care staff, which positively impacts their well-being. Since the last inspection the provider has updated the call bell system which means care staff are more responsive. People told us they are listened to and acknowledged when they use the call bell, which is an improvement. However, some people continue to require more regular visual monitoring in the event they are unable to use the call bell.

People receive the right care most of the time. Measures are in place to promote good standards of practice throughout the home. The home carries out audits to monitor standards and practice. We found some improvement in the systems for oversight, but this continues to require strengthening and will be considered at the next inspection. We found an improvement in some care documentation which contains a good level of detail for most people. However, oversight and monitoring of certain care tasks require on-going strengthening.

People do things which matter to them. People told us they choose to spend time in their bedrooms as they *"Have everything they need."* We saw several people in communal areas, doing things they enjoy which is positive progress since the last inspection. All of the people we spoke with told us they have enough to keep busy, some recently enjoyed watching a singer at the home, and there was high praise for the activities team.

People live in a home which mostly supports their outcomes. We previously identified areas where improvements are required to ensure the home is safe and well maintained. A schedule of refurbishment and redecoration has commenced, and a new lift has recently been installed. Some refurbishment is complete and the area for improvement will be fully considered at the next inspection.

Governance arrangements are in place to promote the smooth operation of the home. Although a nominated manager is in post, the statement of purpose requires an update to reflect the current management structure, and the RI is to appropriately inform the regulator.

## Care and Support

People receive support to access services to maintain their health and well-being. Documentation continues to demonstrate people access healthcare facilities including opticians, dentists, podiatrists and general practitioners. The service completes timely and effective referrals and contact is made with various health and social care services. We observed people with very complex care needs achieving good outcomes and we found the care team to be knowledgeable, dedicated and compassionate. At the previous inspection, we identified care documentation needs improvement. We found details in personal plans are better, and in some cases extremely proficient but further work is required to ensure all care documentation is at the same standard. We found some reviews were not up to date and a few daily care logs incomplete for some tasks. This area of improvement is continued and will be fully considered at the next inspection

Systems are in place to protect people who use the service. We saw care staff show knowledge of people's wishes, needs and how to respond to them. The communities in the home are well-staffed and nurses told us there is consistency in staff numbers. People told us they receive continuity of care from care staff they know. Due to the new call bell system, people are responded to in a timely manner, which is an improvement since the last inspection. However, some people who are unable to use a call bell require more frequent monitoring. We talked to people about how they spend their time. Everyone we spoke with told us they have enough to do, either in groups or in the comfort of their own rooms. Levels of interaction and opportunities for people to do things they enjoy are improved since the last inspection.

We saw people are clean, warm and comfortable. They have access to drinks and snacks through the day. People with a modified diet are catered for. People told us how much they enjoy the food and the variety on offer to them. We saw records of people's weight being well-managed, recorded, checked frequently and action being taken when significant changes are identified.

The service has systems in place for medicines management. People receive their medication as prescribed by staff who are trained in how to administer medication safely. The service promotes hygienic practices and manages risk of infection, and we saw staff wearing personal protective equipment when required.

## Environment

People are supported to live in a safe environment. The entrance to the home is secure and visitors must ring to gain entry. At a previous inspection we found records relating to supplies, equipment and utilities, such as gas, electricity and lift services to be in order. A new service lift is making a positive impact in the day-to-day running of the home. The home is clean, uncluttered, warm and welcoming.

People can be confident there are effective arrangements at the home that will protect public safety and minimise cross infection. At the last inspection we found several improvements were required to minimise the environmental risk to people. We observed the service taking positive steps to address the area for improvement with the environment, such as refurbishment of some bathrooms, replacement of worn items, and upgrading the floors and general décor of the top floor of the home. As this is an on-going plan for the service the area for improvement will be tested at the next inspection.

The home has a large dining and lounge area. We observed the room being well-used and several people chose to dine together with support from care staff. Many people told us they enjoy taking their meals in the comfort of their own bedrooms. We found a small kitchen in each community to be well-maintained and clean. The home has been awarded a rating of five (very good) by the Food Standards Agency.

At the previous inspection we considered some records relating to health and safety, which evidenced the provider maintained some oversight to ensure the environment was safe. The provider's oversight of health and safety, and the environment will be fully considered at the next inspection.

## Leadership and Management

We observed changes in the management structure at the home since the last inspection. Care staff and nursing staff are extremely positive about the support they receive. A statement of purpose (SOP) is available which reflects the service's vision. At the last inspection we advised the provider must review the statement of purpose, but we did not see a revised version at this inspection. We previously considered the quality assurance activities completed by the RI. The provider has systems in place where the RI undertakes formal monitoring as legally required. But we earlier advised the quality-of-care review requires strengthening which will be fully considered at the next inspection to allow the RI sufficient time to complete the updated quality-of-care review.

Management have oversight of staff training and supervision needs. The support and development of care staff will be fully considered at the next inspection. However, care staff we spoke with were complimentary about the training and level of supervision. Staff are supported to register with professional bodies such as Social Care Wales the workforce regulator and the Nursing and Midwifery Council. The management team work with external agencies and notify the Regulator of any incidents in a timely manner. We previously observed staff are safely recruited with all the pre-employment checks in place in respect of any person working in regulated services.

We spoke with care staff during our visit who reported they have a clear understanding of their roles and responsibilities and receive good induction and mentoring. All staff told us they were confident to raise concerns with the management and trust appropriate action would be taken.

The provider is making significant improvements to the systems to monitor and evaluate people's care and support outcomes, and to make the necessary improvements to the environment identified at the last inspection. We acknowledge the progress made in the areas for improvement and the on-going efforts of the provider to develop the service and positively impact the quality of care and well-being of people.

### 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.

### Area(s) for Improvement

Regulation	Summary	Status
57	This is because the governance and oversight of the health and safety of the home compromised	Reviewed



	people's safety. The provider has failed to ensure that the premises is safe in accordance with current health and safety and fire legislation. Failures can place people living in and working at the home at risk of harm.	
21	This is because the provider has not ensured that care and support is provided in a way that protects, promotes and maintains the emotional well-being needs of people living at the service.	Reviewed

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**Date Published** 18/03/2025