



### Caseys Lodge



Caseys Lodge, Twyn Carmel, Merthyr Tydfil, CF48 1PF



01685370200

**Date(s) of inspection visit(s):**

09/04/2025, 08/04/2025

### Service Information:

Operated by:	Care 4 U (Neath) Limited
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care
Registered places:	8
Main language(s):	English
Promotion of Welsh language and culture:	This service anticipates, identifies, and meets the Welsh language and cultural needs of people who use, or may use the service.

## Ratings:



**Well-being**

**Excellent**



**Care & Support**

**Excellent**



**Environment**

**Good**



**Leadership & Management**

**Good**

## Summary:

People living at Casey's Lodge receive an excellent standard of care and support delivered by a consistent team of kind, considerate care staff. The staff team know the people they support well and treat them with dignity and respect. Personal plans are outcome focused and detail the best ways of supporting people. Arrangements are in place to ensure people's rights are promoted and they are supported in the least restrictive way. The service has very strong links with health and social care professionals and referrals are made in a timely manner. Medication management arrangements are robust enabling people to receive their medication as prescribed. People participate in activities of their choice which helps enhance their overall well-being.

Care staff receive training relevant to people's needs and are supported in their roles. Care staff are safely recruited and there are sufficient staff numbers providing outstanding continuity of care. There are appropriate governance and quality assurance arrangements in place which help the service develop. The responsible individual (RI) visits regularly and has good oversight of service

provision.

The environment is safe and accessible. People are encouraged to personalise their rooms to their preference. Communal areas are comfortable and clean. There are effective procedures in place to make sure the environment, its facilities and equipment remain in a good state of repair and are safe for people to use.

## Findings:



### Well-being

**Excellent**

With few exceptions people are supported to have as much control as possible over their day-to-day lives. People are provided with a platform to voice their opinions on the service they receive. Monthly meetings are held between people and their key worker. This gives people the opportunity to discuss matters which are important to them such as activities, menus and how and where they spend their time. People are actively involved in the production and review of their personal plans to ensure they can communicate their preferences in relation to the care and support they receive.

People are extensively supported to live well and achieve self-directed outcomes. An example of this would be, one of the outcomes of a person living at the service is to lose weight. We saw care staff have worked with the person to develop a calorie-controlled diet plan. Care staff also support the person to access a local gym and participate in exercise classes.

There are frequent opportunities for people to connect with family and friends and access the community. People and their representatives told us there are no restrictions regarding visiting arrangements. We saw care staff support people to access the community. On the day of our inspection one person was being supported to visit a family member at a local cafe. People we spoke to told us care staff support them to maintain relationships with family and friends and they are supported to access the community and go on holiday. We saw people are offered choices in daily activities and participation in activities is recorded in their personal plans.

People are protected from abuse and neglect. Care staff are recruited in line with regulation to ensure they are suitable to work with vulnerable people. Care staff receive training relevant to the needs of the people they support. This includes safeguarding, manual handling and medication. There are effective mechanisms in place to ensure people can voice their concerns. Risk assessments are present highlighting areas of concern. There are measures in place to ensure medication is safely stored and administered.

People live in accommodation that supports their well-being. The environment at Casey's Lodge has been adapted to meet the needs of the people living there. Bedrooms are comfortable and personalised, with sufficient communal areas available. The home is clean and well-maintained, with the correct checks and servicing in place for utilities and equipment.



## Care & Support

Excellent

People receive high quality care and support which helps them achieve their personal outcomes. Prior to a person moving into the service a detailed assessment is completed to determine if their needs can be met. Following this, a personal plan is constructed in conjunction with the person and where necessary, their representatives. Personal plans we viewed are clear and concise. They highlight people's personal outcomes and the best ways of supporting people to achieve them. Risk assessments consider any risks to people's health and safety and detail strategies for keeping people safe. Deprivation of Liberty Safeguards (DoLS) referrals are made when there is a risk that care arrangements may deprive people of their liberty. We saw personal plans are reviewed in line with regulation to ensure information recorded remains relevant as people's needs evolve. As well as being involved in the production and review of personal plans, people are consulted on the service they receive more generally. We saw the service offers a very good variety of formal and informal opportunities for people to voice their opinions on the service they receive.

People are supported by highly skilled staff with an excellent understanding of their individual needs and preferences. People living at Casey's Lodge receive excellent continuity of care. This is achieved by the service's ability to retain staff. In the past twelve months there has been no staff turnover. Handovers are completed at the beginning of each shift to ensure a smooth and safe transition of responsibilities, tasks and information between outgoing and incoming shifts. We saw care staff have very positive relationships with the people they support. It was clear they know the people they support well and are familiar with their needs and preferences. Positive feedback from people about care staff supported our observations. One person told us, *"The staff are good as gold, I can't fault it here, the care I get is second to none"*. Another person commented, *"All the staff are fantastic, they do a really good job"*.

People are supported with their health needs and receive their medication as prescribed in accordance with national guidelines and service policy. Medication management systems are robust. Medication is securely stored and can only be accessed by authorised personnel. Medication administration record (MAR) charts contain all the required information and are completed correctly with signatures when medication has been administered. There is a medication policy aligned with best practice guidance and care staff receive training on the administration of medication to ensure they remain sufficiently skilled. The completion of routine medication audits ensures practice remains safe and effective. We saw evidence people have access to the relevant health and social care professionals and referrals for specialist advice are made in a timely manner.



## Environment

**Good**

People live in an environment which meets their needs. The home has been adapted so it is accessible for those with mobility problems and there is specialist equipment available for those who need it. People's rooms are sufficient in size and are equipped with en-suite toilet / bathing facilities. We saw people's rooms are personalised to their preference with items of importance, which helps create a homely feel. There are communal areas people can access including a lounge, kitchen / diner and a dedicated activities room. We observed people in communal areas, they appeared to be relaxed and comfortable, this suggesting they are happy with the environment. We saw people can choose where they spend their time and go from their rooms to communal areas as they wish, either independently or with support from care staff. The service is suitably furnished and there is ongoing work being completed to re-decorate certain areas.

The provider demonstrates a strong commitment to ensuring the premises and any equipment is maintained and serviced to a high standard. We saw there is routine servicing of utilities such as electricity and gas which is carried out by external contractors. Specialist equipment such as lifts, and manual handling equipment is serviced in line with the manufacturer's recommendations. There is an up-to-date fire risk assessment and fire safety features are regularly checked by staff and serviced by suitably qualified trades people. We noted the legionella risk assessment had not been reviewed for some time; however, appropriate water safety checks were being undertaken. The manager assured us the legionella risk assessment would be reviewed at the earliest opportunity. Hygiene and cleanliness standards are good. Staff follow a cleaning schedule to ensure the service remains clean and tidy. The kitchen has been awarded a score of four by the Food Standards Agency, which implies good food hygiene standards. Laundry facilities are suitable for the size of the home and there is a plentiful supply of cleaning products which are stored in accordance with Control of Substances Hazardous to Health recommendations.

Security arrangements are in place to protect people. The home is secure to prevent unauthorised access. Visitors make themselves known on arrival and staff ensure they sign in and out of the premises.



## **Leadership & Management**

**Good**

People are supported by care staff with the necessary expertise, skills and qualifications needed. Staff receive a combination of mandatory and specialist training relevant to the needs of the people they care for. Staff we spoke to say the training they receive is comprehensive and helps them deliver good quality care and support. Staff also say they feel supported and valued and receive regular one to one support from their manager. Records relating to staff supervision confirm they are receiving the recommended levels of formal support. Care staff are registered with Social Care Wales (SCW) the workforce regulator. This is done to ensure they have the skills and qualifications needed for working in the care sector.

Care staff undergo the required checks to ensure they are suitably fit to work at the service. We sampled care staff's recruitment files and found they contained all the regulatory required information. This information includes references from previous employers, employment history checks and Disclosure and Barring Service (DBS) checks. We saw evidence care staff complete a structured induction when they commence employment to help them understand their role and the care and support needs of the people they support.

The service providers oversight and governance arrangements foster a positive compassionate culture in the service. There is a dedicated, experienced manager who has responsibility for the day to day running of the home and is supported by a deputy manager. We saw evidence audits are routinely conducted to ensure any issues are identified and quickly actioned. These audits consider areas such as health and safety, medication and maintenance. The RI is a visible presence at the service and appears to have good oversight of service delivery. We looked at documentation which confirmed the RI visits the service regularly, speaks to people and staff, analyses records in relation to service delivery and completes an inspection of the environment. Quality of care reviews are completed every six months to assess the services performance and identify areas where improvements can be made. Staff meetings are held to keep staff up to date with any developments and to discuss the service provided.

Safe practice is underpinned by the services policies and procedures. Policies and procedures we looked at include Safeguarding, Medication and Complaints. We saw they are aligned with statutory and best practice guidance, kept under review and updated when necessary.

## Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.



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