Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Caerlan

East Caerlan Farm
Newbridge Road
Pontyclun
CF72 8EX

Date Inspection Completed

20/02/2025

About Caerlan

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	PARKCARE HOMES (NO.2) LIMITED
Registered places	8
Language of the service	English
Previous Care Inspectorate Wales inspection	7 September 2023
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are supported by a consistent, knowledgeable staff team who are familiar with them, and enable them to achieve positive outcomes. There have been two new people move into Caerlan since the last inspection, who have both settled well and quickly formed good relationships with support workers. The service uses an electronic care management system, which holds all care documentation and daily notes. This is being used well, and additional functions are being looked at to improve efficiency and management oversight of information support workers' input.

The staff team is led well by a stable management team and effective administrative support. Support workers are safely recruited and vetted for their roles, and training and supervision enables them to feel competent and supported to do their job well. The environment supports people to achieve their outcomes. The Responsible Individual (RI) has good oversight of the care being provided in the service and completes his quarterly monitoring visits and biannual quality of care reports as required.

Well-being

People are supported to have control over their day to day lives. Care plans and risk assessments include detailed information about people's individual preferences for communication, routine and the way in which their support is delivered. People living at the service have specific preferences for their food, environment and activities, which are facilitated as much as possible. Support workers are encouraged to identify new activities that they think people could enjoy, to improve wellbeing or independent living skills. People are offered choice in what they do throughout the day, and support workers can assess their tolerance or enjoyment of an activity based on non-verbal communication and behaviour as well as verbal communication. Activities are varied and try to utilise community services and getting people out of the house as much as possible. People access community groups, gyms and leisure centres. Support workers organise day trips when possible.

There are processes in place to protect people from potential harm or abuse. All support workers receive up to date safeguarding training and there is a safeguarding policy in place to underpin good practice. People have individual risk assessments for their own health and safety and that of support workers or other people around them. Behaviours caused by distress are recorded according to a traffic light system, and positive behaviour plans detail the approach and intervention that is most effective in reducing distress and minimising risk to people and others.

People live in an environment which supports their wellbeing. The main house has six bedrooms, all of which have furnishings which can be removed or adapted depending on individual need and décor is personalised. There are two individual bungalows for two people who require their own living space, they can also come to and from the main house with support as they choose. There are a variety of communal areas, and a secure garden people can access at any time.

Care and Support

People gave positive verbal and non-verbal feedback during our inspection visit. We saw warm interactions between non-verbal people and their support workers. People told us what they were doing that day, the different places they go, and showed us things that mattered to them. People spoke with their support workers in upbeat, happy tones. Most people living at the service were out of the home doing activities or running errands at some point during the day we visited.

People living at the service appeared relaxed and comfortable, and this was confirmed by staff who told us there are minimal conflicts between people in living together or sharing the communal spaces. The manager considers compatibility with the busy and sometimes noisy environment, and the other people living in the service, when assessing new people who may wish to move into the service.

Support workers have detailed information available to them to be able to give people the support and care they need, when they need it, in their preferred way. Care plans contain people care, health, and behavioural needs, and what is required from support workers to meet these needs and enable people to meet their outcomes. Risk assessments and management plans highlight individual and external risks to people's health and safety and how to manage those risks in the least restrictive way. Care documentation is reviewed monthly, and we discussed with the manager adding some additional analysis of the effectiveness of interventions into the reviews. The electronic care management system enables support workers to input notes about the tasks people have completed as they go through the day. The service is developing the use of the system to optimise its functions and ensure all staff are inputting information on to it in the same way.

People are supported to be to be as healthy as they can be. Specific ongoing health conditions are included in care plans and risk assessments, and support workers are trained in the required interventions for these conditions. Medication is stored safely and administered as prescribed by trained staff. 'As needed' (PRN) medication is recorded when administered and its effectiveness is monitored as good practice. A medication policy is in place for additional guidance if needed.

Environment

People's environment supports their wellbeing and progress towards positive outcomes. The main house has six bedrooms, a spacious communal lounge, conservatory area and kitchen. There is also a building in the garden which is used as a sensory room or games room, which people can use when they want quiet time away from others. There are two bungalows next to the main house for two people who need their own living space. The service is in a rural area, with amenities a short drive away. All buildings are secure. Visitors are greeted by staff on arrival and sign in and out. There is a secure, accessible garden area which is used by people in the good weather.

Both the house and bungalows are decorated to suit people's needs. One person has recently been supported to paint their room in their colour of choice. Domestic and laundry tasks are completed by support workers and people help with these where they are able. On the day we visited the house appeared clean and tidy.

There is a rolling schedule of maintenance and servicing of the facilities and utilities at Caerlan to ensure the environment is safe and facilities are fit for use. The service provider has an estates team that oversee any maintenance issues or requests. Fire equipment is tested, and staff have regular fire evacuation drills. People have individual evacuation plans that detail the assistance they would need in an emergency.

Leadership and Management

The staff team are well led by a stable management team with effective administrative support. Support workers told us: *“everything is much calmer here at the moment, we’re having a good patch”*. Use of agency staff is minimal at present, there are staff vacancies but these shifts are being covered by current support workers. Support workers told us: *“recruitment is happening but it’s a slow process, then the new people need induction and shadowing”*. The RI and manager advised recruitment for staff vacancies is ongoing. Staff files contain all the required recruitment documentation, and all work with a current Disclosure and Barring Service (DBS) check.

Support workers are trained appropriately for, and supported in, their roles. The service provider delivers both mandatory training and additional training specific to the needs of the people living in Caerlan. Most people receive regular formal supervision with the management team, who also operate and open-door policy for any issues or questions. Team meetings are also held to share information and gain any feedback from support workers.

There are robust quality assurance measures in place to monitor and analyse events in the service and therefore determine the quality of care being provided. Management complete regular audits of aspects of the environment, care and staffing, and submit these to the service provider. The RI visits the service regularly and completes quarterly monitoring visits. They use audit information and feedback from staff and people living in the service to compile biannual quality of care reports as required. The manager of the service contacts the regulator with any questions or concerns and notifies us of events appropriately.

Summary of Non-Compliance	
Status	**What each means**
New	This non-compliance was identified at this inspection.
Reviewed	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.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	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
N/A	No non-compliance of this type was identified at this	N/A

	inspection	

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