



# **Inspection Report on**

**Cwmcelyn Nursing Home**

**High Street Blaina  
Abertillery  
NP13 3AQ**

## **Date Inspection Completed**

16/05/2024

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## About Cwmcelyn Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Shaw healthcare (Cambria) Limited
Registered places	24
Language of the service	English
Previous Care Inspectorate Wales inspection	
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 happy living at the service. People receive a very good standard of care and support which has led to them achieving positive wellbeing outcomes. People are supported to develop skills and participate in meaningful activities. The service is well led by an experienced manager who is supported by a staff team who are trained and dedicated. The responsible individual (RI) has good oversight of the service and draws upon effective quality assurance systems. The environment is safe, secure, and maintained. We found staff recruitment practices require strengthening to ensure people are fully safeguarded. The collection of waste needs addressing.

## Well-being

People have a voice and contribute to decisions that affect their lives. Peoples care and support is designed with their involvement and tailored to meet their personal outcomes. Peoples plans show they are supported to be as independent as possible. People have opportunities to share their views and opinions during regular meetings. Records show people are encouraged to make personal choices on a daily basis. The service offers flexibility to enable individuals to have their meals and carry out daily activities when they prefer to do so. People told us, *"I feel safe here I am happy."* *"Staff are nice all of them, I don't have favourites."* *"Staff are really good at their job."* *"I'm happy, there's nothing to complain about."*

People are supported to be healthy and stay safe. People can access healthcare services as and when necessary. The service works collaboratively with other health and social care professionals to support people remain as well and healthy as possible. Reviews of people's medication regimes has led to health and wellbeing benefits. People are involved in menu planning and healthier food options are promoted. People are supported to go into the community independently. Risk assessments support individuals with positive risk taking.

People are encouraged to do things that matter to them and develop their skills and interests. Regular activities provide opportunities for people to participate in cooking, gardening, arts, crafts, and games. We saw people making fruit smoothies. One person attends the local college which has developed their skills and relationships. We were told theme nights which celebrate world food from different countries is a favourite. There are regular visits from entertainers. People attend the cinema, theatre and go to live gigs to see their favourite bands. Everyone has an opportunity to go on an annual holiday. There is a display of photographs of people taken during activities. The use of the Welsh language is encouraged, and we saw a display of useful Welsh phrases to remind people.

People live in a service which supports their wellbeing. The atmosphere is warm, and welcoming. Arrangements are in place to ensure health and safety standards are maintained. Individual bedrooms reflect people's ownership and individuality. Communal areas are comfortable, which supports people to spend time with others. The service has raised money to improve and develop the garden.

## Care and Support

Peoples plans direct staff to support them in line with their likes and preferences. There has been significant development in the care planning process with the implementation of an electronic care document system. People's plans clearly set out how each person is to be supported to meet their health and wellbeing needs. Risk assessments, which support the plans give further direction to staff. Routine reviews of peoples plans take place as required. People are actively involved in the process; we saw their comments noted during reviews which shows their engagement when assessing if their personal outcomes have been met.

Health promotions lead to increased health and wellbeing outcomes for people. Staff support people to take part in health promotion initiatives and people have increased health and well-being as a result. In discussions with the manager, we found the service has been involved in a number of initiatives. The manager is sharing lessons to improve the service for people. People and staff have positive and trusting relationships leading to improved standards of care and support. A member of staff told us *"When I go home after work, I feel fulfilled, like I have given the people here my best."* Another member of staff told us how they enjoy being able to spend time with people as part of *"Resident Focused Care."*

People are safe. Arrangements are in place to monitor and evaluate accidents and incidents. The management are responsive in identifying and mitigating risks. The relevant applications are made to safeguard people's best interests. Staff are trained to safeguard people from harm and abuse and are aware of their duty to report any concerns.

The service uses an electronic medication system. Nurses are trained to administer people's medication. There are processes in place to enable people to take their own medication if they choose to do so. The effectiveness of as required PRN medication is monitored and recorded. The nursing team completes regular internal medication audits. A recent external pharmacy audit endorsed medicine arrangements in place.

## Environment

The environment is clean, comfortable, and homely. The layout and size of the premises meet the needs of people in smaller 'flats' while also having space for larger activities and socialising with others. Each flat has six bedrooms, a communal living room, kitchenette, and bathrooms. This enables people to maintain or develop life skills and independence. People who use the service have their own bedrooms which are personalised to their preferences and needs. Staff respect people's rooms as their personal space and we saw them knocking and waiting to be invited into people's rooms before entering. People are supported to create a room which promotes their well-being. A central kitchen provides main meals and has a Food Standards Agency rating of 3. This describes hygiene standards as generally satisfactory. A laundry further supports people living in the service.

The service providers ensure the premises follows health and safety legislation. We found the service to be clean and tidy. The service promotes hygienic practices and manages the risk of infection. Staff are trained in infection control and we saw hand washing and sterilising facilities available throughout the service. We did note external bins were overflowing and it was reported there have been issues with the collection of waste in recent months. We were assured the service providers were addressing the issue. Some areas of the service are used a lot and we saw paint damage and some damaged fixtures. The manager told us there is a maintenance plan in place to keep on top of repairs and redecoration. The maintenance person also completes weekly 'walk arounds' to identify what areas need attention.

The outside area is flat and combines patio and grassed areas. We saw how the garden is used to meet people's needs and promote their wellbeing. People have made planters and we saw vegetables being grown along with flowers and herbs. On the day of the inspection, the maintenance person was building a summerhouse. We were told this will be for people to use as a place to relax or to socialise with their visitors.

## Leadership and Management

The leadership at the service creates a positive culture which promotes the delivery of personal outcomes for people. The manager is experienced and registered with the Social Care force regulator. They are supported by a deputy manager and a team of nurses who provide a good skills mix. The remainder of the staff team are trained, skilled and dedicated in their roles. There are effective governance systems in place which support the smooth running of the service. Currently, there is minimal use of agency staff which provides consistency for people using the service. There is a sufficient number of qualified and experienced nurses working at the service to ensure the management has protected time to develop the service. There are arrangements in place for effective oversight of the service through on-going quality assurance. A number of audits are routinely completed which assess the quality of the service. An electronic compliance tool monitors compliance and evaluates events such as accidents and incidents. Complaints are considered as part of the exercise. Regular meetings involving all designations of staff ensure a whole team approach to sharing information for the benefit of people living at the service. The RI routinely visits the service and gains people's views and opinions. A six monthly quality of care review is undertaken. Any recommendations form part of an on-going action plan which drive forward improvements. Senior managers monitor progress.

We found staff recruitment practices are not sufficiently robust. The organisation has a human resource department which is responsible for staff recruitment. We sampled two personnel files for newly appointed staff and found gaps in the required pre-employment checks. It was explained that the electronic system should have identified further information was required before staff's recruitment was concluded. The manager was not informed of any shortfalls. During feedback, the RI gave assurance the required information would be provided to bring the files up to date. All staff receive an induction into their role. Care staff are registered with Social Care Wales.

Staff are trained and supported to perform their roles well. Training information shows staff routinely update their skills and knowledge. Regular meetings support improved communication within the staff team. Staff are confident to raise their concerns with managers. All staff, including managers, receive regular supervision and have their standard of practice annually appraised. Staff told us they enjoy working at the service. Each month an employee is selected as employee of the month which recognises their performance. The day before our inspection, an awards ceremony took place to celebrate staff member's long service working at Cwmcelyn. Some people we spoke with told us how much they enjoyed the celebrations.

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



N/A	No non-compliance of this type was identified at this inspection	N/A
16	Reviews of people's personal plans did not consider if their personal outcomes had been achieved.	Achieved

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