

Inspection Report on

Valley View Care Home

Dan-y-coed Cefn Hengoed Hengoed Cardiff CF82 7LP

Date Inspection Completed

04/09/2024



About Valley View Care Home

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	View Care Home Ltd
Registered places	64
Language of the service	English
Previous Care Inspectorate Wales inspection	07/12/2023
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 who use the service are happy with the care and support they receive. Care workers and nurses are supported in their roles and receive training to ensure they have the necessary skills to carry out their roles successfully. People's well-being is enhanced by the opportunities they have, to engage in a range of daily activities. Relatives and external professionals speak positively about the service. The home provides them with comfortable accommodation which reflects their needs and interests. There are good maintenance procedures in place and the provider is proactive in ensuring the environment continues to meet the needs of people.

There are systems in place to enable the manager and care staff to plan, deliver and review the care and support provided to each person. The manager and senior staff continue to strenghen these systems. Staff also work effectively in collaboration with external professionals to manage risks and to meet people's needs. The system in use to assess people's capacity needs to be strengthened.

The service is well managed and overseen. A manager and a deputy are in post. Care staff feel valued and supported in their role. The responsible individual (RI) visits the service and completes the required regulatory reports. The provider has a range of quality-of-care oversight procedures in place to ensure that they provide a good quality service.

Well-being

People are encouraged to make choices and are treated with dignity and respect. People and their representatives participate in the assessment process prior to being admitted to the service. They have personal plans which detail the care and support they need and want and they are regularly reviewed. We saw people are encouraged to make choices throughout the day including what they wear, the food they eat, where to spend their time and what activities to do. The provider seeks regular feedback from people and/or their representatives about the quality of care they receive using a range of methods. These include discussions, questionnaires, residents' and relatives' meetings. The Welsh culture and language are promoted. This includes celebration of important Welsh dates, bi-lingual documentation and training sessions staff can attend. People have access to easily accessible information about the service; this includes detail of what they can expect from the service and who they can approach internally and externally if they have any issues.

Nursing and care staff support people to to remain physically and mentally as healthy as possible. They support people with their medication and ensure they drink and eat well. They also ensure people are supported to move and/or change position on a regular basis. They monitor any changes in people's presentation, keep records and arrange referrals and appointments with external health professionals when needed. In addition, people's mental health and well-being is promoted. During our inspection, we observed people taking part in activities, socialising with each other, having visitors and enjoying warm exchanges with staff. The home employs a member of staff whose role is dedicated to well-being. People, relatives and external professionals speak highly of them.

Measures are in place to protect people from abuse and neglect. Care staff are trained in safeguarding and have clear policies and procedures to guide them. Risk assessments and plans detail risks, what people can do and where support is required. Assessments relating to people's capacity must be reviewed. The manager liaises with relevant agencies to ensure any restrictions placed on a person's liberty are only in their best interests. When needed, specialist equipment is used so that care workers can support people as safely as possible. There are robust procedures in place to ensure the administration of medication is well managed. The home provides people with comfortable and modern accommodation which reflects individuals' needs and interests.

Care and Support

People receive the care they need and want. We observed care workers supporting people and noted a natural familiarity between them. They are encouraging and reassuring, and demonstrate a good understanding of people's needs. We observed people are settled and appear content. One person told us "Everyone is lovely", another "They do their best." All people speak highly of the activities on offer. Relatives we spoke with are complimentary towards the service and staff. One person said "They are very good" and "I can't praise them enough", they also told us they are kept up to date. Another person told us they feel they placed their relative in the right place, their relative "Is happy" and "Adores the staff" who "Provide exceptional care." They also said "They (care workers) do their best with what they have got" and they can talk to the manager about anything and it will be addressed immediately. We noted, when people have capacity, their choices are respected even if these may not be considered in their best interest. In these instances, the consequences of choices are explained to people. In one case, we saw nursing staff liaised extensively with external professionals.

There is documentation in place for each person. It reflects information gathered from people, their representatives and health professionals. Personal plans are in place for the areas in which people need care and support. Where there are risks, these are assessed and steps to mitigate them are listed. These plans and risk assessments give detailed instructions for care workers to follow. Staff record the daily care and support delivered to each person. People's documentation shows their plans are reviewed on a regular basis. We noted capacity assessments on people's files were completed by external professionals before they moved into the home. We discussed with the manager and their deputy the need to update these assessments once people move into the home to assess whether there have been any changes. We also noted one instance where a person's documentation in relation to their food and drink reflected their relative's instructions, not instructions from an assessment carried out by a relevant external professional. The manager assured us they are taking action to ensure assessments relied upon when preparing people's personal plans are strengthened. This is an area for improvement, and we expect the provider to continue taking action.

The service provider uses an electronic care monitoring system. The manager told us they are undertaking work with nurses to ensure they make best use of the system's features so that records are the best they can be for each person. This work includes additional training for nurses. In addition to these records, there is information in people's bedrooms which consists of a one page profile. This profile gives staff instant information about the individual and what they like and need. It tells staff what topics the person is interested in and can be used to start a conversation with them.

Environment

People live in an environment that meets their needs and promotes their well-being. The accommodation comprises of two sections; one is dedicated for people who have nursing care needs. The home has communal areas including lounges, dining rooms and external accessible areas; it is bright and has a homely feel. People's bedrooms are personalised and reflect their own needs and interests. The layout of the home, together with the provision of aids and adaptations, helps to promote people's independence. We observed people choosing where to spend time and saw the environment is clean. There are good maintenance procedures. The manager told us they are in the process of improving the signage on doors to clearly indicate what the different rooms are used for.

There are systems in place to identify and deal with risks to people's health and safety. Staff at the home carry out regular health and safety checks. External contractors carry out specialist checks. The RI reviews these when they complete their quality assurance activities. We noted the service provider made improvements to its facilities to store and manage medication with the set-up of a new medication room adjacent to the nurses' office. Senior staff told us this works well.

The home has a food hygiene rating of five which means standards are very good. We saw people make choices from a daily menu and alternatives are available. Infection control arrangements are in place. We observed staff using appropriate personal protective equipment (PPE) during our inspection visit.

People benefit from an effective leadership and management team. The feedback we received indicates they have good relationships with staff, external professionals and relatives. The service has policies and procedures which are clear and fit for purpose. There is a manager and a deputy in post. They oversee the day-to-day running of the service and carry out ongoing monitoring activities. They are assisted by the head of region who has ongoing contact with the home and provides direct support to the manager. We noted an external professional, a relative and a member of staff commented upon the work and improvements made by the current leadership and management team. One person told us "So much has moved forward, (manager) has made big improvements all around." We also saw when concerns are raised, the manager considers these, and necessary action is taken. The RI maintains overall oversight, they visit the service, seek feedback from the people they support, relatives and from staff at the required frequency and complete the necessary reports. There is good oversight of financial arrangements and investment in the service. There is evidence of continuous investment to maintain and improve the facilities.

There are arrangements in place to recruit, train and support staff. We examined recruitment records. These show the service provider has made improvements since our last full inspection and carries out checks before a person can start working at the home. Supervision and training records evidence processes are in place for inducting, supporting and developing staff. Staff told us they feel supported by managers. One person told us the support is good, they get training regularly and are given time to do it. Another person told us they are supported well and can raise any concern or issue they may have. Training compliance rates are very high. Staff also attend regular meetings where information is given to them and where they can discuss issues.

The manager explained staffing levels remain flexible and are based on the needs of people and activities at any one time. They told us these are kept under constant review and that staffing levels are the healthiest they have been. They explained they no longer need to use agency staff as permanently employed staff can cover what is required. This gives greater consistency to people. We noted, the number of nurses permanently employed by the home has significantly increased since our last inspection and is double the number stated in the home's statement of purpose.

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
18	The service provider relied on capacity assessments completed by external professionals	New

	and completed before people were admitted to the home. The service provider must review its systems to assess people's capacity. All assessments must be kept under review.	
35	The required information for staff personnel files is not all present	Achieved

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