Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Valley View Care Home

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

01443862217

www.carongroup.wales

The inspection visit took place on 07/05/2026

Service Information:

Operated by:	View Care Home Ltd
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care, Provision for mental health
Registered places:	64
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Good
Leadership & Management	Good

Summary:

Valley View Care Home provides nursing care in Caerphilly Country Borough Council. At the previous inspection, three Areas for Improvements (AFI) were identified, relating to the provider's assessment processes, the quality of care and support, and the overall oversight of the service. This early re-inspection did not formally test those areas of non-compliance; however, we found evidence that the service has taken meaningful steps to address these concerns.

We identified a number of positive developments across the service. Improvements in leadership, staff practice, and day-to-day care delivery are having a positive impact on people's experiences, wellbeing and overall quality of life. While progress is evident, further work is required to ensure improvements are fully embedded and consistently applied, particularly in relation to governance systems and care planning arrangements. As a result, the previously identified AFI's remain in place to support continued progress and consistency.

In recognition of the improvements made, we have awarded a rating of 'Good' across all inspection themes. Leadership and management, previously rated as 'Requires Improvement', has been upgraded to reflect the positive steps taken. We will continue to monitor progress and review how these developments have been embedded at the next inspection.

Findings:

Well-being — Good

People living at the service are supported to experience positive wellbeing and maintain a good level of control over their day-to-day lives. Feedback from residents and visitors was largely positive, with many describing the home as welcoming, comfortable and supportive. People spoke about noticeable improvements in recent weeks, particularly in how staff engage with them and respond to their needs. Visitors also reflected positively on the environment and recent changes in leadership, which they felt had contributed to a more positive atmosphere within the home.

There is a caring and compassionate culture embedded within the service. Throughout the inspection, staff were observed treating people with dignity and respect, taking time to listen and respond to their needs. Staff demonstrated effective communication skills and supported individuals to make informed choices about their care. People's communication needs were understood and catered for, including consideration of preferred language. The service promotes the Welsh Active Offer, with some bilingual staff available and key documentation offered in both Welsh and English, as well as accessible formats where required.

Staff demonstrated confidence in managing a range of situations, including periods of distress or behaviours that may challenge. These were managed in a calm and person-centred way, using approaches aligned with individuals' personal plans. Staff maintained a relaxed and reassuring manner, including the appropriate use of supportive touch, which had a positive impact on reducing anxiety and promoting comfort.

People are supported to maintain their emotional and social wellbeing. A dedicated wellbeing team provides a variety of activities, including both planned and spontaneous opportunities for engagement. We observed people participating in informal activities, as well as preparations for themed events, which people were anticipating positively. The service benefits from additional input from an internal occupational therapist, with plans to further develop this area through initiatives such as a wellbeing champion role. Relationships are actively supported, with visitors welcomed at any time and staff maintaining positive communication with families.

Care & Support — Good

People generally receive care and support which meets their needs and promotes their health and wellbeing. During the inspection, we observed care being delivered in a calm, respectful and unhurried way. Staff demonstrated a good understanding of individuals' needs and preferences, ensuring that care was delivered in a manner that respected people's routines and choices. This approach contributed positively to people's comfort and overall wellbeing.

Care planning has strengthened and is largely person-centred in its approach. Personal plans include detailed social histories, as well as information about people's preferences, likes and dislikes. This supports staff in developing a good understanding of each individual and delivering care in a way that is meaningful and tailored. There is evidence that care plans are reviewed regularly and updated when people's needs change. We also noted that the provider has begun to actively involve people and their relatives more in care planning processes, including inviting them to review meetings. This is a positive step in strengthening person-centred care and promoting involvement. However, people are not yet consistently involved, and this remains an area for continued development.

Daily records indicate that people are largely receiving the care they require, including support with nutrition, hydration, personal care, repositioning and wound management. Wound care is monitored regularly, demonstrating an improving approach in this area. Despite these improvements, some inconsistencies remain within care planning documentation. We identified contradictions within some personal plans where updates had not been consistently reflected throughout. In addition, some key assessments require improvement. The provider's recent audits have begun to identify these issues, and we look forward to seeing continued progress. Whilst medication management has not been consistently safe since our last inspection, we acknowledge significant improvements in the weeks leading up to our inspection, with systems now more robust and people receiving medication in line with prescriptions. Further improvements are planned to strengthen this area further.

Safeguarding arrangements within the service are improving, and people are generally protected from harm and abuse. Individuals told us they feel safe, and staff demonstrated an appropriate understanding of their safeguarding and whistleblowing responsibilities. Staff are regularly reminded of these responsibilities through supervision and team discussions, contributing to a more open and transparent culture. Safeguarding processes are now being applied more consistently and in line with safeguarding protocols. However, further improvement is required to ensure people's legal rights are fully upheld, especially processes relating to mental capacity and Deprivation of Liberty Safeguards. The service has recognised this and has begun to implement improvements which we look forward to reviewing at the next inspection.

Environment

Good

People live in an environment that is designed to meet their needs and promote their wellbeing. The layout of the home supports orientation and independence, with a circular design that enables people to move around easily. Additional orientation aids, such as personalised photographs displayed outside bedrooms, support individuals to recognise their own space and navigate the environment more confidently. In some cases, these include photographs from earlier life, which can be particularly beneficial for people living with memory impairment.

The environment is generally personalised and comfortable. Bedrooms reflect individuals' preferences and include personal belongings, which supports a sense of identity and familiarity. Communal areas are varied and provide opportunities for people to socialise, relax or spend time privately with visitors. During the inspection, we observed these spaces being used appropriately for a range of activities, indicating they meet people's needs.

The service is well maintained and appropriately equipped. Equipment to support people with mobility and additional needs is in place and suitable for use. Furnishings are comfortable, and the environment is warm and well-lit, contributing to a homely atmosphere. No significant environmental risks were identified during the inspection, and appropriate security measures are in place, including controlled access to the building and monitoring of visitors.

Infection prevention and control measures are effective. The environment was observed to be clean and tidy, with domestic staff maintaining good cleaning practices. Personal protective equipment was readily available and used appropriately by staff. The service has achieved a food hygiene rating of 'five', demonstrating strong standards in food safety. Ongoing health and safety checks are undertaken to ensure the environment remains safe and suitable for residents.

Leadership & Management — Good

Leadership and management within the service are improving and are increasingly supporting a positive, open and person-centred culture. Since the appointment of the current manager, there has been a clear focus on strengthening systems, improving communication and addressing areas requiring development. Feedback from staff and visitors reflects growing confidence in the leadership of the service, with people describing management as approachable, responsive and committed to making improvements.

Governance arrangements are developing, with increased oversight across key areas of service delivery. Quality assurance systems, including audits of care practices, medication and documentation, are in place and show signs of improvement. We acknowledge that more recent audits, particularly in relation to care planning, have been undertaken in a more robust and thorough manner. These audits have identified similar themes requiring improvement as those found during this inspection, demonstrating improved managerial insight and awareness. There are clear plans to further strengthen these systems, so they are consistently effective in identifying shortfalls and driving continuous improvement.

The service is fostering a culture of openness and engagement. People, their relatives and staff are encouraged to share their views through regular meetings and day-to-day conversations. This feedback is increasingly being used to inform improvements in the service. Complaints are managed appropriately, and leaders are developing a transparent approach to duty of candour, ensuring that people and their families are informed when things have gone wrong. Communication with the regulator has also improved, including more consistent and timely submission of notifications.

Staffing arrangements support safe and effective care. There were sufficient numbers of staff on duty during the inspection to meet people's needs in a timely and unhurried manner. Staff were observed spending meaningful time with people, offering reassurance and emotional support. Safe recruitment procedures are in place to ensure staff are suitable to work with vulnerable individuals, and there is a clear commitment to further strengthening training, supervision and workforce development. Staff spoke positively about their roles, describing a supportive working environment and good leadership.

Overall, leadership is having a positive impact, with clear progress evident. Continued focus on embedding governance systems and maintaining oversight will be important to ensure improvements are sustained over time. We look forward to reviewing these improvements at our next inspection.

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.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
The service provider must have robust systems to assess people's capacity. If the provider relies on assessments carried out by external professionals and completed before people were admitted to the home, people cannot be assured their personal plans and the care they get is based on accurate/up-to-date information.	22/09/25
The service provider must ensure the service is, at all times, provided with sufficient care, competence and skill, having regard to the statement of purpose.	22/09/25
The service provider must ensure that care and support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.	22/09/25

CIW has not issued any Priority action notices following this inspection.