Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Crick Care Home

Crick Care Home, Crick, Caldicot, NP26 5UW

01291 430909

www.crickcarehome.com

The inspection visits for this service took place between 23/07/2026 and 28/07/2026

Service Information:

Operated by:	Crick Care Home Limited
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:	49
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:

Crick Care Home is situated in a rural location on the outskirts of Caldicot in Monmouthshire. The service provides accommodation, support and nursing care for up to 49 people.

At this inspection, we found people's wellbeing is good. People and their relatives spoke positively about the service, and our observations confirmed that staff treat people with dignity, respect and kindness.

People receive good care and support, with personal plans and risk management arrangements in place to promote their health, safety and wellbeing. The management team recognises opportunities to further strengthen care planning to ensure it consistently reflects people's individual wishes, aspirations and personal outcomes.

People live in a good environment that is clean, comfortable and well maintained. They can move around safely and have access to the equipment they need to promote their independence, comfort and wellbeing. The provider continues to invest in the environment to enhance people's quality of life.

Leadership and management is good. Effective governance arrangements and visible leadership support positive outcomes for people. While improvements have been made since the inspection, further work is required to ensure all staff receive regular supervision, appraisal and opportunities for professional development.

Findings:

Well-being — Good

Feedback from people living at the service and their representatives was overwhelmingly positive. People are supported to make as many choices about their daily lives, including food, clothing and routines as possible. We observed staff offering choices and responding to people's preferences in a respectful and person-centred manner. Opportunities exist for the service to further strengthen how choices and people's views are recorded and evidenced within daily records and care planning documentation. The management team recognises the value of ensuring people have a stronger voice in shaping the service and is committed to developing a wider range of methods for gathering feedback and involving people.

Changes in the activities team has impacted on the current range and quality of activities, engagement and stimulation available to people. Activity assistants are developing their skills to ensure meaningful opportunities are available and people achieve positive well-being outcomes. People benefit from positive relationships with family and friends, and relatives told us they receive regular updates regarding their loved one's well-being. Visitors are welcomed, helping people maintain important connections and contributing to their sense of belonging and emotional well-being.

People are encouraged and supported to achieve and maintain the best possible health outcomes. Effective clinical oversight and monitoring help ensure people's physical health needs are identified and responded to promptly. Staff know people well and demonstrate a proactive approach to seeking medical advice and intervention when required. Medicine management processes ensure people receive their prescribed medication safely and reliably. The management team has identified opportunities to further strengthen staff confidence and consistency when supporting individuals who experience periods of heightened anxiety or distress to enhance outcomes for everyone living in the home.

There are effective systems in place to help protect people from harm. People are supported by staff who have been recruited safely. Safeguarding arrangements are well established, supported by clear policies and regular staff training. Accidents and incidents are monitored appropriately, with action taken to reduce the risk of recurrence. The service is also introducing additional monitoring of call bell response times to further strengthen assurance that people receive timely support when required.

People live in an environment that promotes their well-being and comfort. Bedrooms reflect people's individual preferences providing a sense of belonging. Outdoor space is accessible and include plans to develop a mini allotment where people can grow produce. Planned flooring

improvements will further enhance the environment. Consideration is also being given to creating a calmer communal atmosphere, supporting people to relax and engage comfortably in shared spaces.

The provider demonstrates a commitment to the Welsh Language Active Offer. Language preferences are considered during the pre-admission assessment. Information can be provided in Welsh on request with plans to further celebrate Welsh culture at the service.

Care & Support — Good

Feedback from people receiving a service, as well as their relatives and representatives, is consistently positive about the care and support they receive. Staff provide support in a caring, compassionate and person-centred way, demonstrating kindness and respect in their day-to-day interactions. We observe warm and meaningful engagement, particularly during mobility support, where staff offer reassurance, encouragement and praise to promote people's comfort, confidence and well-being. The management team promotes a culture of continuous improvement and is focused on building on these strengths to ensure every interaction consistently promotes dignity, respect and well-being.

An assessment is completed prior to admission to ensure the service can meet peoples identified needs. This assessment informs the development of personal plans that set out how people wish to be supported and identify the assistance they require. Plans provide clear guidance for staff and are regularly reviewed to reflect people's changing needs. The service effectively captures and responds to people's clinical needs; however, there is an opportunity to further enhance person-centred practice by including more detailed information about people's life histories, interests, preferences and what matters most to them. Greater emphasis on personal outcomes and clearer evidence of people's involvement, or that of their representatives, in care planning and reviews would further strengthen the personalised approach. The management team recognises these development areas and is committed to building on existing strengths to ensure care planning consistently reflects people's individual wishes, aspirations and well-being outcomes. We expect action to be taken to ensure a consistently person-centred focused is achieved.

Risk assessments are detailed and person-centred, providing clear guidance to support people safely and promote their well-being. Effective systems are in place to ensure people's rights and best interests are upheld. Mental Capacity Act assessments and Best Interest processes are in place where required. Systems will be further developed to reflect current changes associated with deprivation of liberty safeguards and legislative changes.

Appropriate referrals to health and social care professionals are made with recommendations acted upon by the service. People’s health is closely monitored to enable the service to act responsively to any change in their needs. There are effective medication management systems in place. We saw medication is securely stored and it can only be accessed by authorised personnel. Medication administration record (MAR) charts are filled in correctly confirming people receive their medication at the right time. We saw evidence of internal checks and actions taken in response to issues identified through external monitoring. The management team took action to strengthen monitoring and auditing processes, supporting the consistent delivery of care in line with people's assessed needs and specified timeframes for example with pressure relief.

Environment

Good

People live in a safe, clean and well-maintained environment at Crick Care Home. Access to the home is controlled through a keycode entry system, which helps ensure people's safety while maintaining their freedom to move around the service. Effective infection prevention and control measures are in place. Dedicated domestic staff maintain a good standard of cleanliness throughout the home, and all areas observed during the inspection were clean, tidy and odour free. Staff receive infection control training and demonstrated safe, calm and confident use of equipment when supporting people. Food hygiene standards are maintained to a high level, as evidenced by the service achieving a Food Standards Agency rating of 5.

People have access to comfortable and personalised accommodation. Bedrooms are of an appropriate size and reflect people's individual preferences, with personal belongings and items of significance helping to create a homely atmosphere. There are sufficient bathroom and toilet facilities to meet people's needs. The large communal area has been informally zoned through the arrangement of furniture to create separate spaces for social interaction and relaxation. Management is considering further enhancements to provide a dedicated calm and quiet area for people who prefer a lower-stimulation environment. People also have access to a garden with seating and shaded areas, and plans are in place to develop a mini allotment to support meaningful occupation and provide opportunities for people to grow their own produce.

There are maintenance systems with clear lines of communication, so any repairs are logged and completed in good time. We were told about a programme of upgrades including the replacement of flooring and redecoration. Comprehensive systems are in place to monitor the condition of the premises and equipment, with regular health and safety checks undertaken. Essential servicing and maintenance of utilities, including gas and electrical systems, are completed in a timely manner, and specialist equipment such as hoists and slings are routinely inspected to ensure they remain safe and fit for purpose. Fire safety arrangements are embedded, with regular checks completed and clear personal emergency evacuation plans in place for individuals. These measures help ensure people live in a safe, secure and well-maintained environment that supports positive outcomes and enhances their quality of life.

Leadership & Management — Good

The service benefits from established governance arrangements that support the delivery of safe care and positive outcomes for people. Quality assurance systems are in place, including Responsible Individual (RI) oversight visits and Quality of Care reviews. Operational audits and monitoring systems provide management with oversight of service delivery and demonstrate a commitment to continuous improvement. Going forward audit systems will include evidence of actions taken to address any deficits identified.

The service benefits from strong clinical oversight and effective leadership, with the service manager and clinical manager providing clear direction and support to a skilled team of nurses and healthcare assistants who work collaboratively to meet people's needs. Leaders are visible, approachable and well regarded by staff, promoting a positive and inclusive culture within the service. Management work closely with health professionals to support positive outcomes for people and responds constructively to external feedback, demonstrating a clear commitment to continuous improvement and the ongoing development of service quality.

People are supported by a stable staff team who are committed to their roles. Safe recruitment practices are well established and help ensure suitable staff are employed. All staff must provide appropriate identification documents as well as complete a Disclosure and Barring Service (DBS) check, provide satisfactory references and full employment history. New staff complete an induction programme that supports them to develop the skills and knowledge required for their roles. Going forward the management team will incorporate the All-Wales Induction Framework within workforce development arrangements. This will support staff to develop the knowledge and competence required to meet professional standards and progress towards recognised health and social care qualifications.

Staff compliance with core e-learning training was generally good. Gaps in staff's moving and handling, and fire safety training were identified, management recognised the significance of this and have started to address the deficits. Management have also experienced difficulties in maintaining consistent staff supervision and appraisal arrangements. This has previously been identified through internal monitoring and external reviews. Some improvements have been made since our inspection visit, but further work is required to ensure all staff receive regular supervision, appraisal and opportunities for professional development, we expect action to be taken.

Sufficient staff with the inclusion of agency staff were available to meet people's needs during our inspection. The provider does not currently operate a formal dependency tool or system to demonstrate how staffing arrangements are adjusted in response to changing needs. This is particularly important given feedback from staff regarding the complexity of people's needs,

including supporting individuals who experience behaviours that challenge and the impact this can have on the wider resident group and staffing resources.

Staff registration with Social Care Wales was well managed, and appropriate oversight of professional registrations for clinical staff was evident. Staff described feeling valued and supported by the management team, contributing to a settled workforce with low staff turnover.

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
People cannot be assured that their support is planned in a person-centred way, as personal plans do not consistently reflect their individual outcomes, preferences and what mattered to them.	23/07/26
People cannot be assured their care and support needs are consistently met, as staff had not received regular training, supervision and support to enable them to carry out their roles effectively and safely.	23/07/26

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

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