



# Inspection Report on

**Baltimore Care Ltd**

**Baltimore House  
1-2  
Park Road  
Barry  
CF62 6NU**

**Date Inspection Completed**

09/09/2021

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## About Baltimore Care Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Baltimore Care Ltd
Registered places	26
Language of the service	English
Previous Care Inspectorate Wales inspection	This is the first inspection since the home re-registered under the Registration and Inspection of Social Care (Wales) Act 2016
Does this service provide the Welsh Language active offer?	This is a service that does not provide an active offer of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people who use or intend to use the service.

### Summary

People are happy with the service they receive and have positive relationships with staff who care for them. The majority of staff feel well supported by their manager and enjoy working at Baltimore House, but improvements are required to ensure that all staff receive appropriate training to meet the needs of the people they care for. People mostly get support from external professionals in a timely manner, but personal plans of care need to be more detailed to ensure that staff fully understand people's needs and how best to support them. Management within the home is stable, but the provider needs to ensure that managers are supported adequately and that the Responsible Individual (RI) has safe and proper oversight of the service in general. The service has policies and procedures in place for the running of the home, but we found failings in regard to the safeguarding of vulnerable adults and a lack of understanding of safeguarding processes.

People live in an environment that is warm, clean and safe, but improvements are required to the cosmetic decoration throughout the home. People are cared for in their own single rooms, and are encouraged to personalise them, but some rooms would benefit from redecoration.

## Well-being

People are treated with dignity and respect. Care staff have positive relationships with people living at Baltimore house and provide care support in a caring, friendly manner. Staffing levels are sufficient to meet the needs of people using the service. Improvements to personal plans of care are required to ensure that they are thorough, robust and up-to-date so that staff have the correct guidance at all times. Referrals are made to external professionals in a timely manner and medication is administered as required and stored safely. The environment is clean and warm, but would benefit from cosmetic redecoration in some areas and bedrooms, which would enhance quality of life for people using the service.

People can be confident that their individual circumstances are considered. Care documentation is person centred and contains the likes and dislikes of people using the service. People are offered choice and are supported to be as independent as possible. Staff are able to anticipate the needs of people who cannot verbalise these themselves. There are social activities on offer within the home and people are supported to engage if they wish. People have their own personal routines and choose how and where they spend their time. There is ample choice in regard to food, drink and snacks which are offered at the time of servicing and not in advance. People are cared for in single rooms and are supported to make the room as personal and homely as possible; people are free to come and go to their room at their leisure and can also eat meals there if they prefer.

People cannot always be assured that they are safeguarded from harm because the provider has not demonstrated that they take the appropriate measures to alert CIW and other professionals when incidents happen. Staff recruitment is safe and robust, but improvements are needed to staff training to ensure staff can safely meet needs of people using the service. The home has a safeguarding policy and staff and staff are trained in the safeguarding of vulnerable adults, but there is a lack of understanding of the safeguarding process and how and when referrals should be made. Improvements to the leadership and management of the home are required to ensure the RI has good oversight of the service and can identify areas for improvement at the earliest opportunity, and take steps to make these improvements.

## Care and Support

People get the care they require, as and when they require it, but improvement to care documentation is required. Staff provide care with dignity, respect and kindness, and staff numbers appear sufficient to meet the needs of people using the service. People we spoke with, told us that they like the staff and are happy living at Baltimore House. We saw staff engaging positively with people with laughter and cheer throughout the home.

We examined a selection of care files and found that personal plans of care were seriously lacking detail of people's care needs, and how staff should meet these needs; there was no evidence of when personal plans are reviewed, which should be every three months or when a change occurs. We noted that robust pre-admission assessments are not taking place at all times, which is something that should always take place to ensure the service can meet the needs of the person being admitted. Referrals to external professionals are made when required and any advice and guidance is put into care files. We saw that some supporting documentation and risk assessments were thorough and robust, but care plans were not updated to reflect needs and changes.

People are supported to have choice and control over their lives. People have their own personal daily routine and decide when they get up in the morning, when they go to bed at night and how they spend time in between. We observed some people spending time communally while others chose to remain in their own rooms. There is a range of social activities available, and people are free to choose whether they engage or not. We were able to see a singing activity taking place, which people appeared to enjoy very much. People we spoke with told us that they enjoy the activities within the home and were happy that visiting to the home has resumed. Care documentation contains people's likes and dislikes and staff understand how people like to have their care provided. We saw staff offering people choice in regard to food and drink, and staff were able to anticipate choices for those who could not verbalise this themselves. Meal choices are offered at the time of service, which is good practice for people with reduced memory.

## Environment

People can be assured that they live in an environment that is suitable to meet their needs on a basic level, but would benefit from redecoration in places. Baltimore House is visibly clean, warm with no malodour. The home has an extensive communal space including two large lounges, and a large dining area that leads onto a large conservatory. This space enables people to spend time together, receive visitors and allows social activities to take place within the home. Some areas of the home have been redecorated, but we noted that further redecoration is required within the areas of the home residents' access. The service also has outdoor space, equipped with garden furniture, which people are free to use as they wish. There are ample bathrooms and toilets throughout the home for people to use, which are fully functioning, but we noted that some bathrooms would benefit from upgrading.

People are cared for in single rooms and are encouraged to personalise them with personal belongings and furniture where possible.

People live in a safe environment. On arrival we found the main entrance secure and we were asked for identification and to sign the visitor's book before being permitted entry. Baltimore House has Covid-19 measures in place, which we were asked to adhere to during inspection. We saw evidence that safety checks of the building are completed as necessary, including the servicing of equipment and gas and electricity safety testing. There is a fire risk assessment in place and all residents have a personal emergency evacuation plan (PEEP) which is important as this guides staff on how to evacuate people in the event of an emergency.

We saw that harmful chemicals are locked away safely and there are window restrictors in place. The home has a lift for people to access alternative floors safely and there are handrails in place. There is appropriate equipment to maintain peoples safety where required and hazards have been reduced as far as practically possible.

## Leadership and Management

People can be assured that they are supported by staff who are recruited safely, and mostly well supported by their manager, but improvements must be made to staff training. We saw evidence that pre-employment checks such as Disclosure and Barring Service (DBS) checks and references are sought before employment is offered. This is important as these checks determine the suitability of a person to work with vulnerable people. There is also a system in place to ensure that DBS certificates are renewed every three years. The staff training matrix showed staff attend mandatory training which is updated regularly, but we noted that there were two residents with a specific need that staff were meeting without any training, and so we have required that this training should be prioritised as a matter of urgency.

The majority of staff we spoke with told us that they are happy working at Baltimore House and feel well supported by the manager and each other. We saw that staff receive regular supervision from the manager, which is important as this is an opportunity to discuss practice issues or needs in a formal setting that is recorded.

People cannot always be assured that they benefit from the leadership and management at Baltimore House. There are processes in place to monitor the quality of care being delivered at the service, but this process has failed to identify the issues we have raised at this inspection. The manager receives no formal supervision, nor does the deputy manager and there is a lack of documented evidence to demonstrate they are supported by the provider. We were told, by the RI, that they attend the service regularly, but we were not sent any evidence of these visits despite requesting it at the time of the inspection and after it. Feedback from other professionals, similarly, was that it was difficult to contact the RI and manager where engagement and responses were required from them.

The home has policies and procedures in place for the safe running of the home, but the provider has not always ensured that referrals and notifications, to CIW and external organisations, are made when required. We identified failings in regard to the safeguarding of people living at Baltimore House due to a lack of understanding of safeguarding thresholds and when and how abuse should be reported.

We have issued a priority action (non-compliance) notice and the provider must take immediate action to address these issues.



**Areas for improvement and action at, or since, the previous inspection. Achieved**

**Areas for improvement and action at, or since, the previous inspection. Not Achieved**

None	
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**Areas where priority action is required**

Regulation 15(1)(a)(b)(c) and (d)	
Regulation 16(1)	
Regulation 26	
Regulation 36(2)(e)	
Regulation 66	

We found poor outcomes for people, and / or risk to people's wellbeing. Therefore, we have issued a priority action notice and expect the provider to take immediate steps to address this and make improvements.

**Areas where improvement is required**

None	
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