



## Inspection Report on

**Caledonia**

**CALEDONIA RESIDENTIAL HOME  
12-14  
WALTHEW AVENUE  
HOLYHEAD  
LL65 1AF**

## **Date Inspection Completed**

Date\_Last\_Inspection\_Completed\_  
**10 September 2021**

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## About Caledonia

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ann Bedford & Sarah L Herridge TA Ansa Care
Registered places	15
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">8 October 2020</a>
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer'.

### Summary

This was a focused inspection to determine whether people's well-being is maintained and that there are effective infection control measures in place, while there is a staffing shortage. We found people are content. We observed care staff are encouraging and supportive. Management take appropriate action to notify incidents and issues, which affect people's well-being, including staff shortage/s. The provider has made several improvements to the environment since we last inspected the service. We found the environment to be clean with sufficient and well organised Personal Protection Equipment stations.

## Well-being

People are encouraged to have control over their daily routines; they are offered a choice of meals and can choose where they spend their time. We saw people enjoying “Fish and chip Friday”. People told us they felt happy. One person told us the care is “*champion*”. We observed people laughing together and being supported by care staff. We found a lack of care staff present. We observed, the lack of care staff did not impact on the day we inspected. The provider had previously notified Care Inspectorate Wales (CIW); this is as a result of the impact of Covid 19 and guidance requirements. The provider has taken steps to work in partnership with the Local Authority to recruit more staff and plan ahead for future shortages of care staff. We found insufficient staffing levels has not affected the well-being of the people we observed.

People are encouraged and supported to be as healthy as they can be. We observed people being assisted by care staff who knew them well. We inspected while people were enjoying a freshly prepared lunch. People told us they enjoy the food. We found people are given a variety of healthy menu options for each meal on a daily basis. Care records show care staff monitor and observe people daily. We viewed a sample of care record observations which demonstrated care staff clearly record and update care needs and delivery.

The provider takes appropriate steps to safeguard people. They are effective in reporting incidents to the local authority and follow safeguarding procedures. We evidenced care staff report incidents when they are concerned for the well-being of an individual. Care staff have attended training in safeguarding within the required timescale. Records show appropriate action is taken to report and refer concerns. The provider is effective in informing CIW of any safeguarding issues. The service policies and procedures are in the process of being updated in line with legislation.

We found people are content. We observed people laughing with each other. We also observed care staff are responsive and available to respond to people’s care needs. We found the environment is safe and tidy.

## Care and Support

The service provider ensures care records are up to date and in line with people's care needs. The care records we viewed show care staff update care records daily and when care needs change. We observed care staff updating records while they were with people. Care records show appropriate and timely referrals are made to health care professionals to ensure people receive the care they need. We observed referrals being made to health care professionals while we were there. Professionals we spoke with informed us the care staff are effective in ensuring people receive the care they need. We found this was evident, though staffing levels are low due to the impact of the pandemic.

Infection control and prevention is maintained. Care staff are regularly updated on changes and developments in guidance and legislation, via a number of methods, including memos, signage, supervision and team meetings. We witnessed care staff wear and maintain Personal Protective Equipment (PPE) correctly and appropriately. We observed effective cleaning and hygiene routines and processes in place. We observed adequate hand sanitisation and PPE stations throughout the service. We found a marked improvement in the cleanliness of the service since the last inspection visit and found several communal areas have been de cluttered.

## Environment

We observed people to be 'at home' and comfortable in their surroundings. We found people made use of all the communal areas including both lounges, corridor areas and the snug. We found these areas to be clean and well organised with certain areas painted brightly to assist people living with dementia.

On entering the service, we found a secure entrance to the service; we found appropriate infection control routines undertaken by the care staff who greeted us, including, checking our identity, hand sanitisation, temperature checking and provision of PPE.

## Leadership and Management

Management ensure the care provided is overseen and efficient. People's care records show management update and change records when people's care needs change. Care staff records show they receive ongoing support within required timescales. Three care staff told us they feel supported and enjoy their work. We found training certificates to show staff's attendance. We viewed the service training programme which was consistent with training attended by care staff; this included training attended and plans for future training. The service policies and procedures are up to date and the training provided for care staff is aligned to these.

The provider ensures there are effective arrangements to oversee the quality of care provided. Low staffing levels, due to the effect of the pandemic, have impacted on the level of care provided, although this has not affected people's well-being. We observed people were content in their surroundings. We observed care staff to be efficient and responsive to people's care needs.

The quality of care is reviewed by the provider via several means; they link with families, professionals to receive feedback. They observe the care provided and review care records within required timescales. The acting manager and provider work well to ensure people's needs are met. Care files demonstrate good, consistent care is provided.

The provider ensures efficient overview of financial matters. They have worked effectively with the local authority and staffing agencies to ensure staffing levels are sufficient. Alterations and improvements are made to the service when required and improvements are planned.

We found staffing levels are maintained, but the pandemic and guidance surrounding this has had a negative impact on staffing levels. Care staff files show all staff are safely recruited, supported and trained. The provider ensures care staff are provided with ongoing and up to date support, guidance and procedures.



### 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	N/A



	this inspection	
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**Date Published 25/11/2021**