



Inspection Report on

The Forge Care Centre

**The Forge Care Centre
287 Cowbridge Road West
Cardiff
CF5 5TD**

Date Inspection Completed

06 and 10 October 2022

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About The Forge Care Centre

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Forge Care Homes Limited
Registered places	76
Language of the service	English
Previous Care Inspectorate Wales inspection	[Manual Insert]
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

The Forge Care Centre provides a good standard of care to people, many of whom live with dementia and have complex health needs. Care plans are in place and reviewed regularly. External health professionals support people in the home. Specialist care needs identified are met. Medication systems are safe. The service is currently working to improve the choice of modified diet options on the menu. Activities are offered and good one-to-one time is provided for people cared for in bed.

The environment is suitable for people's needs with adequate resources and facilities. People like having their own rooms and surrounding themselves with things that are important to them. People are consulted about the décor. Communal spaces are suitable with satellite kitchenettes to provide care workers the means to prepare food for people when they need this, in addition to the home cooked food prepared in the main kitchen. Equipment is available and when this needs servicing or repair, this is arranged promptly.

A dedicated, effective management team supports the wider care team with good communication and monitoring systems. They identify areas for development and proactively address these. Improvements have been made to record formal supervision of staff by line managers. The workforce is recruited safely, offered training and development opportunities, and encouraged to register with Social Care Wales. A responsible individual (RI) has oversight of the service, is supportive of the care team, and undertakes their regulatory duties with due diligence.

Well-being

People know and understand what care, support and opportunities are available to achieve their well-being. Before deciding to live at The Forge Care Centre, people or their representatives have access to information to tell them what the service offers. An appropriate member of the care team speaks to the person to gain as much information as they can so that a plan can be agreed. Regular reviews of plans take place, involving the person or an advocate so any changes can be addressed. On a day-to-day basis, activity schedule and menus provide information to help decision making, and care workers consult with people about their preferences. When a person's needs change, the care team discusses this with the individual or their representative, so an agreed approach is documented and action taken to provide the right support. Opportunities are offered to people, including engagement in more organised, social activities, but when people chose not to be involved, this is respected. The provider is currently considering how they can return to a focus of meeting the 'Welsh Active Offer,' which has been put on hold due to the recent pandemic.

The service provider ensures the safety of people is maintained. The environment is secure and measures are taken to know who is in the building. Risk assessments are in place regarding the environment and steps taken to maintain this to a good standard. People have plans in place that outline how to keep them safe, including preventing falls and how to provide support if an emergency evacuation of the building is needed. When people are unable to make decisions for themselves, they are supported by family representatives or advocates, and relevant authorities are aware. The environment and equipment is tested and maintained. The staff team have training around keeping people and themselves safe, with up-to-date policies and procedures for further reference.

Measures are taken to support people to remain as healthy and as active as possible. The service is proactive in considering people's individual needs and providing care and support accordingly. While people are encouraged to maintain as much independence as possible, support is provided as required. Regular monitoring of weight, and other observations give the team information to get the right help and support if this is outside of the scope of the nursing team. People have access to regular health care professionals and are referred for more specialist support if required, such as management of skin problems. Medication is administered safely and reviewed with appropriate consultants or doctors. Personal plans include details of how someone would like to be cared for if their health deteriorates. People who live with dementia are supported by a knowledgeable staff who demonstrate compassion, but consistency of engagement with people is required across the whole staff team.

Care and Support

People receive information about the service before they choose to make The Forge Care Centre their home. A senior member of staff collects as much information as they can about a person before they move into the service, and confirms if the service can meet the person's needs. People or their representatives can express their wishes and explain how they would like their care delivered. This is recorded and used to write a person-centred care plan that outlines any risks. It also details the support to be provided to help the person achieve identified outcomes. We discussed ways to streamline this process with management, who took immediate action to address this. Personal plan reviews take place with the individual or their representative on a regular basis.

Daily records document the care provided. We saw that people who require support with re-positioning, fluids and nutritional intake received this. More clinical tasks identified within a person's care plan are conducted by suitably qualified clinicians or nurses. Medication administration records are electronic based and audited regularly. There are safe practices around medication including agreements with professionals when someone needs their medication disguised to help them take it. This is also recorded within the application for a 'Deprivation of Liberty' authorisation, when an individual requires support of advocates to help make decisions on their behalf. People have their medication reviewed with a health professional regularly. Indicators, such as weight in addition to daily records are used to monitor a person's health and well-being. When required, referrals are made to external professionals for specialist care and advice.

People are generally happy with the support they receive and their regular care team but some people told us they would like more consistency of staff so they know who is going to be helping them. We saw warm interactions between people and some of the care team, while other members did not appear to engage as well. This was drawn to the attention of the management who is aware and working on this. We found that some people towards the end of the day shift present as a little unkempt and odourous. The 'Clinical Lead' has reviewed the distribution of staff within a unit to ensure high standards of personal care is delivered at all times. People receive support with one-to-one activities to suit their situation, with strong evidence that those who are cared for in bed are engaged with such arrangements on almost a daily basis. One person has a 'Buddy'/ companion system which is working well, enabling them to go out to the community. Consideration is being given to how this can be consistently provided throughout the service, especially for those who choose not to join in group activities. While the home acknowledges they need to develop choice around more specialist diet requirements, people are mostly happy with the food, with one person saying *"it's very good, and the gravy is good, which makes a meal."*

Environment

The Forge Care Centre provides a clean and well-maintained environment with adequate equipment to meet people's needs. Systems are in place to routinely check and service the environment and equipment. When items require repair, external contractors are contacted in a timely manner. There has been a recent delivery of reclining chairs and easy chairs for living rooms. We saw that people had suitable equipment in place to help keep them safe and prevent injury from falls. Some worn items require replacement, but the manager is aware and is addressing this. A passenger lift is available, and in working order. All areas are presented as clean with procedures to prevent spread of infection mostly followed. The manager was made aware that some bins in bathrooms needed replacing with pedal operation types. This was undertaken immediately. Cleaning materials are available and managed safely, with storage areas kept locked.

Improvements have been made following an Environmental Health visit to assess the main kitchen area. Small kitchen areas on each floor are well maintained and have systems in place to monitor and refresh the food items stored in cupboards and fridges. These remain locked when care workers are not in the immediate area to help protect people as some people are at risk of ingesting items that could pose a choking hazard. Some areas of the home present as very warm. Medication storage could be compromised as room temperature records are not available to review. The clinical assistants addressed this and will monitor the temperatures as required.

The service consults with people about the décor of the areas of the home in which they live. Colourful feature walls in communal areas are the result of consultation and joint decisions making with people who spend time there. Bedroom doors are coloured so that people can easily identify their own. People have their personal items around them, and the service makes every effort to accommodate people's wishes to have their own furniture. Bedrooms are en-suite and there is sufficient additional bathing facilities. There has been an issue with the overhead hoist in bathrooms, but this is being addressed.

The majority of people living in the home lack understanding around keeping themselves safe. The home has security systems so units on all four floors can only be accessed by authorised people, and only people who understand the risks around leaving the home can do so without support. People have 'Personal Emergency Evacuation Plans' in place that explain how they will be supported if evacuation is required. Regular fire drills take place, though records could be more detailed. Risk assessments around 'Fire Safety' and 'Water Safety' are in place and routine testing of equipment related to these is evidenced.

Leadership and Management

A responsible individual (RI) has oversight of the service, attends the home regularly and is supportive of the workforce. The staff team acknowledge how approachable the RI is, and how they have helped them with their personal situations and professional development. The RI undertakes their duties with due diligence. The quality of care delivered is monitored and reports produced around this. A 'Service User Guide,' which is a document that informs people what to expect from the service is clear and regularly updated. A suite of policies and procedures is available, relevant and reviewed regularly, including 'Safeguarding of Vulnerable Adults' and 'Infection Control.' The financial viability of the service has been discussed with the RI who indicates there is no concern around this. The RI and staff team consult with people or their representatives regularly to help develop the service.

There is a dedicated, compassionate management team, clinicians, nurses and nursing assistants who lead by example. They are proactive in consulting health professionals. A General Practitioner we spoke to told us that the service works closely with them, communicating effectively to optimise the health of the individuals living at the home. They complimented the 'professional approach,' of the service. The 'Clinical Assistants' and 'Nursing Assistants' are described by the management team as 'The backbone of the service' and we saw the effective monitoring of care, medication and staff on every floor. We spoke to families of people receiving a service who confirmed good communication about their loved one's needs, and told us that care workers are "*kind, caring and gentle.*"

All staff are recruited safely with pre-employment checks and relevant documents stored within personnel files. All staff are suitably qualified and there is a focus on provision of quality face-to-face training. We saw that the workforce are trained and apply their knowledge around subjects such as 'Fluids and Nutrition.' They understand people's individual needs including their ability to swallow and the modified foods to support safety when eating. Competencies are checked by line managers and discussions around this takes place in supervision meetings. All care workers are encouraged to register with Social Care Wales, the workforce regulator, with a high percentage having done so.

Mechanisms are in place to monitor all aspects of the service including the environment. The 'Clinical Lead' monitors the care delivery, auditing tasks and documentation to consider the support of individuals, in addition to supporting ongoing development. Current development plans include supporting the newly appointed chef to provide modified food for specialist diets, offering a wider variety of options freshly cooked on site.

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. 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
35	Ensure that full employment histories and written references are obtained and available for all staff	Achieved
36	Ensure that all staff receive core training appropriate to the work they do	Achieved
80	Ensure that a Quality of care review report is completed at least every 6 months	Achieved

Date Published 10/11/2022