



## Inspection Report on

**Cwmgelli Lodge Ltd**

**Cwmgelli Lodge  
Lon Pennant  
Blackwood  
NP12 1BR**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

### **Date Inspection Completed**

21/06/2022  
21 June 2022

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## About Cwmgelli Lodge Ltd

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Cwm Gelli Care Limited
Registered places	26
Language of the service	Both
Previous Care Inspectorate Wales inspection	27 April 2021
Does this service provide the Welsh Language active offer?	Yes. The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

Cwmgelli Lodge is registered to provide care services with nursing for up to 26 people. People living at the service and their loved ones are happy with the care and support they receive. Care workers provide support to people with dignity, respect and warmth.

Personal plans are clearly written and instruct care workers on how best to support people. Plans are reviewed regularly to make sure they reflect people's current needs and aspirations. Overall, records are kept accurately and consistently.

The home is has undergone a major refurbishment since the last inspection, which has been completed to a high standard. The lounge areas are now separated from the dining areas which provides a more 'homely' feel about the environment and allows people to socialise in smaller groups.

The manager oversees the day to day running of the service with support from the deputy manager. Care workers are confident in their roles and feel well supported by the management team. The Responsible Individual (RI) has good oversight of the service, they visit regularly and know the care staff and residents well.

## Well-being

People have control over their day-to-day lives as much as possible. We saw people socialising with each other and engaging with care workers. People choose where to spend their time. We saw some people prefer to stay in their rooms, whilst many spend time in the communal areas.

People have regular house meetings to give their views on the running of the home and choose things like décor for specific areas. The home welcomes visitors in line with current guidance and the providers risk assessments. People and their loved ones we spoke to were complimentary about the home and care staff. One family member told us *“The staff are quite exceptional; the manager has been very open and welcoming. They've gone out of their way to make us feel welcomed at all times. We couldn't ask any more of them and they always keep us well informed.”* Other people told us how much they liked living at the service, receiving visits from loved ones and pets and going on a variety of trips and activities.

People receive the support they need to maintain their health and wellbeing. The service completes a range of risk assessments and personal plans, which identify each person's care and support needs and how these can best be met.

People have their own rooms, which are personalised to their individual tastes. People have some of their own furniture and family photos, cards and collectables in their rooms, which gives a homely feel to their surroundings.

The service helps to protect people from abuse and neglect. Care workers complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the current guidance and is kept under regular review.

## Care and Support

People receive the care and support they require. We observed care workers to be attentive and supportive to people. The care needs of each person are clearly documented, and care staff access this information to inform their daily routines. Plans are regularly reviewed to ensure they are up to date and reflect people's current needs and aspirations. The manager told us that they were implementing a process to record how relatives and loved ones are involved in the personal plan reviews. Accurate records are kept by care staff to evidence that people are supported as described in their personal plans.

Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP). Records are kept of all appointments and outcomes for review as required within the daily notes. The manager told us that a new system was being introduced to evidence these appointments separately for easier access. The provider has their own therapy and clinical teams which support the home. People are supported to maintain a healthy weight and diets are reviewed when required. Drinks are readily available for people throughout the day.

People are encouraged to engage in activities if they choose to do so. We saw an entertainer playing the guitar and singing on the day we visited. The activities coordinator provides one to one activities to people as well as arranging a variety of group activities. People enjoy their meal experience and the meals provided; they are encouraged to be as independent as possible and supported when required.

Systems are in place for the safe management of medication within the service. People receive appropriate support with their medication, which helps to maintain their health. The home liaises with the GP for some more complex administration procedures, we found that the recording of this should be improved. The records we checked were mainly completed accurately, the manager assured us some gaps in temperature recording would be addressed.

Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance. Regular COVID-19 testing of staff is carried out. We were asked for evidence of a negative lateral flow test result and had our temperature taken before entering the home.

## Environment

The home has been fully refurbished. to a very high standard. The environment is light bright and homely. New furniture has been acquired for the lounges, which is both sturdy and in keeping with the decor. The home is clean, tidy and well organised. People's bedrooms are personalised to their own tastes, individuals have some of their own furniture in their rooms as well as photos of loved ones, pictures, flowers, and ornaments. Kitchenette facilities are provided within people's own rooms where it is safe to do so for them to make drinks and snacks. Bedrooms all have en suite facilities. The communal bathrooms contain specialist baths with integrated hoists and are spacious, clean and tidy.

The outdoor is pleasantly laid to level paving which provides a walk around the garden. There is a large well-maintained outbuilding which has also recently been refurbished. One of the residents has named this 'The Elite Club'. The building has a large pull-down projector and comfortable seating areas with its own kitchen facility and hair salon/barber shop room. The club is used for entertainment and events and visitors as well as staff training sessions. There are a number of raised beds which people have been supported to plant the flowers. There is a sensory garden area with a bench, solar lighting, wind chimes and butterfly charms. We were told that a water feature is being installed soon.

People benefit from a secure environment; the front door is kept locked. We viewed the maintenance file and saw that all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency. The home has a five-star rating from the food standards agency which means that hygiene standards are very good.

## Leadership and Management

People benefit from effective leadership and management. The service's statement of purpose accurately reflects the service provided. Throughout our visit, we saw there was a sufficient number of care workers on duty to support people. We viewed four weeks of staff rota's which evidence that sufficient staff numbers are consistently deployed.

Care workers receive regular supervision. with their line manager. This one-to-one support provides opportunity for staff members to discuss any concerns or training needs they may have and for their line manager to provide feedback on their work performance. The manager assured us that all care staff will also start to receive annual appraisals. Care staff feel valued and supported in their roles. We were told the management team are approachable and always there to help or advise care staff when required. Communication between the team is good and care workers enjoy their jobs.

The manager is supported by a deputy manager with the day-to-day running of the home. The provider makes necessary referrals to external agencies as required but has not always notified the regulator of required events in a timely manner. This is an area for improvement, and while no immediate action is required, we expect the provider to take action and will follow this up at our next inspection.

Care workers personnel files are well organised and contain all of the required information. Care staff are confident and skilled in their roles. They complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm.

The RI has undertaken regular quality assurance checks by visiting the home to talk to individuals and care staff and review documents. The RI completes detailed and thorough audits of the quality of the support provided as well as the wider running of the home. The reports highlight where the home is performing well as well as areas for improvement.

### 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
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60	Ensure that notifications are made in a timely manner and without delay	New
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**Date Published** 17/08/2022