



# Inspection Report on

**Valley View Care Home**

**Dan-y-coed  
Cefn Hengoed  
Hengoed  
Cardiff  
CF82 7LP**

**Date Inspection Completed**

16/03/2023

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## About Valley View Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	View Care Home Ltd
Registered places	64
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">[06 10 2022]</a>
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

There have been significant improvements to the service and outcomes for people living at the home. People get the support they need when they need it. Staff are guided by accurate and up to date personal plans which are completed with the person and/or their relatives prior to them moving into the service. Care documentation provides a picture of the person as a whole and what is important to them along with the person's care needs. Activities which people enjoy take place within the home as well as seasonal events where relatives and loved ones are encouraged to take part. Interactions with people are positive and relaxed and the management team are actively involved within the service.

The service is homely and welcoming, and people have choice about where to spend their time. Processes are in place to ensure people live in a safe environment, including measures to promote good hygiene and infection control.

There is an experienced management team in place and the service is actively recruiting for a clinical lead post. The RI visits the service and completes the required reports in line with regulatory requirements.

## Well-being

People receive person-centred support and are involved in decisions affecting the care they receive. The deputy manager completes assessments with the person and/or their representative and writes personal plans prior to a person moving into the service. Care information is reflective of a person's current needs and informs staff how to support them. Care documentation includes a person's preferences and what is important to them, as well as their social history, which provides the foundation for holistic care delivery. Staff regularly review people's personal plans and keep them up-to-date, and the manager has discussed with the staff team how to ensure that people are involved in this process. Care staff receive training and support to understand how best to support and care for people.

Daily activities take place within the service and the activities coordinator is creative to ensure preferences and capabilities are catered for in both individual and group activities. Regular events take place in the home, such as an Easter bonnet parade and a candlelight Christmas Carol concert.

The management team are fully involved in the service and are accessible to both staff and people living at the home. There have been recent improvements in the service which have had a positive impact upon people's wellbeing. The management, and staff team, work in collaboration with professionals within health and social services and act on recommendations to improve outcomes for people.

People live in an environment which is safe and supports their wellbeing. Issues which may pose a risk to people's wellbeing are acted on when identified. Bedrooms are respected as a person's own space and are personalised to their taste.

The service ensures there are safe staffing levels in place and there are governance arrangements to monitor this. There continues to be a vacant post of 'clinical lead' in the home and the service accesses clinical oversight from the leads within the wider service while they continue to actively recruit for the post.

## Care and Support

People receive dignified care and support as and when they need it. People talk with each other, and we saw warm and friendly interactions taking place. Informal conversations are integrated within care tasks in a relaxed manner which provides an informal feel to the service. People can be confident the service is assessing and reviewing their care on a regular basis. Reviews are detailed and reflective, and care documentation is updated when needed. Outcome focused personal plans are written in a dignified manner and contain sufficient detail for staff to understand what care is needed.

Care and Nursing staff make daily notes on people's care and the manager leads daily staff meetings to share vital information about people's health and wellbeing.

A full-time activities coordinator arranges daily activities for people which cater to the preferences of people living at the service. Group and one-to-one activities are available and how these activities are inclusive to people with a range of needs is carefully considered.

People can access information about the service and the Statement of Purpose (SOP) is up to date and sets out what people can expect from the service.

Care and Nursing staff are happy in their roles and feel that they have enough time and support to do their jobs.

## Environment

The service is inviting and homely, and there is a variety of artwork and photographs on display which relates to local history and culture. People's rooms are personalised with their own belongings and pictures. People are appreciative of the views from the front of the home and spoke about this to us. There is a maintenance team at the service and there are regular works and improvements taking place to maintain the home and the gardens.

Care staff wear appropriate levels of personal protective equipment (PPE) and there are infection control supplies throughout the home. The service employs domestic staff who support in maintaining the hygiene and cleanliness of the environment and the home is free from any malodour. We saw that the cleaning trolley was unattended, and we were assured this was an isolated incident. The home has a food hygiene standard of five which means there is very good hygiene practices within the kitchen.

The home has a number of areas available for people to use and consideration has been given to the provision of resources throughout the home for people and their loved ones to enjoy.

## Leadership and Management

There are clear roles and lines of accountability within the service. A management team is in place which consists of a full-time registered manager and deputy manager and the service is overseen by an experienced Responsible Individual (RI). The RI attends the service and completes the required reports, and the management team have contact with them as needed. Governance arrangements have improved which includes a 'managers walk around' to 'spot check' the quality of care and support provided. Adequate numbers of staff meet people's needs and there are processes in place to monitor staffing levels within the service. These levels are flexible based on the needs of people at a particular time.

Care and nursing staff within the service receive an induction and improvements are needed in the recording of these. Staff personal files are in place and there is work ongoing to bring these up to regulatory standards. There is an area for improvement for this area which will be reviewed at the next inspection.

Staff within the home have regular formal one-to-one supervision, and there are reflective sessions held with the staff team to improve the knowledge and skills of the team. A meeting takes place daily to share information about the key care needs and priorities for people living at the service, in addition to hand over meetings twice a day.

### 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
21	Regulation 21 (1). The service provider must ensure that care and support is provided in a way which protects, promotes and maintains the safety and well-being of individuals.	Achieved
36	Regulation 36 (2) (c). The service provider must ensure that any person working at the service receives appropriate supervision and appraisal	Achieved
67	Regulation 67. The responsible individual must appoint a person to manage the service.	Achieved
34	Regulation 34 (1) (a) (b) (c) and (d). The service provider must ensure that at all times a sufficient number of suitably qualified, trained, skilled,	Achieved



	<p>competent and experienced staff are deployed to work at the service, having regard to (a) the statement of purpose; (b) the care and support needs of the individuals; (c) supporting individuals to achieve their personal outcomes, and (d) the requirements of the regulations in Parts 3 to 15.</p>	
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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
35	The required information for staff personnel files is not all present	Reviewed

**Date Published** 05/06/2023