



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

Hollylodge Residential Home



Hollylodge Residential Home, 1 Ton Road, Cwmbran, NP44 7LF



01633866326



www.virgocarehomes.com

Date(s) of inspection visit(s): 03/07/2025

Service Information:

Operated by:	Virgo Care Homes Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	29
Main language:	English
Promotion of Welsh language and culture:	The service provider anticipates, identifies, and meets the Welsh language and culture needs of people.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

Hollylodge Residential Home provides personal care and support to people living with dementia. The service is in a residential area of Cwmbran close to local amenities. People's well-being is good because they are safe, supported by kind and committed staff and enjoy a regular programme of activities. There has been improvement in peoples care and support with a commitment to focus on achieving people's outcomes. The environment is clean, comfortable, and well maintained. Dementia friendly approaches are used to promote people's identity and independence. The leadership and management is good. An experienced manager runs the service, and the responsible individual (RI) is a regular presence. Staff recruitment practices have been strengthened which further safeguards people living at Hollylodge.

Findings:



Well-being

Good

People are valued and treated with dignity and respect. They are encouraged to make everyday choices to select their clothes, participate in activities and spend time as they want. Staff are familiar to people and know them well having developed positive relationships. A keyworker system provides each person with a designated staff member, which supports consistency and familiarity. We saw staff being kind, friendly and treating people with genuine warmth and affection. As part of the admission process individuals' social histories are compiled with their family and friends. People's rooms are decorated with photographs and keepsakes. Memory boxes, outside of each person's room further promotes individuals' uniqueness. The service provider consults with people which has a positive impact on their well-being because it serves to develop the service. A relative told us, *"I am always made to feel welcome. Our relative is safe and the staff are wonderful."* Another said, *"staff are approachable, and I am satisfied with the service/s provided to my relative."*

The service provides people with a secure environment where they are safeguarded. People are supported to remain as independent as possible with their daily activities. Potential risks are considered and managed. Many people experience good well-being because they are supported to maintain their physical and mental health. Relatives are engaged in reviews of their loved one's care and support which promotes openness and transparency. Staff make safeguarding referrals as necessary, and action is taken to ensure people are kept safe.

People are supported to do things they enjoy, which keeps them happy and healthy, and provides a sense of personal well-being. People have meaningful interactions with others and value the relationships they have built. Staff have a good understanding of people's needs, encourage them to maintain a healthy, varied diet and act upon any health concerns. People are provided a regular timetable of activities with opportunities to visit the local community. The home uses a private Facebook page, to keep family members updated on different events and activities taking place. The service is working towards providing an active offer of the Welsh Language. During the admission process people are asked about their preferred language. Staff use key words to speak with individuals who speak Welsh, and the service makes efforts to celebrate Welsh history and culture.

A dementia friendly environment further supports and enhances the lives of people living at Hollylodge. The service is clean, comfortable, and well maintained. A garden offers people an accessible space to spend time outside.



Care & Support

Good

People receive good quality of care and support, but further improvements are needed to ensure they consistently achieve their well-being outcomes. An electronic personal plan details the care and support needs for an individual and directs staff of actions to take to meet needs, but not all plans identify their personal outcomes. Since our last inspection, there has been improvement in plans with a commitment from the service provider to focus on people's outcomes. Residents and their relatives are fully engaged in the care planning process. Additionally, individual care records do not always demonstrate people are consistently receiving the right amount of care and support. The service provider has identified staff's recording of care and support interventions needs to be improved and they are working to achieve this.

There are plans to strengthen the admission process to improve outcomes for people. These include the deputy manager becoming a dementia champion which will support the gathering of information about prospective residents to include their social history, personal preferences, and routines. This will support personal plans to be more reflective of people's preferences and wishes..

The service provider ensures people have access to a nutritious and balanced diet. There are sound systems for monitoring people's nutritional needs and weight. Timely referrals are made to healthcare professionals supporting people to maintain their physical health. A health professional who visits the service on a regular basis has confidence the staff and managers' report any changes in a person's care and support needs. They confirmed people are treated with dignity and respect.

There are robust policies around administration of medication in place. Medication is safely administered within the service, by suitably trained staff. There are processes in place to deal with any medication errors, and these are followed. Audits and checks are completed within the service, and these are reviewed by the manager.



Environment

Good

People live in a safe environment with appropriate and well-maintained facilities and equipment. We found the service offers people a warm, comfortable and well-furnished place to live. It is set over two floors and promotes smaller community living. People are given a choice of different communal and private areas in which to spend time alone or with others. People's rooms reflect ownership with photographs and keepsakes on display. The corridors are decorated with pictures to stimulate and engage people. There is good, clear signage throughout the service. People can walk freely around each floor which supports their well-being. Outdoor spaces are safe, attractive, and accessible which provides people further opportunities. The service is welcoming, comfortable, and homely.

Risks to health and safety are identified and reduced as far as possible. There is effective monitoring and auditing of the environment and maintenance of the home is good. We found cleaning regimes and standards of hygiene throughout the home to be good. The service provider ensures the premises complies with current legislation in relation to health and safety, fire safety, environmental health, and the Food Standards Agency (FSA). The service has an FSA rating of 4, which is 'good'. There are systems in place for the management to audit the environment and request any repairs or upgrades as needed. Most repairs are undertaken by a member of the company's maintenance team. Security arrangements are in place to protect people without compromising their rights, privacy, and dignity.



Leadership & Management

Good

The service provider has suitable governance and oversight of the service to ensure its smooth operation. Quality monitoring systems include audits of care and support provided, visits to the service by leaders and regular feedback from people who use, work, and visit the service. The service provider has already identified the need for more reliable staff recording of people's care and support interventions. This will serve to demonstrate people are receiving consistent care and support in accordance with their plans. There are effective mechanisms in place to ensure people's voices are heard and respected. The service provider carries out a six monthly satisfaction survey for people who use and work at the service. The feedback is used to develop and improve the service.

The service provider ensures timely notifications are sent to relevant authorities in the event of significant incidents in the service. This ensures appropriate actions are taken promptly to safeguard people and maintain service quality.

The provider has robust selection and vetting processes for hiring staff, which ensure all staff are suitable to work with people who may be vulnerable. All new staff complete an induction which include training and shadowing experienced staff, as well as accessing the relevant policies and codes of practice. Staff told us the service provider supports staff's development. Staff have regular one to one supervision sessions with their line manager and training is monitored. Overall, people can be assured they are supported by staff with the necessary expertise, skills, and qualifications to meet their care and support needs.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

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