



Inspection Report on

St Saviours Nursing Home

**115 Splott Road
Cardiff
CF24 2BY**

Date Inspection Completed

04/09/2023

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About St Saviours Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Crusader Medical Care Ltd
Registered places	29
Language of the service	English
Previous Care Inspectorate Wales inspection	29 January 2019
Does this service promote Welsh language and culture?	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

People receive continuity of care from dedicated and compassionate staff across the teams working at St Saviours Nursing home. The service delivers person centred care which is effective because staff know and understand the needs of people living in the home. The staff team work collectively to ensure people are as well as they can be and do things that matter to them. Care staff show genuine warmth towards people using the service and people's uniqueness is respected. Staff are well-informed of people's care needs and preferences.

Care staff receive training to meet the needs of people living in the home. There is a culture of openness and honesty throughout the team and staff feel valued and supported. This positively impacts on the people using the service. There is effective oversight of the quality of the service people receive with a manager and responsible individual (RI) available to staff and people. People, representatives, and staff are confident management would respond to concerns or worries should they have any. There are systems in place to protect people from harm, such as sufficient staffing, policies and procedures and regular quality monitoring.

Well-being

The service provider encourages people to be active in making daily choices about the care and support they receive. People's individuality is recognised and valued, and this positively impacts on how staff communicate with every person, and how they express their needs and wants. People told us *"I have things that are important to me" and "staff are always about; they are kind and helpful."* People's preferences are catered for, and personal outcomes are met. People are listened to, and their opinions are important to management and care staff.

People are supported to take part in a range of activities and there is a dedicated activity room, which is well-equipped with arts and craft items and games. People enjoy a degree of flexibility of what they do and when, and some enjoy pre-arranged day trips with staff. Some people choose to go out to the local shops and parks either independently or with staff support. Some representatives told us they would like to see more activities on offer. People occasionally meet with the activities team to chat about what they would like to do. Overall, people have company and socialise with others when they choose to, and staff are mindful of people who may isolate themselves.

The service provides a safe environment. People told us they feel safe and well looked after. They receive the support they need to maintain their health and well-being and people's choices about medical matters are well-documented. Emotional well-being is important and care staff are quick to respond to people who need comfort and kind words.

People are protected from abuse and neglect. Care staff complete safeguarding training and there are policies and procedures in place to fully inform staff of their role and responsibilities. New staff are mentored and guided by experienced care staff. The service takes prompt and appropriate action when there are isolated incidents or safeguarding matters. People are confident to speak openly with the manager and care staff if they are unhappy or worried and they trust the staff to make things right for them.

Care and Support

Care staff work well with people to include them in decisions about their day-to-day care and support. Detailed personal plans tell care staff about how people want to be cared for. Care staff review the personal plan with people on a regular basis to ensure the plan is up to date. We saw input from other health care professionals for some reviews. Information about the service is not consistently available to people or written in a way that is accessible to them.

Care staff keep accurate daily records of the care and support offered to people. Personal outcomes are consistently met. Care staff know people extremely well and take action if they notice a decline in a person's well-being or health. For some people the service monitors weight and nutritional information which is shared with appropriate health care professionals. Overall, there is an effective system in place to monitor people's health and well-being. Some records tell us people take part in activities, but this is not consistent for everyone.

There are robust systems in place for receiving, storing and administering medications. Staff responsible for safe handling and administering medications are suitably trained and monitored. The medication policy is up to date and fully informs staff of the correct procedures when handling people's medications.

On the day of the inspection staffing levels were sufficient to provide safe care and support across the communities in the home. People receive timely care and support, and care staff respond to people's needs quickly. We saw interactions between people and staff to be kind and caring, and staff communicate with warmth and patience.

People access healthcare professionals to meet their other needs, such as GP services, optician, podiatry and dental. Most appointments are recorded in the daily records. When people require specialist care the provider ensures appointments are arranged and people are encouraged to attend. People are as well as they can be and told us "*I am in good health living here*". Some representatives would like more frequent health updates and for oral care to be a focus for the service.

The care team work well with the kitchen staff and pass on information relating to a person's dietary needs. People who require a modified diet or have additional support needs at mealtimes are catered for. Representatives told us "*The food is home cooked and good.*"

Environment

The home is well maintained and is safe for people to move around freely between communities. Records relating to health and safety and the maintenance of the building are in good order. There is regular and thorough oversight of the environment, when repairs or replacement items are needed there is an efficient system in place to ensure timely works are carried out. There is enough equipment for moving and handling, and we saw records of servicing and routine visual checks of equipment being carried out by staff.

We found cleaning regimes and standards of hygiene throughout the home to be good, and inside communal areas are pleasant spaces for people to spend their time. The service employs a team of domestic staff to maintain the standards in the home. All staff have access to personal protective equipment (PPE).

There are areas in the home that are locked or restricted for people and some visitors. This is to keep people and representatives safe from harm. The home is welcoming of visitors and there is a choice of rooms where people can meet. On the day of the inspection, we signed the visitor's book and were properly shown around the home as not to cause people distress or worry. Some people can leave the home to visit the local area if they choose to. The provider ensures there are appropriate arrangements in place for people needing additional support and safeguards to leave the home.

People have access to a few outdoor spaces; all of which are beautifully maintained and offer people a relaxing and calm space to socialise or spend their quiet time. There are safe smoking arrangements for people that do not impact on others. On the day of the inspection, we saw lots of people freely going in and out of the garden and enjoying the space.

Bedrooms are of a suitable size and personalised with things that are important and meaningful to people. All people have their own bathrooms, which are clean and well maintained. Generally, people store their own toiletries. The manager is taking steps to put safer storage arrangements in place in the event of a person not managing their personal items safely.

The service offers staff a safe and secure place to store their personal items and a room for staff to take their breaks.

Leadership and Management

There are sound governance arrangements in place and a clear organisational structure. The service is embracing change, and investing in new systems to improve how they keep people's daily care records and other documents. The system provides the RI oversight of incidents, accidents, and safeguarding matters. There is effective monitoring of the service.

The provider values people's opinions on the service they receive, and people are invited to have their say. We found action is taken by the provider when they have feedback. The RI visits the home on a regular basis and speaks with people, staff, and representatives to gain their view of the service. The RI looks at care documentation, the environment and considers the experiences of people living at the service. The RI completes a quality care review to fully inform the provider of how well the service is doing and whether people's outcomes are being met. The quality care review tells the provider of what actions need to be taken to further improve the service and outcomes for people. The most recent quality care review is incomplete, the RI is aware and committed to complete the review in full.

The service provider follows a thorough and safe recruitment procedure. Induction, training and mentoring for most staff is complete and robust, but we found some gaps in staff supervision. Staff who administer medication are trained to do so and their continued skills and competencies are overseen by an appropriate member of staff. Care staff who are eligible, are registered with Social Care Wales, the workforce regulator. Training for staff is varied and meets the needs of the people living in the home, most staff are up to date with training and some staff told us they want more support with learning and development.

Staff have access to detailed and comprehensive policies and procedures, but it is not always clear when staff have read and understood the documents. Most staff told us there is "*Good teamwork, and consistent management*" which means better outcomes for people. Staff unanimously respect and trust management, and there is an open and transparent culture with-in the team throughout. Staff meetings are not as frequent as they need to be, but the manager is making immediate changes to ensure meetings are planned on a regular basis.

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
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Date Published 19/10/2023

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