



## Inspection Report on

**EMJ & GP Ltd TA Park View Care Home**

**94 Gnoll Park Road  
Neath  
SA11 3DD**

## **Date Inspection Completed**

23/11/2023

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## About EMJ & GP Ltd TA Park View Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	EMJ & GP Limited
Registered places	34
Language of the service	English
Previous Care Inspectorate Wales inspection	03 November 2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

People and their relatives are very happy with the care and support provided at the home. They live in a comfortable homely environment that is warm, clean and suitable to meet their needs. There is information available for staff to understand how to best meet people's care and support needs. People have personal plans in place which are reviewed regularly. There is a Responsible Individual (RI) in place and a manager registered with Social Care Wales.

Staff are available in sufficient numbers and have a mix of skills to adequately provide support to people. Care workers are knowledgeable, respectful and caring. Safety equipment is in place and health referrals are made when necessary to promote people's health and well-being. There are opportunities for people to take part in activities at home and in the community.

The service provider has developed systems to enable them to capture people's views and put checks and processes in place to keep service delivery under constant review.

## Well-being

People and their relatives are very happy with the care and support provided. There is good information available for staff to understand how to best meet people's care and support needs. People told us they get on well with staff and commented, *"they know me well."* A relative commented *"they are very welcoming and reassuring. I have not been worried since she moved in."* and *"It's great here, there's always something going on."* Records show people are offered choices to make everyday decisions. The responsible individual (RI) told us they regularly speak with people who live at the home and their families about what is important and how to best support them and this was supported by documentation seen by us.

People are protected from abuse and harm. Park View Care Home has an appropriate safeguarding policy in place and staff receive training in the safeguarding of adults at risk of abuse. The Service Manager has a good understanding of the legal requirements and understands when a safeguarding referral needs to be made to the Local Authority.

People get the right care and support. Records show that timely provider assessments are completed and referrals are made to a variety of healthcare professionals such as psychiatrists and physiotherapists. This is confirmed by comments from visiting professionals who told us they are satisfied with the care at Park View Care Home. They commented *"care staff maintain an active role in the liaising with wider services and actively seek additional training to improve understanding and management of individuals living with dementia."*

People can do the things that matter to them when they want to do them. We saw there are a range of activities available which are meaningful to people. Throughout our visit we observed activities taking place facilitated by the activity coordinator and care workers. People told us they enjoy taking part in a variety of activities such as going out for a coffee, attending local attractions and the local rugby club. Relatives told us their family member is encouraged to stay active and to do as much as they can for themselves. This is reflected in people's records.

People live in suitable accommodation, which overall, supports and encourages their well-being. People's bedrooms contain personalised items of their choice and are suitably furnished. They have facilities which encourage their independence. The building is well-maintained and safety checks are completed when required.

## Care and Support

There is a care planning system in place providing personal plans for all aspects of the individuals' physical, mental, and emotional wellbeing. We examined a sample of care files, which contained personal plans and risk assessments which are regularly reviewed. Person centred information such as 'About Me' are in place and referrals for advice and professional help regarding health services are sought as needed. Monitoring of care activities is in place with information available to staff.

People can do the things that matter to them when they want to do them. We saw there are a range of activities available which are meaningful to people. There was photographic evidence and written documentation as well as observations of people undertaking activities that matter to them. Activities include going to a local rugby club to attend a community club, local clubs and daily shopping. People told us they enjoy taking part in a variety of activities. Records show people have access to local community facilities. A visiting professional commented, the service is *"very good"*.

Mealtimes are a positive experience and, where required, individuals are supported sensitively to eat and drink. Healthy choices of food and drinks are available and are promoted. The mealtime observed by us demonstrated a sense of mealtimes being a good dining experience which can help enhance social interaction, build a sense of community and increase nutritional intake. For example, the menu was displayed for people to see and make a choice, the dining tables were laid and the mealtime was seen as an enjoyable social experience.

The service has safe systems in place for medicines management. There is an appropriate medication policy and procedure in place with regular audits completed by senior staff. Medication administration records (MAR) are accurate. We saw medication was kept in a secure locked cabinet in a locked room. A record is kept of the temperature and is monitored to ensure safe storage of medication. Records of appointments with medical professionals were seen in care records.

Policy, procedure and application of hygienic practices are in place to reduce risks of infection. Staff demonstrate an understanding of infection control and the use of personal protective equipment (PPE). Staff wear appropriate PPE and follow correct procedures. The home is very clean and tidy. Staff maintain appropriate standards of hygiene. Oversight and auditing of infection control measures are in place. The home has sufficient stocks of PPE.

## Environment

The accommodation is homely, comfortable and benefits from good quality decor and furnishings. We observed the environment to be free of clutter throughout. We saw people sitting in the dining room, lounge and conservatory on the ground floor and sitting in the comfort of their bedrooms which were personalised to their tastes.

There is a system of monitoring and auditing, which supports a planned maintenance schedule and renewal programme for the fabric and decoration of the premises. This is managed by the staff at the home under the guidance of the manager and RI. The sample of four bedrooms viewed had facilities and equipment that is suitable for the individual. Staff ensure that individuals are treated with respect and sensitivity.

Measures are in place to ensure risks to people's health and safety are identified and dealt with. The oversight of health and safety is in place with regular audits of the environment. These records were difficult to navigate but were completed as required. The newly appointed manager showed us the new system developed to make scrutiny of these documents easier. Maintenance records show equipment is regularly serviced to make sure people remain safe. People's personal records are held securely and access to the home is monitored by staff to help keep people as safe as possible.

Laundry is managed appropriately and is well organised. All laundry equipment is in working order. There is an area with shelving for linen storage and ironing facilities. There is an organised storage area for household waste and clinical waste bins. The storage of substances which have the potential to cause harm was sufficient because we found that materials used for cleaning were stored in an appropriate locked cupboard.

## Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service. Arrangements for the oversight of the service are in place, such as systems for care planning, monitoring, and review to enable people to achieve their personal outcomes. The service is provided in line with the objectives of the Statement of Purpose, which is regularly reviewed. We saw policies and procedures are in place and reviewed regularly.

People can be assured the service provider and the management team monitor the quality of the service they provide. The RI visits the home regularly and meets with people and staff. We viewed the latest quality monitoring report, which showed people's feedback. Recommendations for improvements were included and implemented. We saw evidence the RI has oversight of the service and the manager conducts quality assurance system monitoring to ensure quality care is delivered but this could be strengthened by further developing the audit process.

The service provider has oversight of the financial arrangements and investment in the service. The RI assured us the service is financially sustainable to support people to be safe and achieve their personal outcomes. The RI told us of investment such as *"plans to extend the care home to increase the number of beds. As part of this extension, all new rooms will meet the standard of ensuite bathrooms and the communal space for existing and new residents will be increased to ensure better facilities and wellbeing."*

There are enough staff on duty to safely support and care for people. Records show there is a stable and consistent team in place with a mixture of experienced and new staff available, and this was seen during our inspection. People living at the home told us *"The staff treat me well"* and a relative commented *"The staff are wonderful to me."* Staff recruitment checks are completed prior to employment commencing. Supporting and developing staff with supervision, appraisal and training is sufficient. The manager informed us that training is being updated to ensure all staff have completed the appropriate training required.

### 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
N/A	No non-compliance of this type was identified at this inspection	N/A
21	Audits of care activities were insufficient such as measurement of personal outcomes. Ensure that a robust system of audits of care activities with an emphasis on personal outcomes is implemented.	Achieved
57	Records of monitoring of health and safety checks were disorganised and inconsistent. Ensure records are organised and accessible.	Achieved
36	Some staff training records were in need of updating to ensure staff were completing all the training required .	Achieved

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