



Inspection Report on

EMJ & GP Ltd TA Park View Care Home

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

Date Inspection Completed

03/11/2022

01 & 03 November 2022

Welsh Government © Crown copyright 2022.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

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	[Manual Insert]
Does this service provide the Welsh Language active offer?	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 happy with the care and support provided at Park View Care Home. They live in a pleasant and homely environment that is warm and suitable to meet their needs. There is information available for staff to understand how to best meet people's care and support needs.

Staff are available in sufficient numbers to provide support to people. Care workers receive appropriate support, and staff supervision and appraisal meet regulatory requirements. 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 available for people to take part in activities.

The service provider has developed systems to enable them to capture people's views and to develop person centred information. The established management team have put checks and processes in place to keep service delivery under constant review.

Improvement is needed with staff training, audits of care activities and administration of records of health and safety checks.

Well-being

People and their relatives are happy with the care and support provided. There is 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, *"yes, they're good to me" and "the staff are always there when I need them."* A relative commented *"the staff are excellent"* and another commented *"they're very good, very friendly."* Records show people are offered choices to make everyday decisions. The 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.

People are protected from abuse and harm. Park View Care Home has a 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 referrals are made to a variety of healthcare professionals such as psychiatrists and community nurses. This is confirmed by comments from visiting professionals who told us they are satisfied with the care at Park View. Recording of monitoring of care activities is in place but requires strengthening to include the achievement of personal outcomes for people.

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 the residents. Throughout our visits on both days, we observed activities taking place facilitated by care staff and an activities coordinator. People told us they enjoy taking part in a variety of activities such as quizzes, visiting entertainers and having a singalong. 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 and enable them to have private time. The environment is clutter free.

Staff recruitment is safe as pre-employment checks are completed prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people.

Care and Support

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 clean and tidy. Staff maintain appropriate standards of hygiene and cleaning schedules are in place with oversight from the manager.

People are provided with the care and support they need. We examined a sample of care files, which contained initial assessments and personal plans which were regularly reviewed. There is a care planning system in place providing support plans for all aspects of the individuals' physical, mental, and emotional wellbeing. Referrals for advice and professional help regarding health services are sought as needed. A relative confirmed this, "*The care home are always quick to call in outside help when needed.*" Monitoring of activities was in place with information available to staff. However, improvement is needed with the measurement of quality of life outcomes for people as this was not evidenced in the records seen by us and would benefit from some further work to make these explicit. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People enjoy a positive dining experience. We observed people during a lunchtime meal and saw the care workers assist people in a relaxed and dignified way. Most people ate their meals at dining tables which had placemats, cutlery, and condiments in place. Some people ate their meal at cantilever tables by their chair. Staff assist residents in a respectful and dignified way and are aware of people's dietary requirements. There was a menu displayed for people to choose what to eat and they were also verbally told what was on the menu. Where people do not like what is on the menu, an alternative is offered. One resident commented "*The food here is lovely.*" Where people wish to dine alone or eat in their rooms this is respected and facilitated by the staff.

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. The provider also employs a pharmacy to undertake more detailed checks of medicine management within the home. Medication administration records are kept in an electronic record and are accurate. We saw that medication was kept in a secure cabinet in a locked room. As and when required medication (PRN) was appropriately administered in line with instructions. To ensure medication is stored at the correct temperature, medication room temperatures are checked and recorded daily.

Environment

The accommodation is comfortable and benefits from sufficient quality decor and furnishings. The home is calm, informal, and relaxed. We saw people sitting in the lounge and the dining room on the ground floor, sitting in the comfort of their bedrooms, relaxing or asleep in bed. The environment supports people to achieve their personal outcomes.

The RI told us about work planned to extend the care home into the neighbouring property which has been purchased and has secured planning permission. It is hoped this extension will increase the resident communal areas whilst continuing to modernise the care home. The RI stated this will be undertaken *“whilst maintaining the home from home environment that ensures residents, families and staff have a happy environment to live and work in.”*

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.

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, which is managed by the maintenance officer at the home. However, improvement is needed with records of monitoring of health and safety checks with view to ensuring the system of records is well organised and accessible. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Entry to the home is safe and documents are stored securely. Visiting professionals are requested to sign into a visitors' book on arrival, ensuring people's safety is maintained. Visitors are also required to follow the home's infection control procedures in relation to COVID-19. Information is stored securely in locked offices and care documentation is treated sensitively ensuring people's privacy is upheld.

The laundry room is well organised and has entry and exit doorways. Appropriate systems are in place and all laundry equipment is in working order. There is an area with cupboards with shelving for linen storage in place and ironing facilities. There is an organised storage area for household waste and clinical waste bins.

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 assessment, care planning, monitoring, and review to enable people to achieve their personal outcomes. The service is provided in line with the objectives of the updated Statement of Purpose, which is regularly reviewed. We saw policies and procedures are in place and updated.

People can be assured that the service provider and the management team at the home monitor the quality of the service they receive. The RI visits the home regularly and meets with residents and staff. We viewed the latest quality monitoring report, which shows the provider asked for people's feedback and that recommendations for improvements were implemented. We saw evidence that the RI has oversight of the service, and the service manager conducts a quality assurance system to ensure quality care. We discussed with the manager the need for the quality assurance policy to develop a more robust system of care audits. We looked at documentation that confirmed the RI conducts quarterly visits to the home for quality assurance monitoring.

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 plans to extend and renovate the home as discussed earlier.

There are enough staff on duty to safely support and care for people. Records show there is a mixture of experienced and new staff available, and this was seen during our visit. People living at the home told us "*The staff are always around when you want them*" and "*there's enough staff*". A relative commented "*there's plenty of staff*" and another commented, "*there's always someone there if you need them.*"

Staff recruitment is safe as pre-employment checks are completed prior to employment commencing. These checks are important as they determine a person's suitability to work with vulnerable people.

The sample of staff supervision and appraisal records seen were carried out at the required frequency and staff files are well organised and contained all the required documentation.

Improvement is needed with staff training. We were shown a training matrix, which includes mandatory courses as well as other courses. The staff training matrix needs updating to ensure staff were completing all the training required which was acknowledged by the RI

and manager. Particular attention needs to be given to training for Equality, Diversity and Inclusion and Raising Concerns and Whistleblowing. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

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
------------	---------	--------

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.	New
57	Records of monitoring of health and safety checks were disorganised and inconsistent. Ensure records are organised and accessible.	New
36	Some staff training records were in need of updating to ensure staff were completing all the training required .	New

Date Published 30/11/2022