



Inspection Report on

St Nicholas House Care Home

**St. Nicholas House
Church Stoke
Montgomery
SY15 6AF**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

03/08/2023

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About St Nicholas House Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	St Nicholas House Ltd
Registered places	49
Language of the service	Both
Previous Care Inspectorate Wales inspection	12 June 2019
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People are happy with the care and support they receive at St Nicholas House. Care staff are kind and respectful. They work hard to make sure people get the care and support they need and are happy. People have opportunities to do things they are interested in.

The manager has good oversight of the service provided. Care staff feel supported and have training opportunities to make sure they can meet people's care and support needs. Information within personal plans tell care staff how to support people but improvements are needed to risk management to support people to be as independent as they can be. People are not always involved in care planning or setting the goals they would like to achieve, and this requires improvement.

The responsible individual (RI) visits the service regularly. Quality reports are produced which show what the service does well and what needs improvement. The management team are committed to making changes to enhance the lives of people living and working at St Nicholas House. This includes making ongoing improvements to the environment.

Well-being

People have choice and control over their daily lives. They told us care staff respect their decisions, including where to spend their day, have their meals and what if any activities they want to take part in. One person told us “*I can do as little or as much as I want to do*”. People give their views on the service through meetings and informal discussions with the management team. Improvements are made on their suggestions. For example, people said they wanted to start a garden club; this is now in place. When asked what is good about living in St Nicholas House, one person said “*everything*”. People can have their service in Welsh if they want it. Some staff can converse bilingually. Key documents including the statement of purpose (SOP), guide to the service, monthly activity booklet, and some policies are available in Welsh.

The management and staff promote people’s health and well-being. Families praise the care staff saying they work hard to improve people’s lives. Comments from relatives include “*staff seem to have a genuine concern for residents*”. They told us activities are “*brilliant*” and care staff go “*over and above*” to make sure people do what they want to do. Families are encouraged to continue to be part of people’s lives which enhances their well-being. Referrals to health and social care professionals are made in a timely way. Medication is managed well. People told us care staff are responsive when they need support. Personal plans are in place which record the care and support people require. However, people should be involved in developing these documents so care staff know what is important to each person and the support needed to meet their individual personal outcomes.

People are protected from abuse and neglect. Care staff have appropriate training including safeguarding. Robust recruitment practices make sure care staff are safe to work with vulnerable people. Improvements to risk management is needed to make sure measures are in place to support people to take risks and maintain their independence.

People live in accommodation which is safe and promotes their well-being. Equipment is in place to promote people’s independence, which is maintained regularly. Improvements are being made to the outside space to allow people with mobility needs to safely access all areas of the garden. There is an ongoing programme of maintenance including new dining room furniture and redecoration of the dining room to enhance the dining experience for people.

Care and Support

People can do things important to them. There is a full programme of activities on offer. A monthly booklet is produced detailing what is happening each day of the month and includes the menu for each day. We saw people taking part in group or individual activities. Family members told us they can visit at any time and join in the activities. Relatives also told us people are supported to do things important to them including attending the local church. We saw people and their family enjoying ice-cream while taking part in an activity in the garden. There was a lot of laughter with people clearly at ease with the activity staff and enjoying being with their relatives. People told us they can access the community and are supported to join in community events.

Personal plans are developed so care staff know the level of care and support people need. These are reviewed regularly but people are not involved in this process. Goals set are task based but are not personal to the individual. Peoples' personal history and preferences are not always recorded for care staff to know what is important to them and the outcomes they would like to achieve. Risk assessments do not always show steps to be taken to mitigate identified risks to people's health and safety, as well as to promote people's independence. The manager is proactive and is taking steps to address this matter. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

Processes are in place to protect people from abuse and neglect. People told us they feel safe and well cared for. They said care staff respond quickly when they ring their call bell for assistance. Care staff spoken with know what to do if they have concerns about a person's well-being and how to report this. Records show staff have training in line with the needs of the people they support. Policies are in place to guide care staff regarding safeguarding matters.

People are supported to be as healthy as possible. Care records show referrals are made to health professionals when needed. Information about people's health needs is available for care staff within the personal plans. Records show people consistently have their medication as prescribed by well trained staff. These documents are stored appropriately and are regularly audited.

Environment

People live in accommodation to suit their needs. Equipment and adaptations support people to achieve their personal outcomes and as far as possible maintain their independence. Some signage around the home is in Welsh and English. People we spoke with told us they like their bedrooms which we saw are personalised with items important to them. There are communal areas available for people to enjoy. Records show there is a programme of refurbishment underway. The chef spoke positively about plans they have in place to enhance the mealtime experience for people. This includes improving the dining room as well as increasing meal choices. They told us management are fully supportive of new ideas which will enhance people's mealtime experiences. We saw some bedrooms have been redecorated and new flooring fitted. Records seen and discussion with the management show more work is planned. Works to improve the outside area is due to start. This will impact positively on peoples' well-being, making the area much more accessible to people with mobility needs.

People live in an environment which is clean and tidy. We saw domestic staff work hard to make sure the environment is clean and smells fresh. They told us they have all the equipment they need to do their job and a good stock of cleaning products. Records show they have suitable training which they confirmed. The manager does weekly walks around the home which includes checking Personal Protective Equipment (PPE) is in place and checking the cleanliness of the home including the kitchen. The kitchen has achieved a score of five (the highest score) following a Food Standards Agency inspection.

Systems are in place to ensure peoples' health and safety within the environment. Regular checks of equipment take place, including fire safety, hoists and other equipment needed to support people to keep safe. Staff have training to use equipment including the hoist to promote people's safety. Staff have fire safety training, so they know what to do in an emergency. Records are well maintained and show health and safety checks take place regularly.

Leadership and Management

People benefit from an effective quality assurance programme which ensures the continued improvement of the service. People's views on the quality of the service provided are sought through meetings, informal discussions with the manager, RI and operations manager during their visits. Surveys are sent out regularly as another way for people to comment on the service provided. The RI visits regularly and talks to people, staff and relatives. This is demonstrated in reports completed following the visits. The six-monthly quality of care reports show the RI identifies what is working well in the service and what needs improving. The manager has very good oversight and carries out regular audits of all aspects of the service. Records are well organised. The manager demonstrates a commitment to implementing new ideas to benefit people living and working at the service.

People have clear information about the service. The SOP is reflective of the service provided. The guide to the service includes useful information about what people can expect when they move into St Nicholas House. Both these documents and some policies and procedures in place to guide staff are available to people in Welsh if they want them.

People are supported by care staff who are appropriately recruited and receive training and support relevant to their role. Care staff told us the management are approachable, they can talk to them at any time. Records show they have regular one to one meetings with their line manager and an annual assessment of their work. This helps them to identify any career progression or training they may need regarding their personal development. Team meetings take place regularly. Records show topics for discussion include people's well-being as well as any other matters affecting the day to day running of the service. Training records show staff have training appropriate to the needs of the people they support. Recruitment processes make sure people do not start work until all the required checks are carried out. New staff complete an appropriate induction and probationary period to make sure they are suitable to work at the service.

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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15	Personal plans should be developed with the individual and show how they will be supported to achieve their personal outcomes. They should include steps to be taken to mitigate identified risks and support positive risk taking	New
16	People should have the opportunity to be involved in reviewing their personal plans to make sure they continue to meet their personal outcomes.	New

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