



Inspection Report on

St Marks Court

**St. Marks Court Nursing Home
Park Terrace
Swansea
SA1 2BY**

Date Inspection Completed

02/04/2024

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About St Marks Court

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	PARKCARE HOMES LIMITED
Registered places	38
Language of the service	English
Previous Care Inspectorate Wales inspection	28/09/23
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 happy with the care and support provided at the home. They live in a comfortable homely environment. People living in the service are treated with compassion and respect by a dedicated care team who know them well. There is information available for staff to understand how to best meet people's care and support needs. A new electronic care record system has been implemented and people have personal plans in place which are reviewed regularly. A new management team has been recruited and there is a Responsible Individual (RI) in place and a manager registered with Social Care Wales. This has brought stability to the service following an unsettled period.

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

Whilst improvements have been made with health and safety, care and support plans and the implementation of the electronic care record system. Improvements are still needed with staff supervision and continuity of care.

Well-being

People and their relatives are 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, *"the staff are lovely, they have a good laugh with me."* A relative commented *"they are very kind; they can't do enough"* and *"my dad is very happy with his care."* 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. St. Marks Court Nursing 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, Care Plans and reviews 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 Mumbles Nursing Home.

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 activities coordinator and care workers. People told us they enjoy taking part in a variety of activities. 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 care 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 building is well-maintained and safety checks are completed when required. The service has recruited a dedicated maintenance officer for the home but they have yet to start in their post. The environment is clutter free and hazards are reduced as far as possible.

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. Oversight and auditing of infection control measures are in place and the home has sufficient stocks of PPE.

Improved care and support plans were seen with the electronic care planning record system in place providing personal plans for all aspects of the individuals' physical, mental, and emotional wellbeing. Person centred information is available and referrals for advice and professional help regarding health services are sought as needed. Monitoring of care activities is in place but needs to be strengthened.

People can do the things that matter to them when they want to do them. We saw a range of activities available which are meaningful to people. People told us they enjoy taking part in a variety of activities. There was photographic evidence and written documentation as well as observations of people undertaking activities that matter to them. Activities include Pamper sessions, games, quizzes, one to one chats, bingo, visiting entertainers and music therapy. Records show people have access to local community facilities.

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 paper care files.

People enjoy a positive dining experience. We observed people during a lunchtime meal and saw the care workers assisted people in a relaxed and respectful manner. The dining tables were laid ready for lunch with placemats, cutlery, condiments and a table centre piece. There were tablecloths on the tables and there was enough seating in the adequate size dining room. There was a radio on in the background with age-appropriate music playing. We saw adequate space to allow for wheelchair users. Food was served at a relaxed and unhurried pace and was seen to be an enjoyable social experience. People living at the home told us "*The food here is lovely*" and another said, "*it's delicious.*"

Environment

The accommodation is homely, comfortable and benefits from ongoing updated good quality decor and furnishings. We observed the environment to be free of clutter throughout. We saw people sitting in the lounge 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, which is managed by the maintenance staff from another home in the service provider group under the guidance of the RI. A new maintenance officer has been appointed but has yet to commence their new post. The sample of bedrooms viewed had facilities and equipment that is suitable for the individual.

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, but these would benefit from strengthening. For example, we observed that the maintenance officer's room was out of use due to a problem with the flooring and this area was a little cluttered with items stored in an area used by residents. The manager told us this was in the process of being addressed. 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 well organised. Appropriate systems are in place and laundry equipment is in working order except for one washing machine which was faulty at the time of our visit. 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.

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 *"The home has an ongoing maintenance budget and has appointed a fulltime Maintenance Officer to ensure the upkeep of decoration and maintenance across the home."* They elaborated *"We invest in a breadth of service specific and professional training for staff, so that they are competent and skilled to provide consistent care and support for residents and maintain their wellbeing and personal outcomes and wishes."*

There are enough staff on duty to safely support and care for people. However, records show there is a reliance on temporary (agency) staff to maintain these levels. Improvement continues to be needed to ensure a stable and consistent team is in place with a mixture of experienced and new staff available. This is still having an impact on people's health and well-being and we expect the provider to take action.

Improvement continues to be needed with supporting and developing staff with supervision. The manager informed us that support with staff supervision is being prioritised and training is being updated to ensure all staff have completed the appropriate training required. This is still having an impact on people's health and well-being and we expect the provider to take action.

The service provider has selection and vetting systems for staff recruitment and pre-employment checks are completed prior to employment commencing.

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
57	Staff admitted to using inappropriate manual handling. Staffing levels reliant on agency staff. Insufficient manual handling equipment. Fire safety items blocking firefighting equipment, fire escape overgrown. Health and safety, some electricals are not PAT tested. Inappropriate staffing levels in the kitchen, impacting on the dietary requirements of those on modified diets. There are a number of rooms in need of a deep clean and repair.	Achieved

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
22	People were not provided with consistency of care and support by staff who know the person.	Not Achieved
36	At our inspection on the 28th and 29th of September we found that staff have not received supervision in line with regulatory time scales. Staff stated they do not feel supported.	Not Achieved
21	We observed, and were informed by staff, that the electronic system for care planning was not fully operational. Not all the information seen was up to date.	Achieved
15	Care and support plans do not reflect the needs of people. Specifically, communication and manual handling plans. Plans do not make clear how the individual will be supported to achieve their personal outcomes	Achieved

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Date Published 23/04/2024