

Inspection Report on

Morgana Court and Lodge

Morgana Court Porthcawl Road South Cornelly Bridgend CF33 4RE

Date Inspection Completed

28/03/2024



About Morgana Court and Lodge

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Silvercrest Care Homes LTD
Registered places	63
Language of the service	English
Previous Care Inspectorate Wales inspection	25 th August 2023
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 living at Morgana Court and Lodge are happy with the care and support they receive from care workers. People live in an environment which supports their wellbeing. Bedrooms are personalised and well presented. All bedrooms have ensuite facilities. Care workers have positive relationships with people. There are daily activities people can participate in if they choose to do so. Staffing levels are sufficient. Care workers are happy working at the service and report team morale as being positive.

The Responsible Individual (RI) has oversight of the service, however, improvements to governance arrangements are required to ensure the best possible outcomes are achieved for people living at the home. At the last inspection we identified an area for improvement in relation to standards of care and support. At this inspection we found issues persist. Personal plans require strengthening and do not always reflect people's needs or consider risks. Medication management systems need to be more robust. Staff supervision and training needs to be improved.

Well-being

Care and support is not always provided in a way which support's people's safety and well-being. The Area for Improvement identified at the last inspection has not been fully addressed. People's personal plans need to be enhanced and medication management systems require strengthening to ensure people remain safe. Not all care workers are up to date with their training requirements, nor have they received the required level of formal support.

People are treated with respect. We observed positive interactions between people and care workers during our inspection. We received positive feedback from people and their representatives regarding the quality of care provided. Relatives told us the service keeps them informed and updated. People are provided with opportunities to access specialist care and advice when they need it. All visits and appointments are documented in people's personal plans. People are encouraged to participate in activities should they choose. These are person centred, supporting people's physical and mental health and emotional well-being.

People are listened to and have influence over the care they receive. People tell us they know how to make a complaint and are confident the management team would listen if they needed to raise any issues. People can choose where and how to spend their day and are provided with a choice of nutritious foods.

People live in an environment which supports their well-being. The environment is well-maintained and is clean and tidy throughout. An ongoing programme of maintenance and repair ensures the environment remains safe. People can personalise their rooms to their preference. Specialist equipment and mobility aids are available for those who require them.

Care and Support

Improvements are required to ensure care and support is provided in a safe dignified manner. We looked at a selection of personal plans and found they needed strengthening. Discrepancies in relation to people's dietary and hydration needs were identified. We noted not all those requiring support to manage behaviours have plans in place to help care workers provide dignified care and support. We saw care provided is not always delivered in line with care plans, this had a negative effect on the person receiving care. We also identified a number of medication errors during our inspection. We discussed these issues with the management team and explained this is having an impact on people's health and well-being and placing them at risk. Care and support was an area requiring improvement at the last inspection. We have therefore issued a Priority Action Notice. The provider must take immediate action to address these issues.

People have access to the necessary health and social care services to help maintain their health and wellbeing. Care workers know the people they support well. They can recognise changes in people's presentation and report to the relevant professional for advice or support. Personal plans contain documented evidence of appointments with professionals such as GP's, Dentist's, and Social Workers.

People are pleased with the care and support they receive. We observed people in the presence of care workers, they looked relaxed and comfortable. We saw care workers engaging with people and having meaningful conversations with them. People we spoke with are positive about the service they receive and are complimentary about care workers and the management. One person said, "The staff are lovely". Another person commented, "The staff are good people, they know what they're doing".

People are offered choice and are supported to maintain relationships with family and friends. Care workers encourage decision making around meals, activities, and when people would like to go to bed at night and get up in the morning. The service understands the benefit of people maintaining contact with family and friends. We spoke to several relatives of people living at the home who told us there are no restrictions on visiting. Relatives also provided complimentary feedback on the service provided, one relative said, "The staff are fantastic, they have a chat with us, they're great". Another relative said their loved ones are "well looked after".

Environment

People live in a clean, comfortable well-maintained environment. The home is well presented throughout with a good standard of furnishings. All bedrooms have ensuite toilet facilities and are individualised to people's tastes, containing photos and decorations which make the environment feel homely and familiar. There are a range of communal areas where people can choose to spend their time and participate in activities. Domestic and laundry workers are at the service daily to ensure good standards of cleanliness and hygiene are maintained. The kitchen facilities have been awarded a score of five by the Food Standards Agency, the highest rating available. Kitchen staff have a good knowledge of people's dietary needs including any special dietary requirements. We observed staff offering a choice of meals.

Entry to the home is secure, with visitors having to sign in on arrival and sign out on departure. The home has outdoor spaces people can use and enjoy. The home is maintained to a good standard. Safety certification for fire safety features and utilities such as gas and electricity are up to date. The fire risk assessment is current, and people have personal emergency evacuation plans in place. Substances hazardous to health are securely stored in line with relevant statutory guidance. Regular health and safety audits are conducted to identify and action areas of concern. Confidential information is securely stored and can only be accessed by authorised personnel.

Leadership and Management

We found improvements are needed in relation to the services governance arrangements. We saw evidence the RI visits the service regularly and speaks to people and care workers to inform improvements. Whilst a six-monthly quality of care review takes place these need to be enhanced to ensure rigorous oversight. Quality of care reports need to be developed further so they capture the analysis of things such as safeguarding matters and lessons learnt. Medication audits are not routinely completed, and people's personal plans are not always updated when people's needs change. We also found care workers have not received the required level of formal support and some care workers are not up to date with their training requirements. Not all staff felt included or consulted. We have highlighted this as an area for improvement. We would expect the issues to be addressed at the earliest opportunity.

The service operates a robust recruitment process. Overall, staff recruitment files contain the required information and checks, to ensure staff hold the necessary skills and are of good character. Care workers we spoke with understand their roles and responsibilities. Most care workers are registered with Social Care Wales, the workforce regulator. This is done to ensure they possess the relevant skills and qualifications needed for working in the care sector. Care workers we spoke with say they enjoy working at the service and provided complimentary feedback regarding the manager using words like, "the manager is lovely I can go to her with anything", "I feel valued", and "Everyone is lovely we all get along well".

Policies and procedures are in place, they are kept under review and updated when necessary. Care workers we spoke to said they are aware of the services policies and how to access them if they need to do so. Other written information we viewed included the statement of purpose and service user guide. Both these documents contain all the required information about the home and the support provided.

	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
21	Staff are not providing care and support in a way that promotes peoples safety and wellbeing.	Not 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

6	The provider is not compliant with Regulation 6. This is because arrangements for the oversight and governance of the service require improvement to ensure the best possible outcomes are achieved for individuals using the service and to meet the requirements of the Regulations.	New
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