



## Inspection Report on

**Picton Court**

**200 West Road  
Porthcawl  
CF36 3RT**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

## **Date Inspection Completed**

21/06/2023

**Welsh Government © Crown copyright 2023.**

*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](mailto:psi@nationalarchives.gsi.gov.uk) You must reproduce our material accurately and not use it in a misleading context.*

## About Picton Court

|  |   |
|--|---|
| Type of care provided                                      | Care Home Service<br>Adults With Nursing  |
| Registered Provider  | Hafod Housing Association Ltd   |
| Registered places  | 76  |
| Language of the service                                    | Both  |
| Previous Care Inspectorate Wales inspection                | 28.7.2022   |
| 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 receive a good service where their needs are provided for in a dignified and respectful way. Care staff and nurses are friendly and interact with people in a calm and unhurried way. Personal plans and risk assessments contain detailed and relevant information and are reviewed regularly. Personal plans reflect people well and give a good picture of the person and what matters to them. There is a programme of activities in the service which people enjoy. There are opportunities for people to take part in activities at home and in the community. Staff are available in sufficient numbers and mix of skills to adequately provide support to people. Staff are recruited safely and receive training to enhance their skills and knowledge, to support people appropriately. They are supported in their roles and receive the required level of formal support. There are suitable governance and quality assurance measures in place, helping the service run smoothly. The environment, it's facilities and equipment are well maintained. Standards of hygiene and cleanliness within the home are good.

## Well-being

People receive person centred care and support at Picton Court. Nurses and care workers are compassionate and respectful and enjoy working at the home. The service has systems to ensure care and support is of a good standard. People benefit from individualised and current personal plans. People can choose to be involved in a range of activities. They are also satisfied with the meals served at the home. There are measures in place to keep people safe and there is evidence care workers can meet people's physical and emotional needs.

People are supported to be as healthy as they can be. We saw evidence of timely referrals and liaison with external health professionals such as dieticians, GPs and community nurses. The information gathered and advice given from these professions is included in care files and implemented by nurses and care staff. Medication is stored safely and administered as prescribed. Medication practices are undertaken in line with the medication policy at the service.

There are systems which help to keep people safe. There is a safeguarding policy available and staff know the process for raising concerns. Detailed risk assessments provide information regarding people's vulnerabilities. Care staff receive relevant training in areas such as safeguarding and medication. Staff pre-recruitment checks are robust and regular supervision supports continued development. The service meets regulatory requirements about submitting notifications to Care Inspectorate Wales (CIW).

A clean comfortable environment helps support people's well-being. People are able to personalise their rooms to their preference which promotes a feeling of belonging. Communal areas are nicely decorated and furnished, providing a space where people can relax or participate in activities. There is specialist equipment available for people who need it and the home's maintenance team ensures the environment, its facilities and equipment are safe to use.

## Care and Support

People and their representatives are happy with the standard of care and support provided. We received complimentary feedback regarding nurses and care staff. One person told us, *"It's a wonderful home, wonderful staff"*. A relative of a person living at the home told us, *"It's excellent here"*. We witnessed warm and friendly interactions between care staff and individuals. The service provides good continuity of care, by its ability to retain staff. We saw care staff know the people they support well and are familiar with their needs and daily routines.

People benefit from a good standard of care and support. Pre-admission assessments ensure the service can meet people's needs prior to moving in. A person-centred approach to care planning ensures people are central to the care and support they receive. Personal plans are developed in conjunction with people or their representative. They highlight people's outcomes and provide care workers with clear instructions regarding care delivery. Robust risk assessments and management plans identify people's vulnerabilities and give care workers guidance on interventions that will keep people safe. Daily recordings are up-to-date and used to monitor people's overall health when necessary. A thorough handover takes place between shifts. There is a four weekly rolling menu in place, which encourages people to eat a varied and healthy diet. A visiting community nurse told us they have no concerns regarding the care provided at Picton Court.

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 trips on the minibus, one to one time and group activities. People told us they enjoy taking part in a variety of activities. A relative commented, *"There's more than enough going on"* and an individual said, *"I'm very happy with all the activities"*.

There are systems in place to protect people from harm or abuse. Risks to people's health and safety are identified in care plans and risk assessments and are regularly reviewed. There are detailed policies in place to guide staff in all areas, including safeguarding and whistleblowing. Staff are up to date with their safeguarding training. Incidents, accidents, and potential safeguarding concerns are audited and referred to the relevant external organisations. We saw that Deprivation of Liberty Safeguards (DoLS) are in place for people who do not have the capacity to make decisions about their accommodation, care, and support. A relative told us *"He's as safe as they can possibly make it"*.

## Environment

The environment is comfortable, clean, and decorated to a good standard. The home is set over two floors with lift access to the upper floor for people who have mobility problems. There are communal areas where people can interact with each other and take part in activities. We observed people in communal areas, they appeared comfortable and relaxed which suggests they are happy with the environment. There are sufficient toilet and bathroom facilities throughout the service and there is specialist equipment such as hoists available for those who need it. People's rooms are sufficient in size and are personalised with their belongings. There are domestic and laundry staff at the service daily to ensure good standards of hygiene and cleanliness are maintained.

A rolling programme of maintenance and checks ensures the environment, its facilities and equipment are safe to use. We saw up to date safety certification for utilities and fire safety features. All people living at the home have a personal emergency evacuation plan (PEEP) in place. This document provides care staff with practical information regarding the best ways of supporting people to evacuate the building in the event of an emergency. Monthly health and safety audits are completed so that any potential hazards can be identified and reported for repair or replacement.

## Leadership and Management

There are quality assurance processes in place to promote ongoing development and improvement of the home. The RI and manager have a good relationship, and both have good oversight of the day-to-day events that occur in the home. The RI complete their required quarterly monitoring visits, and biannual quality of care reports, identifying what is working well in the home and what actions are required to improve the things that are not working as well.

Policies and procedures underpin safe practice. We viewed several policies and procedures including Admissions, Safeguarding, Medication and Whistleblowing. We found the policies are detailed and contain current statutory and best practice guidance. Policies and procedures are kept under review and updated when necessary. Other written information we viewed included the statement of purpose which accurately describe the service.

Care staff enjoy working at the service and feel supported in their roles. Records relating to supervision show staff are receiving the required levels of formal support. This helps aid their professional development and gives them the opportunity to discuss things like workload or concerns they may have. Care staff we spoke to confirm the management team are always accessible and provide a good level of support. Nurses and care workers told us *“The manager is lovely”, “It’s a nice place to work”* and *“I enjoy coming to work”*.

The services human resources (HR) department confirm the staff recruitment process meets all regulatory requirement. New care staff receive an induction in line with Social Care Wales’s requirements. Staff receive training relevant to their roles, including safeguarding. Staff say they feel valued, supported and that teamwork at the home is good. They also told us that they can talk to management, who are all approachable. Nurse pins are all valid which evidences their suitability for practice, verified on the Nursing and Midwifery Councils website. Care workers are registered with Social Care Wales and all staff have a valid disclosure and barring service check (DBS).

### 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      |
| 15  | Personal Plans need to be updated to accurately reflect people's care and support needs and mitigate risk  | Achieved |
| 58  | The provider is not complaint with regulation 58(3) this is because care workers and nurses administer PRN medication to some people using the service but do not always record the reason for or outcome. | Achieved |



### **Was this report helpful?**

We want to hear your views and experiences of reading our inspection reports. This will help us understand whether our reports provide clear and valuable information to you.

To share your views on our reports please visit the following link to complete a short survey:

- [Inspection report survey](#)

If you wish to provide general feedback about a service, please visit our [Feedback surveys page](#).

**Date Published** 31/07/2023