



Inspection Report on

Park House Court Nursing Home

**Park House Court Nursing Home
Narberth Road
Tenby
SA70 8TJ**

Date Inspection Completed

17/01/2023

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About Park House Court Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Park House Court LTD
Registered places	97
Language of the service	English
Previous Care Inspectorate Wales inspection	11.8.2022
Does this service provide the Welsh Language active offer?	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

Within the main building of Park House Court, support is provided for people with residential care needs and for people who live with dementia or cognitive impairments. The newer, detached building provides nursing care as well as an opportunity for periods of assessment or enablement.

People are supported by a core team of care staff that respect and know them well. Recruitment has taken place since the last inspection. Improvements have been seen with person-centred care. This is reflected in the care practice, documentation and provision of social activities. People and their representatives are now involved in their review of personal plans. Care documentation is accurate and up to date.

On the whole people are supported to be as independent as possible. Improvements have been made to the environment since the last inspection as part of the ongoing maintenance programme. Staff practice has improved around infection control and health and safety. The Responsible Individual (RI) has increased their oversight in the home and supervision of the management of the service.

Provision of training for staff and their attendance has improved. Required training and some specialist training has now been completed by most staff. A monitoring tool (matrix) is used to ensure this is sustained.

Well-being

People are supported to do what is important to them such as taking part in activities, going out in the grounds for a walk or being taken for a drive. Family members told us they could visit at times to suit them and their relative. Visits from people's pets is supported and we saw photos of how much people enjoyed this activity.

Staff including housekeepers, maintenance, kitchen and care staff were heard speaking with people with respect and genuine interest and care. Meaningful interactions were seen with improvements in person centred care. People's individual circumstances are considered and choice is provided around daily routine, preferred language and meals.

People have a voice and are supported by their representatives to get involved or contribute to their reviews of their personal plans. We saw one person had completed their own 'About Me' form, summarising their social history and recreation interests.

People get the right care and support, and referrals are made to specialist professionals as required. One relative told us "*They are very good – if X needs a doctor they ring and tell me*".

Staff use personal protective equipment (PPE) as required. They continue to wear face masks as per the home's COVID risk assessment. Staff are up to date with infection prevention control training and safeguarding training.

People are supported to be as independent as possible with ongoing training for the staff around person centred care and dementia care. Where people have reduced decision-making capacity, they are supported by the provider with procedures and protocols in place, to ensure their best interest is maintained.

Care and Support

Person centred care is provided with people's individuality being respected and promoted. Staff told us "*Our strengths are we know people well*". People are supported with personal care at a time that is suitable for them. Position changes and individualised pressure relief care is recorded and provided in line with people's personal plans. One member of staff told us "*We really put ourselves in their shoes, treat people as we would treat our own*".

Care documentation reflects what is important to people and their social, work and recreation history is included within personal plans. Activity provision is focused with individual, small group activities and larger entertainment sessions. We saw musical

quizzes, baking, a musical entertainer visiting the home for the afternoon and people spending time in the grounds of the home and having meaningful interactions with staff. Feedback around activities was positive: *"X is always smiling, engaged and happy, X loves the music"*; *"Staffing is better and when it is we have time for activities"* and *"We are properly moving forward now with activities"*.

Improvements have been made to the personal plan reviewing process ensuring that, where appropriate, family members are contacted at least quarterly to invite or involve them with reviews of people's personal plans. Care documentation is accurate and up to date informing how people's outcomes can be met. Family members told us they are kept up to date regarding what is happening with their relative. Feedback includes *"We have had a meeting and had another since and asked but we declined"* and *"We are kept up to date, all the time and staff are very accessible. We have a phone call or text. The communication is good"* and *"They always keep us in touch – always communicative"*.

Relatives we spoke to were positive about the care and support provided to their family members. We were told *"Outstanding care"* and *"Everything is good and I am happy with the standard of care"*.

Environment

Park House Court Nursing Home has different areas within the home to suit individual needs as assessed.

One area of the home, Bunny's, is suitable for people living with dementia or a cognitive impairment. Improvements have been seen with the décor in this area making it more conducive for people. The manager told us they had sought advice regarding decor and in addition to the main lounge being redecorated the corridors and bedroom doors had been repainted. Improvements had been made to the sensory quiet room that is used by people living in the home and visiting the home. There are plans to re-lay the main lounge floor with a view to minimising impact on people living in the home.

There are communal spaces throughout the whole home which enable people to choose where they spend their time. People can freely and safely access outdoor areas, including a secure garden for people living with dementia.

Floor sensor mats and mattresses are stored appropriately considering infection prevention control practice. Audits of the environment including portable appliance testing were seen and are completed regularly. When walking round the home we saw people's bedroom doors were not propped open and fire doors are in use as required.

Park House Court is homely and welcoming with a good standard of cleanliness. Family members told us *"It is homely here and always friendly"*.

Overall, since the last inspection, improvements have been seen within the environment of Park House Court Nursing Home.

Leadership and Management

Staff are adequately supported and trained to provide support to people as detailed in the provider's Statement of Purpose. Since the last inspection more than 97 staff have received individual supervision and the majority had received annual appraisals within the current 12-month period. More than 90% of staff have completed required training with most staff completing specialist training such as dementia care and person-centred care. A blend of online and face to face training is provided. When inspecting the home, we saw practical manual handling sessions being held. Feedback from staff was positive around the provision of training.

Staff rotas reflect staffing levels as stipulated in the service's Statement of Purpose and the identified level of need at the time. Staff have time to spend with people and support with activities. Care is provided in a more timely, person centred way.

On the whole staff told us things are much improved. Whilst recruitment is still ongoing and this includes for housekeeping and other areas of the home, we observed staffing levels to be much improved. Park House Court does have a core team of staff. One family member told us *"Staff are lovely – some staff are here from when X came here more than 8 years ago"*. Feedback from staff includes: *"We have more staff now"*, *"Staffing levels are much better and things are much improved"* and *"We work together and staffing is not quite right but we are getting there"*.

Improvements have been seen to the reporting of events as required to Care Inspectorate Wales (CIW). Since the last inspection, notifications have been submitted as required in a timely way.

The priority action notices identified at the last inspection have now been met and compliance agreed. The RI has improved oversight with an increased presence around the home. Oversight of the audits and matrixes in place is evident. The manager and deputy manager have received individual supervision. Overall improvements have been seen with the RI supervising the management of 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
21	Person centred care is not consistently provided and activity provision is not consistent for all within the home. Care documentation is not always accurate; up to date or completed with a person centred focus.	Achieved
34	Staffing levels are not consistently adequate to meet personal outcomes for people. All staff are not adequately trained to provide the identified care needs of people.	Achieved
36	The provider is not ensuring staff complete required core training. Specialist training is not available for staff to complete and individual quarterly supervision is not available to staff.	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
16	The provider is not giving people and their representatives (where appropriate for the person) the opportunity to attend quarterly reviews of their personal plans.	Achieved
43	Improvements are required with aspects of health and safety within the environment; including cross infection practice and ensuring the environment is conducive for people who are living with dementia or a cognitive impairment.	Achieved
66	The provider does not adequately supervise the management of the service.	Achieved
60	The provider has not notified Care Inspectorate Wales (CIW) as required.	Achieved
84	The provider has not notified Care Inspectorate Wales (CIW) as required of absence of the manager and arrangements in place to cover the manager.	Achieved

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