



# Inspection Report on

**Parklands**

**Newport City Council  
Parklands  
Blackett Avenue  
Newport  
NP20 6NH**

**Date Inspection Completed**

02/02/2024

**Welsh Government © Crown copyright 2024.**

*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 Parklands

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Newport City Council Adults and Children's Services
Registered places	26
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">22 August 2019</a>
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 are very satisfied with the service and are very complimentary about all the staff. The service mostly provides short-term residential intermediate care for people who can benefit from a period of re-enablement, for example following time spent in hospital. Discussions with people who use the service, their relatives, and our observations during the inspection show the service provider runs the service in a way which enables it to achieve its aims. These are to enable people to return home whenever possible by working with them to regain confidence in their ability to manage daily living skills and/or access long services they may need. People have up-to-date personal plans in place that reflect them well, clearly outline what they want to achieve whilst in the service and give clear instructions to care workers on how best to support them.

The service is well laid out with a range of comfortable internal spaces and an outdoor garden area for people to choose where to spend their time. There are robust maintenance procedures in place and the provider is very proactive in ensuring the environment continues to meet the needs of people.

The service is well managed and overseen. Care staff are safely recruited, well trained, and supported. Communication and record keeping is good, evidencing the support delivered. There are very good processes in place to monitor the quality and effectiveness of the service. Policies and procedures ensure care staff have access to important information. The responsible individual (RI) visits the service and conducts their role as required providing support to the team and completing the necessary reports.

## Well-being

People receive a service which is agreed with them and tailored to meet their needs and wishes. People spoke to us about the events which led to them needing the services provided at the home. These included falls, hospital stays and being unable to return home straight away. They all told us they are very satisfied with the service, and they praised care workers and managers. One person told us the service is far above the expectations they had before their admission. Another person told us "*The team is fantastic, management down to carers, could not have a better experience and excellent rehabilitation.*" One person told they sometimes go out to a place they like visiting and they appreciate the meals provided in the home. The RI seeks feedback from people when they visit. The service provider gives each person '*a service guidance*' which outlines the support they can expect. It also gives them the contact details of people and agencies they can contact if they have any concerns. Staff promote the Welsh culture in the service. They arrange activities to celebrate important Welsh dates and events.

People are supported to be as healthy as possible. The services provided in the home ensure people remain as healthy as possible and they regain skills they may have lost due to an accident or ill health. Care staff support people with medication and personal care when required. Nutritious meals and snacks are served throughout the day. The range of activities and positive relationships with other people who use the service, with care staff and with visitors help to support people's emotional well-being. People also access services from external professionals and the provider ensures any issues around people's health are addressed quickly. District nurses, occupational therapist, physiotherapists, GP, and social workers routinely visit people. Regular discussions take place with people and the healthcare professionals involved in their care.

People are protected from harm and neglect. Care staff complete safeguarding training and there are policies in place to support this knowledge. People's care documentation contains assessments and guidance which details what is needed to minimise risks. The systems in place to keep people safe in the service include signing in/out procedures for visitors, robust infection control procedures, portable personal call and fall sensors, and sufficiency of care staff on duty. The home provides people with suitable accommodation which reflects individuals' needs and there are good standards of hygiene.

## Care and Support

People receive the support they require when they need it and they value the relationships they have with staff and with other people in the home. Throughout our inspection visit, we saw care workers are attentive and provide care and support to people as detailed in their personal plans. At lunchtime and in the afternoon, we observed warm interactions and naturally occurring discussions between staff and people who use the service. We also noted people who use the service having conversations amongst themselves. One person told us they made a friend in the home. Another person spoke to us about meal times, they described the food as very good, told us a range of desserts is always available and that it feels like going to a restaurant. A relative told us *“Staff can’t do enough, we can ask for anything, they are wonderful, everybody top down, kitchen staff are lovely they put on a lot.”* Another relative said *“Excellent rehabilitation”* and told us *“In six weeks they have managed to reduce x’s risk of falls and have been successful.”* They attributed this to a good support structure and a very well-run organisation.

There is good documentation in place for each person. People are referred to the service by external health care professionals for example physiotherapists, social workers or hospital staff. Managers consider each referral. If the service can meet the person’s needs and there is a vacancy, they will complete a pre-admission assessment to establish further what the person needs and wants. With the person, they then complete a booklet called *‘What matters to me’*. It includes information about their life history, what is important to them, their daily routines and the outcomes they want to achieve. There are detailed plans in place for all the areas in which people need care and support. They consist of a summary of their needs, the person’s goals and clear instructions for staff on how to support the person so that they can achieve their goals.

Staff record the care and support delivered to each person. These daily records and people’s plans are reviewed regularly: weekly when people have been admitted for a period of assessment and re-enablement, monthly when they reside in the home for a longer period. Managers complete these reviews in collaboration with people and all the external professionals who are involved in their care. They consider the progress people have made and whether any additional support is needed.

Care staff keep people safe by following clear policies and procedures and taking timely action when needed. When there are risks, these are comprehensively assessed by staff in collaboration with a range of external professionals. Very good measures are put in place to minimise risks. There are systems in place to ensure medication is stored and administered safely. The manager explained they are in the process of introducing individual storage cabinets so that people, who can and want to, can safely begin regaining control over their medication.

## Environment

People live in an environment that meets their needs and promotes their well-being. The layout of the home, together with the provision of aids and adaptations helps to promote people's independence. The accommodation includes communal areas including three lounges, a dining room and an accessible outdoor area. In addition to the main kitchen, there is a kitchen where people can regain skills by making themselves drinks and snacks. Outside, people have access to a greenhouse and a potting shed. When people spend longer periods of time in the home, we noted their bedrooms are personalised and reflect their own needs and interests. One person spoke to us about the garden, the greenhouse and the gardening activities they did last year. Another person spoke to us about the kitchen they can use. During our visit, we observed people choose where to spend time. We saw evidence of regular investment in the environment and noted the RI considers the environment and maintenance work required when they visit.

There are systems in place to identify and deal with risks to people's health and safety. Maintenance staff based in the home carry out regular health and safety checks. An external company contracted by the service provider conducts specialist checks and work. The RI reviews the checks which have been conducted on a quarterly basis. The home has a food hygiene rating of five which means that food hygiene standards are very good.

Infection control arrangements are in place. We observed staff using appropriate personal protective equipment (PPE) during our inspection visit. This equipment and hand sanitiser are available throughout the home. The standards of cleanliness in the home are excellent. One person told us "*The degree of cleanliness is really very good.*" The provider has an infection prevention and control policy in place and staff carry out associated training.

## Leadership and Management

The service provider has a robust management structure and established systems in place to support the smooth operation of the service. The RI oversees the service provided at the home. They monitor progress and development and provide support to managers. Two managers and three assistant managers oversee the day-to-day operations of the service. There is a duty officer on shift every day from 6:45 am until 22:15 pm. Managers all play a part in checking the quality of care delivered. We saw they complete a monthly review which goes to the RI. The RI carries out quarterly visits, seeks feedback from people who use the service, relatives, and staff and reviews all audits. Their findings are documented along with reviews of previous agreed actions and newly identified actions for improvements are listed. Six-monthly comprehensive quality of care reviews take place, and a report is produced. The reports we reviewed show both '*What has gone well*' and '*Areas for improvements and actions.*' The service provider gives people a '*service guidance*' which explains how the service is organised, what they can expect and gives them contact details of people and agencies they may need.

There are good arrangements in place to recruit, train and support staff. We examined recruitment records; these show the service provider carries out the necessary checks before a person can start working at the home. Supervision and training records evidence very good processes are in place for supporting and developing staff. Feedback from staff is positive. One member of staff told us they work well as a team. One said there is a "*Brilliant team I can rely on. I also rely on management if stuck.*" Another person said, "*Management are brilliant, and staff have good relationships with each other.*" We noted all staff are registered with Social Care Wales (SCW) and hold a health and social care qualification. Newly recruited staff are supported to complete the relevant training necessary to register with SCW and to achieve a recognised qualification if they have not already got one.

There is good oversight of financial arrangements and investment in the service. There is evidence of continuous investment by the provider to maintain the service effectively. This includes investment to maintain and improve the environment, and good staffing levels which are appropriate to give people the support they need and want.

### 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
-----	--	-----

### **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** 06/03/2024

### 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
-----	--	-----

### **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** 06/03/2024