



Inspection Report on

Lewis Martin Court

**Unit 3 Lewis Martin Court
Clos Parc Morgannwg
Cardiff
CF11 8AW**

Date Inspection Completed

16/11/2023

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About Lewis Martin Court

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Salutem LD BidCo IV Limited
Registered places	17
Language of the service	English
Previous Care Inspectorate Wales inspection	4 th July 2022
Does this service promote Welsh language and culture?	This service is a service that is working towards providing an 'Active Offer' of the Welsh language.

Summary

Lewis Martin Courts is a nursing home for young adults with learning disabilities and complex physical health needs. The environment of the home helps people to achieve as much independence as possible. The home consists of self-contained bungalows, a one level courtyard, a summer house, and an accessible vehicle to support people to access the community.

People are encouraged to make daily choices and do things that are important to them. People live meaningful lives; they receive individually tailored care and support and are actively engaged in their local community. There is a consistent team of care staff available to enable people to be supported by familiar people. The enthusiastic and dedicated care staff and management team want to make a positive difference to people's lives. People receive a service where care staff are safely vetted, trained, and well supported in their roles. One relative told us, "*It's an absolutely fantastic place*".

The social model of disability and person-centred care is at the heart of service delivery. There is an effective management team in place who are committed and motivated to ensure service delivery is achieved in collaboration with people who use the service. The manager has strong knowledge and visible leadership. Governance and oversight at the service is effective and will be strengthened for nursing staff once a clinical lead deputy manager is in place.

Well-being

People are happy living in Lewis Martin Courts and spend their time engaged in activities that are meaningful to them. People contribute to and enjoy, safe and healthy relationships. Care staff support people with keeping in regular contact with family and friends. Interactions between care staff and people are warm, friendly, and familiar. People using the service have good relationships with a consistent team of care staff who genuinely care for and want the best for them. We saw many people being supported to go out into the community to go shopping or have haircuts ready for their Christmas Ball. We saw people beautifully presented in clothes in line with their favourite colours. One relative told us, *“There is no other place like this in the area where they can have the care they need, but also they can live an independent life as a young adult”*. One staff member told us *“People have a good life here; we can take them out wherever they want to go”*.

The knowledge care workers have of the people they support is insightful and helps enhance their well-being. They have a strengths-based approach to their work; good knowledge of the complex needs of the people they support and are therefore able to notice any changes quickly and respond promptly. Care staff are motivated to do their best for people, with one saying, *“I feel really supported and able to provide person centred care”*.

People remain as healthy as they can be due to timely referrals to healthcare professionals and effective administration of medication. Healthy and nutritious meals meet people’s dietary needs. People have a good balance of doing things they enjoy and receiving the right clinical intervention to keep them healthy. Nurses and care staff are aware of their responsibilities and are trained to support individuals with complex health needs. Care documentation within the service is informative, effective, and up to date.

Well-being is enhanced by the environment. The service is in a secluded area and within walking distance to local amenities with good transport links. The property is all accessible on one floor and is well maintained and clean. People’s bedrooms are highly personalised, they capture the character and personality of people, and the communal areas are homely, modern, and spacious.

There are measures in place to keep people safe. People feel safe and happy at the home and feedback is positive. Incidents and accidents are logged, and appropriate actions taken by the service. Care staff are recruited in line with regulations and are subject to pre-employment checks to ensure their suitability for the role. Recruitment is robust, and regular supervision supports continued development.

Care and Support

People's views and aspirations, their goals and their personal preferences are prioritised and placed at the heart of care documentation written about them. This ensures people's choice, independence, and well-being is promoted. Care documentation such as people's personal plans and assessments are consistently detailed and clear to follow. We found examples where care staff had gone above and beyond to ensure people received a tailored service which significantly enhanced their life. The service provider sets very high standards of care and is consistently looking at innovative ways to further enhance the service. The manager spoke with pride about the progress made by many people. A relative told us, *"They are phenomenal, they really care about the people living there."*

People's physical health needs are effectively met. An experienced team of care workers and nurses deliver care and support. Care staff, nursing staff and management are knowledgeable about the people they support. People are supported to attend routine and specialist appointments and there are nurses on site to support people with their health needs and complex medication requirements. Some people have specialist moving and handling equipment and care workers are trained to ensure people's moving and handling needs are safely met.

People receive appropriate, kind, and caring support from enthusiastic care staff. We saw people being treated with warmth and familiarity. Overall, we observed positive interactions between care staff and people living at the service. People are encouraged and supported to spend their time engaged in meaningful activities appropriate to their age, maintain important personal relationships, and to do things that are important to them. People are supported by a consistent team of familiar care staff. There are good staffing levels in place to meet the care and support needs of people living at the service.

There are systems in place for the management of medication. Medication is stored securely and can only be accessed by authorised care and nursing staff. Records show staff administer medication in line with the prescriber's directions which are not always free from gaps or errors, which the provider needs to address. The home has an up-to-date medication policy in place. Medication audits and oversight systems need to be revised to ensure actions and lessons learnt from errors are implemented at earlier opportunities.

Environment

People live in an environment which supports them to achieve their personal outcomes. Accommodation is on one level, making it easier for people to mobilise throughout.

People are supported to personalise their home environment as much as possible. Bedrooms are personalised in people's chosen colours, with photographs and soft furnishings. We saw many bedrooms that were beautifully presented and had real character to them, demonstrating care and attention had been given to people's personal space to ensure they are reflective of the person, their personality and likes and dislikes.

People with the support of care staff take pride in their environment. The home exterior has a clear courtyard and summer house. The home interior is clean, homely, and spacious with areas for people to relax. Care workers are responsible for keeping the service clean and this is done to a high standard. Communal areas are comfortable. In each bungalow there is a quiet living room for relaxation and an open plan kitchen and dining room which are used as the sociable areas for people to spend time with others. The kitchen and dining rooms are well maintained, with new well-equipped fitted units. Each bedroom has an ensuite and communal bathrooms are easily accessible and in good order. Overall, the home interior and exterior are well maintained, but some hallways have damaged areas on the walls and are looking tired and require further repair.

We saw evidence of good maintenance, checks and servicing in place to ensure the home, its facilities, and equipment are safe. We saw appropriate checks and safety certification in place for utilities, equipment, and fire safety features. Each individual living at the service has a detailed and easily accessible personal emergency evacuation plan (PEEP) in place. This document ensures care staff understand the level of support people require in the event of an emergency. There is an office space for support staff. Records are stored securely within the separate office rooms, only accessible by relevant personnel.

Leadership and Management

The provider has very good oversight of the service. The manager is sufficiently skilled and has set out, and embedded, the values of the service which focus on person-centred care underpinned by the social model of disability. The social model of disability focuses on the equality, ability, and strengths of person, with a viewpoint that society places limits on a person, not their disability. The service has a very strong vision and ethos which is driven by the management team. The committed, compassionate, and valued care manager is visible and actively involved in the service delivery. We saw a relationship of trust and care between the manager and people using the service.

People are supported by a dedicated nursing and care team who are recruited safely and trained to undertake their roles. Most nurses feel they need access to a clinical lead. There is a vacant position for a clinical lead at the home which the provider is fully addressing. In the interim the provider utilises support from the clinical lead within the organisation to provide the support and guidance nursing staff require. One person living at the service is working with the provider to deliver training to staff which is extremely valuable. This is an example of excellence, where the provider is placing people and their experiences at the heart of staff development and service delivery. The quality of training and team development in other areas, however, needs to be strengthened to improve staff culture, conduct and morale. Most care staff feel happy in their role supporting people but would like to develop their professional working relationships and team unity amongst staff.

People are safe and protected from harm, neglect, and abuse and are supported by a management team that listens and acts quickly for people. People using the service told us they feel listened too. Care staff are confident their managers would take the necessary actions to make sure people are safeguarded, with one care worker saying, *"We are encouraged to report any concerns we have for the residents here and I believe they would resolve issues quickly"*. A relative told us, *"They are really quick to resolve issues, I raised a concern once and it was sorted very quickly"* adding how reassured they are to know an individual is safe and well cared for. Care staff know their responsibilities in relation to safeguarding and have received safeguarding training to identify signs of abuse. Most people using the service told us care staff are kind and treat them well.

People can be assured there are robust quality assurance checks at the service. People benefit from a service which has an ongoing commitment to reflection and improvement. The RI regularly visits the service and reviews the performance of the service to ensure the quality of the service is sustained and embedded. The manager is empowered to make decisions and receives regular support from higher management.

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

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
16	Formal personal plan reviews are not being conducted with the person or their representative, though there are regular reviews of care plans when changes occur.	Achieved

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