Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Marine Court Psychiatric Unit Limited

4 Marine Road, Colwyn Bay, LL29 8PH

01492534528

The inspection visits for this service took place between 15/05/2026 and 04/06/2026

Service Information:

Operated by:	MARINE COURT PSYCHIATRIC UNIT LIMITED
Care Type:	Care Home Service Adults With Nursing
Provision for:	Care home for adults - with nursing, Care home for adults - with personal care, Provision for learning disability, Provision for mental health
Registered places:	23
Main language(s):	English
Promotion of Welsh language and culture:	The provider is not promoting the Welsh language and culture needs of people, and this requires improvement.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Good
Leadership & Management	Good

Summary:

Marine Court Psychiatric Unit provides support for people with functional mental health needs and can support up to 23 people at one time. It is in Colwyn Bay and located within walking distance to local amenities and local transport links. Having recently come under new ownership, we have found significant improvements across all inspection themes.

Well-being is good because people are involved in decisions affecting their daily lives and the service promotes their well-being. Care and support is good because people are supported by a dedicated team of staff, who know people well and ensure their needs are met. Whilst still requiring work, the environment is good as we saw clear improvements and prioritisation and plans in place for the environment to reach the required standard. Leadership and management is good as quality assurance records and staff feedback demonstrated a service that is developing a positive culture, with systems in place to support improvement and achieve good outcomes for people.

Findings:

Well-being — Good

People are supported to have choice and control over their daily lives and to take part in activities that are important to them. Feedback from people living at the service is positive. One person told us, *"I like the staff, other residents, the food."* Another said, *"Ever since the new owners have arrived, the mood has lifted a million percent. Everyone is so happy – we are cared for in a very good way."* People are consulted about their care and are given opportunities to decide how involved they wish to be in developing and reviewing their personal plans. Throughout the inspection, we observed staff and managers treating people with dignity and respect while promoting independence. Records demonstrate people are encouraged to pursue their interests and participate in a wide range of activities, including local walks, bowling trips, community groups, charity work, and visits to places such as Chester Christmas Market, Llangollen Aqueduct and local events.

People are supported to maintain and improve their physical, mental and emotional well-being. Nursing staff are on site to provide ongoing support and ensure health needs are met. Records show that changes in people's health are recognised and acted upon promptly, with concerns escalated appropriately. The service promotes positive risk-taking where suitable, supported by detailed risk assessments, regular reviews and effective communication with healthcare professionals. People told us they had experienced improvements in their well-being and quality of life, and we observed positive relationships between staff and people living at the service.

The service supports people to maintain relationships with those who are important to them and to remain active within their communities. Evidence showed staff work hard to facilitate family contact, including supporting visits to relatives and welcoming family members into the home. People are informed about their rights and how to raise concerns through regular resident meetings. Independence is actively encouraged, including support with financial matters where Court of Protection arrangements are in place.

People benefit from living in an environment where their views are now listened to and acted upon. Residents are regularly consulted about ongoing improvements to the home, and their preferences are taken into account when changes are planned. Where environmental work may cause anxiety, a gradual and individualised approach is adopted. One person said, *"We're going to have a choice of how things look - I've had my new window"* and *"They inform us of what is due to happen and check in with us."* Improvements to internet and Wi-Fi access have also been made at the service.

Care & Support — Good

People receive care and support that is planned around their individual needs and reviewed regularly. Personal plans are co-produced with people where they consent and are reviewed every three months. Records showed plans reflect people's wishes, aspirations, areas of risk and specialist needs. Personal plans include information about people's history, care and support needs and preferences and outcomes they want to achieve. We found plans gave staff clear guidance on how to support people and reflected their current health needs. Communication needs are also considered as part of care planning.

People benefit from consistent care and support from staff who understand their needs. Continuity of care is promoted through stable staffing levels and a management structure where staff are clear about their roles and responsibilities. Daily handovers take place and provide incoming staff with a reflection of the previous shift, helping them understand any issues requiring attention. Records demonstrate positive working relationships with other professionals involved in people's lives. We saw evidence staff escalate concerns to relevant professionals when people's needs change. Daily notes completed by staff provide an overview of each shift, while clinical and nursing records give more detailed information about people's presentation and health needs. This supports the ongoing monitoring of people's care and well-being.

People are supported to stay safe and have their rights promoted. Safeguarding policies are in place and staff understand their responsibilities. People are offered advocacy support when required. The service has also introduced resident questionnaires to provide additional opportunities for people to raise concerns. At the time of inspection, no one living at the service was subject to a Deprivation of Liberty Safeguards (DoLS) authorisation; however, the service demonstrated awareness of its responsibilities in relation to DoLS. Risk assessments are clear, up to date and aligned with people's assessed needs. They provide staff with clear guidance and demonstrate a proportionate approach to risk management.

People receive support with their medicines and health care needs in a structured and organised way. We found medicines are administered as prescribed and records were completed accurately. Regular medication audits and reviews take place to monitor safe practice. Medication sections within personal plans clearly record relevant information. We also found infection prevention and control arrangements are maintained during ongoing environmental works, with increased cleaning introduced.

Environment — Good

People live in an environment that promotes their privacy, independence and dignity. We found the provider had made considerable progress with a programme of environmental improvements and refurbishment works since last inspection. The service is working to make communal and private areas welcoming, safe and accessible, with works prioritised according to urgency, level of risk and impact on people. The quality of completed work so far is of a high standard. Environmental changes are intended to improve people's experience of living at the service and support their dignity going forward. A number of formal project progress reports demonstrate ongoing oversight by the provider and manager of both completed works and areas still requiring improvement. Inspection evidence showed the provider has a clear focus on driving environmental improvements and monitoring progress.

People and staff are beginning to experience the positive impact of the ongoing improvements to the environment. One staff member said, *"Now that renovations have started and we are starting to see good progress we feel that we are starting to gain Marine Court back to its prime."* Another described the refurbishment programme as *"having a very positive impact"* and noted that *"significant improvements and investment are being made throughout the home."* Although further work is needed to fully address all premises issues, we found much improved oversight, good progress against planned works and a reduced impact on people living at the service. The priority action notice in place in relation to the premises will therefore be removed. However, outcomes for people still require improvement because works are still needed to ensure the premises meets the expected standards and we expect the provider to continue to make improvements.

People benefit from an environment where health and safety arrangements are monitored and reviewed effectively. Appropriate health and safety checks are completed regularly, and facilities and equipment are serviced as required. Since the last inspection, the service has introduced thorough monthly health and safety audits which identify risks, record corrective actions and provide clear escalation routes to the provider where required. Audit records showed issues identified, actions taken, responsible persons and completion dates, supporting accountability and oversight of environmental issues. The audits are based on the needs and risks of people living at the service and are supported by daily, weekly and monthly checks. We found good oversight of health and safety arrangements across the service. Risk assessments are in place for when environmental works take place. The provider now has measures in place to ensure risks to people's health and safety are proactively identified and reduced as far as reasonably practicable. The priority action notice in relation to health and safety has therefore been removed.

Leadership & Management — Good

The service benefits from strengthened leadership and governance arrangements that support both the delivery of care and continued service improvement. We saw evidence of regular and constructive engagement between the manager, responsible individual (RI) and directors. Meeting records demonstrate effective oversight of key areas including environmental improvements, maintenance, staffing, compliance, payroll and equipment. Directors described a planned programme of refurbishment, with work prioritised according to risk and urgency. Initial improvements focused on addressing roof, guttering and damp issues before progressing to wider environmental and cosmetic enhancements.

The provider has established systems to monitor the quality, safety and effectiveness of the service. The RI completes quarterly adequacy of resources reports, providing structured reviews of staffing, finances, the environment, equipment, governance arrangements and clinical support. These reports identify risks, record mitigation measures and evaluate the impact on people living at the service. RI visits review people's experiences, staffing levels, supervision, training, recruitment, retention, care records, risk assessments, medicines management and environmental safety. Reports highlighted both positive practice and areas requiring further development. We found evidence of a proactive approach to quality assurance through RI visits, audits and a comprehensive quality of care review. This review draws on multiple sources, including resident and staff surveys, RI reports and documentation audits, and identifies clear actions for ongoing improvement across all service areas. As a result of the progress made, the priority action notices relating to the supervision of management of the service and requirements in relation to the provision of care have been removed.

People are supported by a staff team that increasingly benefits from guidance, training and supervision. Training compliance has improved since the previous inspection, and the manager demonstrates a stronger oversight of learning and development needs. Staff have prioritised completion of mandatory and essential training, while future training requirements are actively monitored. Records confirmed all staff had received supervision since last inspection, with arrangements in place for supervision to take place every three months going forward. Staff described a positive culture of learning and teamwork.

There is evidence of a more positive culture throughout the service in general. Staff consistently reported feeling supported by the manager and provider and spoke positively about teamwork, relationships with residents and management support. One staff member told us, *"It feels like there is something amazing happening here now,"* while another said, *"We now feel supported and can*

see future possible opportunities." Staff described a *"good team spirit"* and an approachable and supportive management team, reflecting growing confidence in the direction of the service.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
People's dignity, comfort, safety and well-being is at risk if they are living in an environment that is not suitably maintained.	15/05/26

CIW has not issued any Priority action notices following this inspection.

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