



Arolygiaeth Gofal
Cymru
Care Inspectorate
Wales

Inspection Report

Spring Meadows (Care) Ltd



Manorleigh Spring Meadows Care Ltd, 66-68, Cecil Street, Swansea, SA5
8QH



01792466728



www.manorleigh.co.uk

Date(s) of inspection visit(s):

02/06/2025

Service Information:

Operated by:	SPRING MEADOWS (CARE) LTD
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Provision for learning disability
Registered places:	8
Main language(s):	English
Promotion of Welsh language and culture:	The service provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:



Well-being

Good



Care & Support

Good



Environment

Good



Leadership & Management

Good

Summary:

The service is registered to provide care and accommodation for up to eight individuals over 50 years of age with a learning disability. The service is set in a residential area and people can access their community with support as required.

Overall leadership and management is rated as good. Staff told us the Responsible Individual (RI) and manager are accessible and approachable. We saw the dedication and commitment of the manager to the team and people living at the home. We did note, however, staffing levels have not been consistent and this has been identified as an area to improve. The staff work hard to provide person centred care and support and overall, this theme and the well-being theme are rated as good. Improvements have been seen to the environment since the last inspection which also had a good rating. The RI, manager and their team strive to maintain a good quality of life for the people living at the home.

Findings:



Well-being

Good

People live healthily and safely with control over their lives. People's views are listened to and respected. They contribute to their personal outcome reviews and quarterly house meetings. Where people have limited ability to make decisions they are supported with independent representatives. Items such as menus and holiday plans are discussed at house meetings. People also decide how to decorate their own bedrooms and communal areas. A discussion around respecting people's privacy was also seen in the residents meeting minutes. The notice board in the home shows outcome achievement cards and the 'Person We Support' awards for outcomes achieved. We heard people talking about achieving their outcomes and being motivated by the awards. The manager told us '*Everyone gets a prize....*'. Staffing levels have been lower than required for a period of time; however the team have covered where they can and worked hard to minimise the impact on people's outcomes. Recruitment of new staff now means the correct staffing levels are in place and this identified area for improvement will be reviewed at the next inspection.

People are supported to cultivate safe and healthy relationships. Care workers and the manager know people well and care very much for the people they support. One person told us "*Yes I like living here*". People are supported to access their community with attendance at local clubs and events. One person told us how they sourced another craft group and showed us craft items they enjoyed making. One professional told us "*A good rapport seen between people living and working at the home.*"

People live in accommodation that supports their well-being outcomes. Since the last inspection a vegetable garden has been planted considering people's outcomes and wishes. A person living at the home has taken responsibility for it and has a real sense of purpose because of this. Other people are excited about the vegetables being grown and it was a topic of conversation. We saw people easily accessing the garden. A corner of the garden is used to dedicate time to people's memory and people can lay flowers or gifts there when they wish to remember someone. Overall, the layout and areas within the home are suited for people's preferences and to support them to be as independent as possible.



People receive good care and support to achieve their personal outcomes. Personal plans reflect people's identified goals. The personal care aspect particularly showed people's outcomes, wishes and aspirations very well. We discussed how this level of detail could be reflected in all outcomes and goals. During the inspection process the manager updated other personal plans. Three monthly reviews take place and detail feedback from people, their representatives and staff. Information within plans inform staff of what behaviours people may show to reflect their mood so this can be anticipated and managed, where people are unable to say how they are feeling. Detailed, clear risk assessments are in place. One family member told us *"I would totally recommend Manorleigh – it is a family home and everyone knows everyone."*

The manager and team have worked diligently to provide the cover required and maintain the level of care to support the people living in the home. Independence is supported where possible. Staff have a good understanding about mental capacity and how measures in place support people to be safe whilst independence is promoted. The manager told us *"Staff know X well and want to encourage X to get a better quality of life – a better balance whilst encouraging them to accept help to maintain their independence"*.

People's medication is safely managed. Medication is stored as required with temperature recordings seen. Monthly audits are completed with actions required. Medication administration records and medications were checked. Some front sheets required updated photos for identification purposes. The manager advised these would be put in place.

People are supported by staff who have good up-to-date knowledge of safeguarding processes to follow. There is a safeguarding policy in place and a flow chart for staff to refer to. A member of staff is the nominated safeguarding champion and staff told us they find the process easy to follow and the manager is approachable and has an open door policy. One family member told us *"They are absolutely amazing.....and X feels safe there"*. Staffing levels need to be more consistent to ensure the safety of people is always met and their outcomes consistently achieved. The manager confirmed recruitment has been completed and the staffing levels should now be as required. We saw changing needs of people result in the required referrals being made to professionals for review as needed.



Environment

Good

People live in an environment with appropriate and well-maintained facilities and equipment to help them achieve their well-being outcomes. One professional told us, *"I can see that specific chairs etc have been purchased for individual resident needs. The placement feels homely"*. Since the last inspection a handy person has been appointed. The manager said this has made such a difference. We saw maintenance of the gardens had improved with newly built bin storage areas in the front and a well maintained rear garden. An ongoing decoration programme is underway including individually made storage areas in people's own bedrooms. Further plans to continue with the decoration programme include the lounge, further bedrooms, the wetroom, a bathroom and some replacing of carpets such as the stairs.

At the last inspection we noted one communal shower room has a curtain as opposed to a fixed door to enable people to access easily. The provider has considered how this meets people's privacy needs, people's mobility requirements and the fact that very few people choose to use this shower room. They have concluded this is suitable at this present time.

Required health and safety checks are completed and we saw the gas annual service check and five year electricity certificate. A fire risk assessment has been completed with a review and fire action plan. In addition to this we saw records of tests for the fire alarms and noted doors have magnetic release catches. Personal emergency evacuation plans (PEEPs) are in place.

The current food hygiene rating is 5 (very good). We saw recordings of fridge and food temperatures and a cleaning rota. People are supported to be independent in the kitchen where appropriate and where safety can be maintained. The home appeared clean and whilst people are supported to be independent with the use of their bedrooms and bathrooms this is sensitively monitored and additional support given where needed. A rota for shower cleaning was seen in addition to shower head cleaning and water temperature checks.

People independently access areas of the home including the rear garden. One person living at the home has enjoyed staff and family working with them to create a raised vegetable patch. They are growing a variety of fruit and vegetables and are very proud of this. It was a topic of conversation and people are looking forward to enjoying the produce over the Summer.

People are very welcoming to visitors in 'their' home.



Leadership & Management

Good

People are supported to achieve their outcomes because the service provider has oversight to ensure good quality care is provided. Staff are very positive about the manager and RI and the support they provide. The manager is described as *“Going above and beyond”*. The RI and their directors visit the service regularly and complete audits. We saw quarterly reports and a six monthly quality care review report. Views and feedback is considered from people, their representatives and staff.

People are supported by staff with the necessary expertise, skills, and qualifications to meet people’s care and support needs. However, staffing levels are not consistent. Staff recruitment files show references and Disclosure & Barring Service (DBS) checks are completed. Following our discussion the manager advised she has informed staff to update their employment history details including gaps in employment.

Individual supervision is provided quarterly and annual appraisals are completed. Records seen are very staff centred with a focus on staff learning and development, reflective practice and how management can support staff to excel in their career. We did note the manager was due supervision and an annual appraisal. The manager confirmed support is in place and discussions are held. The RI confirmed such discussions/meetings will be documented in the future.

Staff are very positive about training they receive. In addition to required training such as ‘Safeguarding’ and ‘Manual Handling’ they receive other sessions including ‘Understanding Self Harm’ and ‘Mental Capacity’.

Staffing levels are not consistently maintained as stipulated in the service’s Statement of Purpose nor as determined by people’s required levels of care and support. Whilst staff have worked extra shifts and been diligent with their care and support, we discussed the potential risks and concerns when staffing levels are below the required number. Outcomes for people require improvement because inconsistent staffing levels may put people’s safety at risk and we expect the provider to make improvements. Since the inspection, the provider has confirmed their recruited staff have commenced employment. This area for improvement will be reviewed at the next inspection.

Staff morale and well-being is important to the manager and RI. We saw the notice board had details of ‘team shout outs’, some learning materials and personal well-being tips with ‘Social Care Wales’s resources. Staff feedback included *“We work as a team – together sharing the work equally – the manager is so helpful”* and *“Communication works particularly well here”*. The manager told us *“I lead by example; that is how I work”* and this was seen throughout the inspection process.

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 are at risk of not having their outcomes met due to inconsistent staffing levels as specified in the services Statement of Purpose and as per peoples identified level of support.	02/06/25

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

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