



Mond Court Apartments



Mond Court, Swansea, SA6 5HQ



01792846394



<https://www.accomplish-group.co.uk/mond-court-apartments/>

The inspection visit took place on 14/10/2025

Service Information:

Operated by:	Accomplish group ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for learning disability, Provision for mental health
Registered places:	6
Main language(s):	English
Promotion of Welsh language and culture:	The 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:

Mond Court is a Residential Care Home which provides personal care and support to people. It is situated in Clydach and has good links to local community facilities.

People experience good well-being outcomes as they lead happy fulfilling lives supported by knowledgeable and motivated staff who know them well. People are supported to live well, with opportunities to maintain, develop, and explore new interests and friendships.

Care and support is good. Care planning documentation is strength-based and outcome focussed, placing people at the heart of the service. This is regularly reviewed with involvement from people.

The environment is good as it promotes safety and comfort and supports people to achieve their wellbeing outcomes. The manager continually ensures the service is well-maintained. Improvements are underway to make better use of the outdoor area.

The Leadership and management is good as it is accessible, visible and fosters an inclusive culture. Governance and quality assurance arrangements are consistent and focus on service improvements. Staff feel supported and well equipped to fulfil their roles.

Findings:



Well-being

Good

People experience good well-being outcomes as they live healthily and safely with control over their lives, supported by positive risk management. Peoples' individual risk assessments and personal plans are detailed and show a good oversight and understanding of people's needs. These plans also support people to maintain control over their day to day lives. It is clear from feedback received from people and staff and from reading personal plans, people's voices are consistently heard and respected. We saw respectful and relaxed interactions between staff and people. People are comfortable in their own home and engage openly with staff and appeared relaxed throughout.

The accommodation positively supports people's well-being outcomes. We observed people taking part in meaningful activities and saw the positive impact this has on people. People's individuality is embraced and promoted. People were actively supported to take an active role in maintaining their home and this clearly has a positive impact on their wellbeing.

People are safe and protected from abuse and neglect. People live in a home that feels warm, welcoming, and secure. The environment is clean, well maintained, and thorough health and safety checks completed regularly. Deprivation of Liberty Safeguards are appropriately implemented for those who require it. All staff members are required to complete safeguarding training as part of their role. People shared with us they can feel empowered to raise concerns with staff through both informal conversations and the formal structure of monthly meetings. Through reviewing the monthly meeting minutes, it was clear that these serve as a meaningful platform where peoples' views and needs such as activity preferences or ideas for home adaptations are genuinely acknowledged and thoughtfully considered.

Safe and healthy relationships are encouraged and supported, and people actively participate in their community, fostering a sense of value and personal growth. People proudly shared their involvement in fire safety training, which they completed alongside staff. We also saw photos and heard stories of their participation in a cake decorating competition, which reflected a vibrant and inclusive environment. Through reviewing personal plans and speaking with management, we learned how people are being supported to do what matters to them, including drama classes and attending church.



Care & Support

Good

People receive the quality of care and support they need to achieve their personal outcomes. Assessments are completed by the provider prior to offering a service, to ensure the persons care needs can be effectively met. Personal plans are co-produced with people and/or their representatives and the service provider. People's preferences and individual needs are clearly recorded in highly personalised plans. This enables staff to provide care and support in a way people prefer. People or their representatives are involved in the review of the personal plans and people's wishes are respected throughout these reviews. Personal plans are thorough, informative and person centred. Corresponding risk assessments are in place and are reviewed regularly. Daily care records are thorough and informative. Warm and sensitive interactions were observed from staff towards people. People told us *"staff support me to do things I enjoy, there's always plenty of staff here, they're good"*.

The service's robust approach to safeguarding helps to protect people from harm and abuse. There is an open and honest culture within the service. People and care staff know how to report concerns and are very confident the management of the service will deal with these effectively. Staff complete safeguarding training and have a clear understanding of how to report matters of a safeguarding nature. The service has an up to date and comprehensive safeguarding policy in place which reflects the Wales Safeguarding procedures.

The risk of infection is minimised due to policy, procedure and hygienic practices in place. Staff demonstrate a good understanding of infection control and the use of personal protective equipment (PPE). The environment is clean and well maintained and with acceptable standards of hygiene. There is regular oversight and audit of infection control arrangements, and the service holds sufficient stocks of personal protective equipment. There is a comprehensive and thorough infection control policy in place which is reviewed annually.

Safe systems for medicines management are in place. Appropriate medication policy and procedures are in place and staff complete regular audits. Medication administration records are completed accurately. Medicines are stored securely, and storage temperatures are recorded and monitored to ensure safety. Confidential documents related to people's medication is also stored securely. Staff receive competency-based medication training, ensuring they have the necessary knowledge and skills.



Environment

Good

The environment consistently promotes safety, comfort, and wellbeing of people. The home offers communal areas and there is a pleasant dining area where we saw people relaxing. We observed the home was extremely clean and fresh throughout with no malodour. The outside area is spacious and private, offering a pleasant area for people to enjoy as they wish. People's self-contained flats are personalised in the way people prefer and designed to promote independent living skills. There is an office where confidential information can be kept securely. The laundry area is away from the kitchen, minimising the risk of cross infection.

The service demonstrates robust systems for monitoring and maintaining both the environment and equipment. All equipment and facilities are regularly inspected, serviced, and tested. External contractors are commissioned to carry specialist checks, such as gas and electrical safety. Repairs are addressed promptly, and an effective redecoration schedule contributes to the good standard of the home's presentation.

A current fire risk assessment is in place, and Personal Emergency Evacuation Plans have been developed to support the safe evacuation of people in the event of an emergency. Examination of maintenance records confirmed that safety checks are conducted in accordance with statutory requirements. Fire alarms, emergency lighting, and evacuation drills are tested routinely. During the visit, two fire doors were identified as requiring attention; this was raised with the manager, who confirmed that action would be taken immediately.

People are kept safe through effective security measures, including a secure entry system and a visitors' book. Identity checks are carried out for all visitors. The service provides appropriate accommodation for people living, working and visiting the home and the management demonstrates a clear commitment to ongoing development and improvement for the benefit of those living there. People experience a sense of belonging, supported by the provider's efforts to create a homely and welcoming environment that meets people's needs.

The kitchen area is well-equipped and accessible. However, we saw food temperature checks were not consistently completed. We have discussed this with the manager who agreed to address this immediately. Laundry facilities are kept in a separate area and away from food preparation areas. We saw appropriate storage for control of substances hazardous to health (COSHH). These are kept in a designated locked area and corresponding safety data sheets are available.



Leadership & Management

Good

The service provider demonstrates strong governance, inclusive culture, and effective systems that support both staff and people using the service. There are effective quality assurance arrangements in place to ensure people receive a service tailored to them as individuals. The Responsible Individual (RI) is visible in the service and visits regularly. During these visits, they gather feedback from people, their families and relatives. This feedback is used to make changes and improvements wherever necessary. Bi-annual quality of care reviews are completed as required by the regulations and these contain good detail about the service, its achievements and any improvements detected or planned. The manager and RI monitor service standards closely through audits. Any actions raised from these audits are acted upon. Policies and procedures are in place and are reviewed regularly. Staff told us they know how to access these and are familiar with them.

The Statement of Purpose (SoP) is comprehensive and clearly states what people can expect from the service. There is also a written guide which provides people, their relatives and professionals with detailed information to enable them to make an informed choice about whether the service is suitable for them. Throughout the inspection it was clear the SoP and written guide are fully reflective of the service provided.

People are supported by staff with the necessary expertise, skills, and qualifications to meet their care and support needs. We sampled several staff files and saw recruitment and background checks in place. Disclosure and Barring checks are completed and renewed when required. There are systems in place to support staff within their roles. These include regular supervision, annual appraisals and regular team meetings. New staff are supported through effective induction. There are good training and development opportunities for all staff to access.

We found an open-door policy from the manager and there is daily, open communication across the service. The manager is extremely approachable and places a great deal of emphasis on staff wellbeing. Staff referred positively to the management team and said *“I feel 100% supported and valued, the manager and deputy have been amazing, we can go to them for anything”* and *“We are listened to and our opinions are taken on board”*.

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.

CIW has no areas for improvement identified following this inspection.

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

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