



## Mardy Park Resource Centre



Monmouthshire County Council, Mardy Park, Hereford Road,  
Abergavenny, NP7 6HU



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<https://www.monmouthshire.gov.uk/>

Date(s) of inspection visit(s): 31/07/2025, 08/08/2025

## Service Information:

Operated by:	Monmouthshire County Council Adults and Children's Services
Care Type:	Care Home Service
	Adults Without Nursing
Provision for:	Care home for adults - with personal care
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**

**Requires Improvement**



**Environment**

**Good**



**Leadership & Management**

**Good**

## Summary:

Mardy Park Resource Centre provides short term placements for people who require respite care or rehabilitation to regain independence after a stay in hospital. Deri Wing has five assessment and rehabilitation beds, two respite and a flexi bed. The unit is based in the integrated health and social care hub for North Monmouthshire in Abergavenny.

People's well-being is good. They are complimentary of the small and friendly service. People are treated with dignity and respect and develop positive relationships with staff who are kind and compassionate. Personal plans continue to lack sufficient detail about how to support an individual on a day-to-day basis. Reviews are taking place, but people's plans fail to reflect any progress meaning they are not reflective of people's current needs which is key to ensuring people receive consistent care and support.

A new manager was appointed to the service to align the management responsibilities of Deri Wing with Monmouthshire's domiciliary Care at Home service. The aim is to provide greater management oversight of reablement and rehabilitation throughout the County. Since our last

inspection, there have been a number of staff absences at the service. Recruitment has taken place to fill staff vacancies within the team. Further development of the service is planned.

The environment needs updating. The property is clean and comfortable, but we found staff's food handling practices need strengthening. A recent health and safety audit highlighted several issues; these are planned for resolution.

## Findings:



### Well-being

Good

People are valued and treated with dignity and respect. There are mechanisms in place to ensure people's voices are heard and respected but acknowledgement of these could be improved. People are encouraged to make decisions that affect their daily lives. Care staff develop positive relationships with people. A keyworker system provides each person with a designated care staff member, which supports consistency and familiarity. We saw care staff being kind, friendly and supportive to people. Family and friends can visit people during their stay which supports people's emotional well-being. People can visit the cafe which is open to staff working in other departments for a mid-day meal. One person told us they look forward to their stay at Mardy Park as they can meet up with friends.

People are supported to be as independent as possible. Potential risks are considered and managed. The environment offers people resources to develop their everyday living skills. Kitchen facilities are provided for people who are assessed to use them to promote their rehabilitation. Healthcare professionals work with care staff as part of a multi-disciplinary approach to support people's recovery. Regular reviews of people's care and support take place which ensures clear oversight of an individual's health and rehabilitation. However, people's progress is not documented in their personal plans which can lead to inconsistent care and support delivery.

People are safeguarded. There are procedures in place to maintain the building and equipment to ensure it is safe for use. Care staff carry out checks to ensure the property is secure. Some care staff are trained as Fire Marshalls. A recent health and safety audit identified issues with fire doors, we were assured the necessary works have been completed.

The accommodation requires general updating to support people to meet their needs. Investment in the facilities and technology would further enhance people's well-being. There is a lack of signage around the service to aid orientation as people with dementia use this facility. There are large, pleasant grounds to sit and look out onto, which require general maintenance.



## Care & Support

## Requires Improvement

People are not fully supported with care and support to meet their overall well-being. Personal plans do not support people to receive consistent and reliable care because they contain limited and outdated information. The plans are not based on what people can do for themselves as progress is not documented. Reviews are conducted as part of weekly healthcare professional meetings, but the plans are not updated so are not reflective of an individual's current needs. Staff told us the plans go with people back into the community upon discharge, so a new care package could start with outdated information. Outcomes for people require improvement because there is an on-going risk that people will receive poor and inconsistent care and support without reliable information to direct care staff. This was identified at the last inspection. We were assured that a review of the documentation is planned.

People are encouraged and supported to be as healthy and independent as possible. Routine risk assessments are conducted to ensure people are safe. Staff we spoke with understand people's health conditions and the support they require, and they can identify changes in the usual presentation of people they support promptly. Although, we noted healthcare monitoring is unreliable for people which can make achieving outcomes for people difficult.

People are protected from harm and abuse because the service ensures all legal requirements are met. Systems work well to ensure people's liberties are protected and they are cared for in the least restrictive way by skilled care staff. The service makes improvements when concerns are raised about safety or practice. People wear personal alarms to alert staff when they require assistance. On the day of inspection, care staff only had access to one working receiver. Other sensors were available but not in use. Senior managers told us they are addressing this issue.

People's medication is safely managed. Staff receive training to ensure they have the necessary skills to administer medication safely to people. People are assessed and supported to self-medicate if they are able. Routine medication audits take place which assess the storage and administration of medicines. There is a system to manage and record medication errors. We discussed the storage of medications and their efficacy due to varying temperature changes. Senior managers are looking to resolve this issue.

The service promotes hygienic practices and manages the risk of infection, but staff practices need strengthening. A company infection control policy provides guidance for staff. A recent infection control audit identified issues which we were assured were being resolved. One room was being treated for an infestation of ants. We noted some staff not wearing Protective Personal Equipment (PPE) when carrying out their duties. The manager assured us the necessary resources will be available to all staff.



## **Environment**

**Good**

The environment is comfortable and clean, but it needs updating. There are communal areas where people can spend time with others and take part in activities. We saw people spending time in different parts of the service on the day of our visit. Kitchen facilities are provided adjacent to two of the bedrooms, but these were not in use. People told us they liked the rooms which are sufficient in size. We saw bedrooms without curtains at the windows. We noted a strong damp odour in some rooms that have not been used for some time. We were assured that work has begun to make the environment more homely.

There are effective systems in place to maintain the safety of the accommodation. Regular servicing, maintenance, and repairs of facilities ensures the safety and well-being of people using, working at and visiting the service. Fire equipment is checked, and alarms and lighting are routinely tested. Water systems are checked for temperature regulation and legionella. Every individual living at the home has a personal emergency evacuation plan specific to their support needs and staff undertake routine fire drills. The kitchen that supplies the main meals is located outside the service but within the main building. The service displays a rating of five by the Food Standards Agency, which is 'very good.'



## **Leadership & Management**

**Good**

There are effective governance systems in place which support the running of the service. The manager is experienced and suitably qualified for the role and registered with Social Care Wales (SCW), the social care workforce regulator. We saw practice which demonstrates a positive and compassionate culture at the service. Staff we spoke with had positive views about the support they receive from leaders. Regular meetings inform care staff of service updates, best practice, and the shared vision of the service. The Responsible Individual (RI) completes formal visits to the service. We found staff are committed to the rehabilitation of people. It is acknowledged that the service is underused and there are on-going plans to support the development of the service.

Vetting processes are sufficiently robust to demonstrate staff's fitness to work with vulnerable adults. The agency carries out pre-employment checks in the form of Disclosure and Barring Service (DBS) check and seeks former employer references. The necessary forms of identification are retained for staff. Those eligible are registered with Social Care Wales (SCW), the workforce regulator.

People are supported by committed staff who are trained and developed to meet their care and support needs. Newly appointed staff complete an induction programme which includes training and shadow shifts to ensure they can perform specific care tasks. Staff training records indicate staff have access to training opportunities and have completed an appropriate level of training. Care staff we spoke with feel supported by the manager and records confirm that they receive regular one-to-one supervision sessions. The service does not use agency staff; this ensures continuity of care for individuals. There are robust company policies and procedures, which support good outcomes for people.

## 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 there needs met due to the lack of information within the persons personal plan.	31/07/25

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



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