



## April Court Care Home



April Court Care Home, 137-144, St. Helens Road, Swansea, SA1 4DE



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The inspection visits for this service took place between 13/01/2026 and 14/01/2026

## Service Information:

Operated by:	Wellchime Ltd
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 mental health
Registered places:	78
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:

April Court Care Home is in central Swansea, close to shops and other amenities within the City Centre. The home consists of three units and provides both nursing and personal care. People feel happy and safe in their home. Their rights are upheld and they receive timely care and support which promotes good health and well-being.

The environment is nicely presented and has good facilities that meet people's needs. Regular upgrades ensure the accommodation and facilities are constantly improving.

The service is managed well. People experience good continuity of care from a stable team of staff. Staff receive a high level of support to enable them to fulfil their roles effectively. The Responsible Individual (RI) has good oversight of the service and continuously drives up standards.

## Findings:



### Well-being

Good

The service promotes people's rights and helps protect them from harm. The management team liaise with the Local Authority Safeguarding Team and other professionals to manage identified risks to people's safety and welfare. Staff understand their safeguarding responsibilities, which they discuss regularly during individual and team meetings. People's Deprivation of Liberty Safeguards (DoLS) authorisations are up to date, and their personal plans clearly reflect their individual circumstances. The management team has improved its oversight of DoLS applications and renewals. This means that people do not face restrictive practices without legal protection.

The home is suitably adapted so people can move around safely. Private and communal areas feel homely and are nicely furnished and decorated. People enjoy spending time in the gardens, which are fully accessible and attractively presented.

People have many social opportunities. We saw them enjoying friendly interactions with staff, which boosted their spirits and created a positive atmosphere. Regular group and individual activities also help keep people occupied and stimulated. For example, they engaged well with one another during a group quiz. Activity records have improved and show that people enjoy a variety of things, such as one-to-one discussions on topics of interest, reminiscence sessions, hand massages, music concerts, dance and exercise sessions and arts, crafts and games. People also enjoy outings with family and friends. The service has recently employed a second activity coordinator to bring new ideas and provide further opportunities for people to enjoy various activities and events.

People are respected for who they are. Their Welsh language and other communication needs are incorporated into personal plans, and we saw care staff communicating with people effectively during all interactions. Care staff support people to make everyday choices, which are reflected within care recordings. People spoke highly about the quality of care they receive, and the warmth shown by care staff. They said, *"I'm happy"*, *"They're wonderful here"* and *"It's excellent here. It really helps that the staff have been so helpful – they're lovely"*. The RI receives consistently positive feedback about people's experiences, and we saw numerous compliments from relatives.



The suitability of the service is carefully considered before people move in. Senior staff meet with people and review information from professionals to complete pre-admission assessments. When needed, they share and discuss these with senior managers and clinicians. This supports good decision-making and helps ensure the service can safely meet people's needs. Information from initial assessments is used to create detailed risk assessments and personal plans. These describe how each person is to be supported, capturing who they are, their preferences and daily routines.

People are happy with the care they receive, which is of a good standard. Care staff are visible and attentive to people's physical and emotional needs. They closely monitor people's health and refer any concerns to the relevant agencies and professionals. The service uses an electronic care planning system that prompts staff to complete care tasks and maintain accurate care recordings. These recordings show that people consistently receive timely care in accordance with their personal plans. We found some inconsistencies in care monitoring and recording, which can be improved by sharing good practice across the home's units.

The service has improved records relating to nutritional support. Staff regularly check and record people's weight and involve medical and dietetic services when there are concerns. Care staff make detailed, accurate recordings of what people eat and drink. These show that people receive regular meals, drinks, snacks and nutritional supplements to maintain good nutrition and hydration. Personal plans include each person's dietary needs and preferences. We saw care staff assisting people to eat in a dignified and caring way, with meals prepared and served to suit their needs. One person told us, "*The food is great.*" The menu is varied and reviewed often. Catering staff understand people's food preferences and will provide alternatives when needed.

The service manages medicines safely. Medication records show that people consistently receive their prescribed medication. Staff complete training before administering medicines, although some competency assessments are overdue. The manager assured us these will be completed imminently. Arrangements are also being made to monitor the temperature of one area where a medication trolley is stored. This is to ensure all medicines are kept at appropriate temperatures.

The home and equipment are clean and hygienic, which helps to reduce infection risks. Care staff complete infection control training and use personal protective equipment (PPE) appropriately. The service enhances infection control procedures when risks of community transmission are high. Infection control audits are routinely carried out by the home's head housekeeper and infection control champion. The service received a food hygiene rating of 4 (good) in February 2025.



## Environment

Good

The accommodation is bright, spacious and homely. People are comfortable relaxing in the lounges and dining areas or spending time in their own rooms. Where possible, people are offered alternative rooms to improve their experiences. One person said, *“What you should know is that I’ve moved to a new room that is warmer so now I’m walking on water”*. The lounges provide a safe space to socialise, with staff based close by to offer support quickly if needed. Quieter rooms are available for those who prefer a calmer space or want privacy with visitors. People have access to pleasant gardens where they can relax and enjoy the outdoors.

The provider continuously invests in the accommodation and facilities. The home employs two maintenance officers to carry out general repairs and upgrades. We saw some bedrooms being refurbished to a very high standard. There are also plans to carry out an extensive upgrade of all communal rooms, which we were assured will accommodate people’s dementia care needs. A review of the window blinds in people’s rooms is required as we were told that some do not function easily.

There are measures in place to promote safety and security. Keypads and alarms are used on exits and some internal doors, so people cannot access hazardous or unauthorised areas unsupervised. Visitors are unable to enter the home without staff approval, and a record is kept of when they arrive and leave. Private and communal areas are generally free from hazards, but staff and contractors must store equipment properly at all times and keep unused rooms locked when undergoing renovation.

The service has robust systems in place to keep equipment and utilities safe. Passenger lifts, hoists and fire safety equipment are routinely serviced, and gas and electrical inspections are carried out as required. Records show that any repair work is arranged promptly. Personal emergency evacuation plans (PEEPs) are regularly reviewed and easy to access. Staff receive fire safety training and take part in regular fire drills.



## Leadership & Management

Good

The service has a new manager who promotes a positive working culture amongst the staff team. The manager is supported by the RI and a new Head of Region, who stay in regular contact with the home. The management team has a good system for recording and reviewing incidents, making sure they are followed up properly and any learning is shared. The RI closely monitors the quality of the service and gathers people's feedback during formal visits. These visits help identify what improvements are needed and whether the home requires extra resources. Alongside ongoing environmental improvements, administration systems are also being developed so that staff records are easier to access. The home has an up-to-date statement of purpose, which provides an accurate picture of what people can expect from the service.

The management team is respected by staff. Managers lead the team well and are considered to be approachable and supportive. One staff member said, "*Management are very supportive; we can go to them about anything*". Nursing staff feel trusted to make clinical decisions, which helps develop their skills, keeps them motivated and provides job satisfaction. Staff have meaningful discussions about their individual roles and performance during formal supervision meetings and annual appraisals; the records of which are completed to a consistently good standard.

People are supported by familiar care staff, as turnover is very low and staff are allocated to work on designated units. This helps build trust and ensures changes in people's health and well-being are recognised and acted upon quickly. A clinical lead is due to join the team to provide additional support to nursing staff and closer oversight of clinical practice. The service follows safe recruitment processes, including an initial Disclosure and Barring Service (DBS) check which is renewed every three years. Staff receive mandatory and specialist training, as outlined in the statement of purpose. They told us their training is "*good*" and "*They [management] would support us with any training we want*". Staff are also supported to maintain their registration with the Nursing and Midwifery Council (NMC) and Social Care Wales (SCW).

## 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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