Cyngor Castell-nedd Port Talbot
Neath Port Talbot Council

Neath Port Talbot County Borough Council

Contract Monitoring Report

HOME NAME	
Provider:	Talbot Court Nursing Home
Contract Monitoring Officer:	Joedi Pozzi
Date of Contract Monitoring Visit(s):	12th May 2026
Date Report Issued:	20th May 2026

Report Purpose

Contract monitoring is essential in helping to monitor and improve the quality of commissioned services. As part of the Neath Port Talbot Council contract monitoring process, contract monitoring visits are carried out in order to review service quality and performance.

This report provides an overview of the Contract Monitoring Officer's findings following a contract monitoring visit and from examining all supporting information which was made available by the service provider and relevant professionals.

The report is aimed to inform three key audiences; firstly, the report aims to provide the service provider with the Contract Monitoring Officer's findings including identified areas for improvement. Secondly, to provide the Council's Commissioning Officer with an overview of the Service provider's performance which will inform future commissioning arrangements. Thirdly, to inform the relevant Social Worker of the findings of the contract monitoring visit to support information sharing and joint working.

Any improvement actions identified within the report are summarised within a Quality Improvement Plan (QIP) which is attached to this report. When all improvement actions have been met, the Quality Improvement Plan will be deemed complete.

Evidence Base

The report reflects evidence collated during the contract monitoring visit, which included;

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- Feedback obtained during face-to-face discussions with residents, family and staff;
- Feedback obtained from staff, resident and family questionnaires;
- Discussion with the home's management team;
- Observational evidence;
- The examination of various care home documents observed at the home including:
    - The Care Home's 'Welcome Pack'
    - Statement of Purpose
    - A sample of residential files and supporting documentation
    - A sample of staff files including training information
    - Activity records
    - A sample of home policies
    - Resident financial records
    - Maintenance and servicing records
    - Care home internal audit reports

The following report considers the home's performance in meeting contractual requirements and identified areas of good practice are recognised.

Summary Profile	
Registered Manager	Francina Ritchie
Responsible Individual	Dr Merajuddin Hasan
Number and details of staff employed at the service	51 Staff in total – Manager x 1, Clinical Lead x 1, Nurse x 7, Head of Care x 1, Care Workers x 24, House Keeping x 6, Kitchen Staff x 7, Admin x 1, Activities x 2, Maintenance x 1.
Number of NPTCBC placements	20
Number of other placements at the service	8
Number of safeguarding notifications made in the last 6 months relating to NPTCBC individuals.	0

Number of formal complaints in the last 6 months submitted to the Provider	0
Date of previous CIW inspection	13.08.2024

Contract Monitoring Findings

Service Overview

Talbot Court Care Home is a dual-registered facility offering residential, dementia, and nursing care within a safe and supportive environment. Residents are made to feel part of a close-knit community, with flexible visiting arrangements that accommodate family and friends.

Care staff demonstrate a strong understanding of dementia care, as well as residents' individual preferences. The home actively promotes independence and encourages social interaction among residents through conversation, shared mealtimes, and a variety of activities.

Feedback from residents, families, and staff was overwhelmingly positive, highlighting the quality of care and support provided. The atmosphere throughout the home was calm and welcoming. Staff appeared content in their roles, worked at a comfortable pace, and were observed engaging meaningfully with residents. Residents looked happy, comfortable, and well cared for. Staff were attentive to individual needs, promoting independence, and treated both residents and colleagues with respect.

The home provides nutritious, high-quality meals and has achieved a 5* food hygiene rating.

Talbot Court is clean, spacious, and decorated in a traditional style. Residents are encouraged to personalise their rooms with their own furniture and belongings, creating a homely and familiar space.

Prospective residents receive a comprehensive Welcome Pack, which includes the Statement of Purpose and Service User Guide, both of which outline the services and support available at the home, however the document was last updated in January 2025 and the document doesn't explain how to access the most recent inspection report completed by CIW. It is recommended that the document is reviewed (1).

While the overall standard of care is high, some areas for improvement have been identified and the Manager is required to update the Contract Monitoring Officer on the action they will take to implement the required improvements.

Effective Voice, Choice and Control

Talbot Court Care Home continues to actively promote residents' personal identity. Many staff members have worked at the service for several years and have developed a strong understanding of residents' interests, backgrounds, and preferences. Staff were observed engaging warmly and knowledgeably with residents, demonstrating familiarity with their individual needs and routines.

Residents' personal preferences and interests are clearly documented within their care plans, which are maintained on the 'Access' digital system.

In residents' individual bedrooms, personal touches were evident. Photographs of residents and their family members were displayed, alongside items reflecting their hobbies and interests such as items and other meaningful memorabilia, helping to create a sense of familiarity and belonging.

Activities, Meaningful Occupation and Community Access

The home employs two dedicated Activities Coordinators who deliver a consistent programme of activities. A schedule of morning and afternoon activities is clearly displayed on the activities board, with examples including sensory stimulation, arts and crafts, reminiscence sessions, cooking, sing-alongs, and light exercise. Photographs of residents participating in activities are displayed throughout the home, and special events are regularly promoted. External entertainers are arranged on a regular basis, alongside visits from the hairdresser.

During the visit, the Activities Coordinator was observed to be enthusiastic and demonstrated a good understanding of the importance of person-centred care, including the provision of one-to-one activities. They were seen engaging with residents throughout the visit, and residents appeared to have a positive relationship with them.

The home continues to make use of an online resource called The Daily Sparkle, provided by the National Activity Providers Association (NAPA). This resource offers wellbeing materials, themed content, reminiscence ideas, and activity planning tools. During the monitoring visit, the Activities Coordinator was seen leading a quiz using The Daily Sparkle cards, followed by a group sing-along. The home benefits from a well-maintained garden, which includes a pet rabbit that is popular with residents and is used as part of pet therapy sessions.

Efforts are being made to strengthen community links, including outings to local shops and the Plaza Café. Regular visits from the local Minister continue, along with a monthly online Catholic Mass service.

Records indicate that residents' participation in activities is documented within the daily logs on the Access system.

Residents' meetings are held approximately every three months, with relatives invited to attend every six months. Feedback from the most recent meeting highlighted requests for improvements to the home environment, such as outdoor furniture and plant protection, as well as a desire for a wider range of activities, particularly increased access to external entertainers, including children's groups.

Care Planning, Risk Management and Health Monitoring

All sampled resident records are maintained on the 'Access' system, which is user-friendly and provides key information including a resident photograph, admission details, initial assessments, care plans, risk assessments, daily notes, and records of professional involvement and other relevant documentation. Staff can access the system via laptops or mobile devices.

Care plans are written in a strengths-based format, with personal outcomes and preferences clearly documented. These are reviewed on a monthly basis and updated as required. However, in one sampled file, the care plan stated that the resident received a shower. Following a nursing review, it was identified that due to a decline in mobility the individual now requires bed baths. It was also noted that the individual may refuse assistance with personal care. It is recommended that the care plan is updated to accurately reflect these changes, and that staff consistently record when assistance has been offered (2).

The front sections of resident files include life history information; however, some entries lacked sufficient detail. It is recommended that these sections are further developed to include more comprehensive personal histories and clearer information about what is important to the individual (3).

Daily records were found to be consistently completed, and risk assessments are reviewed on a monthly basis. Appropriate monitoring tools are in place for residents assessed as high risk. The system generates alerts for the Manager when care plans and risk assessments are due for review, supporting timely updates. During the visit, staff were also observed recording information electronically following care interventions with residents.

Medication Management

The medication storage room was kept securely locked when not in use and was observed to be clean and free from clutter. Daily temperature checks for medication storage areas were recorded and confirmed that medications were stored within safe temperature ranges.

Medication trolleys were securely locked and anchored to the wall when not in use. They were clean, well-organised, and individual medications were stored separately for each resident.
Controlled drugs were stored securely within a locked cabinet, with all entries in the Controlled Drugs register appropriately double signed.

Sampled Medication Administration Record (MAR) charts are now completed electronically and include a resident photograph, diagnosis, prescribed medications, and any recorded allergies. MAR coding was used accurately throughout.

Staff were observed administering medication safely while wearing appropriate personal protective equipment (PPE).

Residents Finances

Residents' valuables are stored securely, with accurate records maintained for all items handed in for safekeeping. Residents' personal funds are also held securely, kept separate from both other residents' monies and the home's finances. Comprehensive records of all income and expenditure

are maintained, with each transaction signed by two members of staff and supported by corresponding receipts.

The Administrator completes regular audits to ensure accuracy and accountability.

Environment, Health, Safety and Security Management

Documentation Evidenced	In Place	Issue/ Completion Date
Insurance Certificates: Public Liability, Employers Liability and Professional Indemnity	✓	15.07.2025
Electrical Safety Certificate (domestic electrical installation certificate)	✓	15.01.2023
Gas Safety Certificate	✓	12.09.2025
PAT Test Certificate	✓	14.01.2026
Fire Extinguisher Servicing Certificate	✓	21.08.2025
Fire System Servicing Certificate	✓	21.08.2025
Service led fire extinguisher, fire alarm and emergency light checks	✓	21.08.2025
LOLER (6 months)	✓	04.03.2026
Sling Service (6 months)	✓	04.03.2026
Car Fleet Insurance Details		N/A

The main entrance to the building is secured in line with the home's locked door policy, and visitors are encouraged to sign in and out on arrival and departure.

The accommodation is arranged over two floors and includes shared bathrooms, individual bedrooms, a large communal lounge, dining area, and a conservatory on the ground floor. A nursing station office overlooks the communal lounge, enabling enhanced staff observation. During the monitoring visit, staff demonstrated effective teamwork, and safety was maintained with staff visibly present in communal areas.

The home provides a warm and welcoming environment, decorated to a high standard using bright colours. Orientation is supported through dementia-friendly signage throughout the premises. Corridors were observed to be clean, uncluttered, and fitted with handrails to promote safe mobility. Overall, the home was well maintained and presented a comfortable, homely atmosphere. Lounge seating was arranged to ensure residents had clear visibility of televisions.

Residents' bedroom doors displayed their names, room numbers, and a personalised image. Bedrooms were clean, well-presented, and personalised with residents' belongings.

A sample of bedroom safety checks confirmed that profiling beds were in good working order, fire doors were functioning correctly, and window restrictors were fitted. Staff responded promptly to call bells when activated.

Communal bathrooms, en-suite facilities, and toilets were observed to be clean and free from odours. It was noted that one shower chair was stained, and it was recommended that this be either thoroughly deep cleaned or replaced (4). Storage areas and sluice rooms were generally organised and clean; however, it was noted that some were left unlocked during the visit (5).

Despite limited outdoor space, the garden has been thoughtfully designed, featuring wall art, raised flower beds, seating areas, and a garden hutch where the resident pet rabbit, Fluffy, is kept. The area is secure and accessible for wheelchair users. It was noted that residents are actively involved in maintaining the garden with appropriate support.

Maintenance within the service is well managed. The handyman regularly completes essential checks on fire alarms, fire extinguishers, emergency lighting, water systems, and equipment. Accidents and incidents are recorded appropriately, with necessary actions taken where required.

Infection Control

Robust policies and procedures are in place to prevent the spread of infection and are in line with current legislation and guidance. Hand washing signs are located in bathrooms and there is a good supply of PPE which was stored appropriately.

Manual Handling

Manual handling equipment appeared clean, in good working order and was safely stored when not in use.

Servicing records evidenced that equipment servicing is up to date and is completed every six months.

Dining Experience & Food Rating

The main communal lounge incorporates a small dining area, providing a welcoming environment where residents can share meals and socialise. Although dining tables are available, it was observed that residents were eating primarily in comfortable lounge chairs using cantilever tables or in their own rooms. The television was on during mealtimes, which did not promote social interaction between residents.

It was recommended that dining tables be set more consistently to create a positive and engaging dining experience, including the use of background music, and that staff encourage residents to eat at the tables whenever possible (6). The Manager agreed with this recommendation and advised that this would be discussed with staff to support implementation.

During the monitoring visit, staff were observed wearing appropriate Personal Protective Equipment (PPE) while serving lunch. Support was provided in a discreet and respectful manner to residents who required assistance, and hydration was actively promoted through the regular offering of drinks.

Residents were offered a choice of meals and beverages. All meals are freshly prepared on-site, with four meals provided daily. The main meal is served at approximately 4pm rather than at lunchtime,

as the Clinical Lead advised that residents tend to have a better appetite at this time. Meals appeared appetising, and residents were observed to enjoy them.

Leadership, management and Internal Quality Assurance Processes

The provider has robust governance arrangements in place, with a clear commitment from the team to maintaining high-quality standards within the home. Effective systems support care planning, ongoing monitoring, and regular reviews. The Manager and Clinical Lead have access to relevant documentation to ensure records are accurate, complete, and kept up to date. The Responsible Individual provides regular support, visiting the home weekly and recording these visits in the communication log.

The service operates in line with a comprehensive suite of policies and procedures, which are stored electronically and include a system to confirm staff have read and acknowledged them. In addition, essential monthly management audits are completed and maintained, supporting the ongoing monitoring of care quality and safety. These audits help identify both areas of good practice and opportunities for improvement.

Feedback mechanisms are in place, including a suggestion box for relatives and professionals, while staff are able to raise concerns via email. The Manager operates an open-door policy, promoting open communication and accessibility.

Staff Training, recruitment & Support

The home's training programme includes a range of mandatory and essential courses designed to support the health, safety, and wellbeing of residents. The training matrix confirmed that staff have completed the training relevant to their roles. Training is delivered through a combination of eLearning and face-to-face sessions where required.

All staff are either registered with Social Care Wales or are working towards registration with appropriate management support. Several staff members have been employed at the home for a number of years and have developed strong, positive relationships with residents. A supportive and positive staff culture was evident, and all staff spoken to reported that Talbot Court is a good place to work. During the visit, staff and the Manager were observed spending time with residents, offering reassurance and engaging in meaningful interactions, while consistently promoting dignity and respect.

Staff personnel records are securely stored in the Administrator's office. All sampled files contained the required recruitment documentation; however, one file reviewed included unexplained gaps in employment. It is recommended that all employment gaps are clearly documented and explained (7).

Supervision records confirmed that care staff receive one-to-one supervision on a quarterly basis. Staff are familiar with relevant policies and procedures and are kept informed of updates as required. Regular staff meetings take place and are appropriately documented.

The Manager maintains regular communication with the Commissioning Team, and all incidents are shared in line with agreed reporting arrangements.

Resident, Relative and Staff Feedback

There is a positive, relaxed, and supportive working culture where both care staff and management appear happy in their roles. During the visit, staff provided encouraging feedback, stating they feel well supported by the manager. One staff member commented, "*I love working here*". Responses from staff questionnaires were also highly positive, with staff indicating they feel valued and supported, and that managers are approachable. Comments included, *"our manager is lovely*".

Family members shared positive feedback during the monitoring visit, commenting "*The staff are marvellous, couldn't wish for a better home. The communication is good and we always feel reassured*". Questionnaire responses from families were similarly positive, expressing satisfaction with the care and support their relatives receive. Comments included, "*Care staff are excellent, always considerate and have a good sense of humour. The hoeme is always clean and tidy, the food is good too".*

Residents spoken to during the visit also provided positive feedback, with remarks such as, "*staff are good, they come quickly when I press my alarm"* and "*staff are wonderful with all the residents".*

Report Appendices
Where improvement actions have been identified, these are listed within a Quality Improvement Plan which has been appended to this report.