

Inspection Report on

Mayflower Care Home

Mayflower Residential Home Pentre Lane Llantarnam Cwmbran NP44 3AP

Date Inspection Completed

12/03/2024

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About Mayflower Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	The fields nursing home Itd
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	30 August 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People are content in the home and told us they receive good care and support. People's families speak highly about the care staff and told us they are made to feel welcome when visiting their loved ones.

People have personal plans in place which focus on supporting them to achieve their personal wellbeing outcomes. Personal plans contain sufficient information to inform familiar and experienced care staff about how to meet people's day-to-day needs.

The environment is clean and meets the needs of people living in the home. There is plenty of space for people to spend time socialising as well as spaces to relax in a quieter environment.

The responsible individual (RI) and the manager have worked alongside the care staff to improve systems and processes within the home. The service has achieved all previous highlighted areas for improvement as well as priority action notices.

Well-being

People have control over their day-to-day life. We heard care staff offering opportunities to engage in a variety of activities, and frequent choices provided for food and drinks throughout our inspection. People told us they had good options for meals and are complimentary about the food in the home. People know and understand what care, support and opportunities are available to them. The home has a written guide to the service which is shared when people move into the home. The guide contains the relevant information about the home, and signposts people to key polices and processes they may wish to read.

People are treated with dignity and respect by familiar care staff who know people well. We observed new care staff being mentored and supported by experienced staff members in order to get to know people and their preferences. The environment meets the needs of people living in the home. People told us they like their bedrooms and having space to spend time with others or in the quieter areas. One person told us *"I sit in conservatory, watch the birds. No problem at all, if there was, I would tell you."*

People are supported to maintain their physical, mental, and emotional health and wellbeing. People are encouraged to do the things that make them happy. We saw people spending time enjoying social activities such as quizzes. People get the right care and support, as early as possible. Care staff are attentive and alter their approaches to meet the individual needs and preferences of people.

The service has a policy and procedures in place to protect people from abuse and neglect. We saw posters and notices displayed throughout the home to inform and support people about how to raise a concern. There is clear information displayed for care staff to support them with safeguarding and whistleblowing. People told us they feel confident to raise any issues with the manager. People are assessed prior to moving into the home to consider the suitability of living accommodation. People told us they are happy in the home, and they get on well with others who live there, as well as care staff.

Care and Support

People told us they are happy living in the home and with the care and support they receive. A family member told us "*He loves it here, they are caring, they keep checking on him, they chat to him…home just warm and welcoming, they make families welcome.*" We observed positive rapport and interactions between people and care staff throughout the day. Care staff are respectful and tactful when supporting people to maintain their dignity.

Risks and specialist needs are considered in the care planning process. We discussed increasing the detail in some risk assessments and are assured the manager is taking action to address this. People are supported to be as independent as possible. Where people are unable to keep themselves safe, the necessary procedures are followed. Appropriate arrangements are in place with the Local Authority to ensure decisions are made in people's best interests, when required. The manager has good oversight of the processes required to maintain people's rights in their best interest. People's capacity and wishes are considered when planning care and support.

People's voices are heard and listened to. One person told us they would like a newspaper subscription. A member of care staff responded to this quickly and organised the subscription during the inspection. This has given other people the same opportunity and people appear happy about this action. People's individual circumstances are considered. Care staff provide kind and warm reassurance to people who ask about family and friends. Care staff encourage people to join in a variety of activities throughout the day. We saw notices and posters about up and coming events in the home. People are given choices about whether they want to participate, and alternative activities are offered if people prefer.

People have up to date personal plans which focus on their individual needs and preferences. Personal plans reflected the guidance provided by external professionals involved in people's care and support. Where people choose to participate, people and their representatives are involved in reviewing their personal plans. We saw notices placed in the home to encourage people and their families to take part in this process. Personal plans contain sufficient guidance for care staff to meet people's needs on a day-to-day basis. We observed skilled, familiar staff supporting people in line with their personal plans.

People are supported to manage their medication. We found the manager audits medication processes frequently to ensure people receive medication in line with the prescriber's directions. Medication is stored safely and in line with best practice guidance.

Environment

People told us they are happy in the home and feel comfortable in their bedrooms. People have opportunities to personalise their rooms with photographs and trinkets. We saw that bedrooms are of a reasonable size and provide people with space to relax. The home has considered storage for people who use mobility aids and there is plenty of space for people to move around their bedrooms safely. People can spend their time in the communal lounge, dining area or quieter conservatories. We observed people using all of the communal spaces throughout our inspection visit. People appear happy in the home and are able to move freely within communal spaces. In warmer weather, there is a pleasant garden and plenty of space to enjoy outside the home.

The environment meets the needs of people. There are plenty of bathrooms for people to use. There is adequate equipment provided to support people where required. We saw specialist equipment is well maintained in the home. The environment is safe for people who live there. The RI has ensured people's safety and installed new infrared sensors to alert care staff to people's movement at night to minimise the risk of falls. Where sensors are used, appropriate steps have been taken to ensure these are used in people's best interest.

The management team ensure the home is compliant with health and safety and works with external professionals to maintain the home's utilities. We saw evidence of safety certification for the equipment and utilities within the home. Care staff complete regular health and safety checks within the home and identify any areas of need to the manager.

The home décor is comfortable, providing space for people to relax and spend time with others. Some aspects of the décor show signs of normal wear and tear for an older property. The service has a plan for ongoing maintenance within the home. We saw the home is continuously cleaned by the housekeeping team, who know people well and are sensitive to people's needs whilst completing their duties.

Leadership and Management

There are adequate governance arrangements in place to support the smooth running of the service. The manager and RI work closely together to ensure the day-to-day running of the service is in line with the home's statement of purpose (SoP). The management team complete regular audits in the home to monitor processes and ensure documentation is in place. We observed the manager and RI interacting with people and staff in a friendly and professional way. The RI visits the home frequently and is informed about people's needs and is responsive to these. The RI takes on board feedback and acts upon it. We saw the RI has invested in updating technology in the home with a new call system as well as infrared sensors to support with falls management. The RI prepares a report on the quality of care in the service. We discussed enhancing this with data from the audits undertaken but are satisfied with the oversight in the home.

There are enough staff on duty to support people effectively, and care staff are familiar and knowledgeable about people's wants and needs. People told us they liked knowing the staff in the home. We observed new care staff being mentored by experienced team members to get to know people. Care staff receive regular support and supervision with the manager and told us they feel supported and confident in their roles. Care staff are trained in line with the SoP. We observed new care staff receiving manual handling training during our visit. The manager keeps records for care staff's training and ensures training is refreshed as required.

The home follows safe recruitment processes. We found the home checks care staff's employment histories and ensures applications are made to the Disclosure and Barring Service (DBS) as well as the workforce regulator, Social Care Wales (SCW). We saw a high proportion of the care staff are qualified or working towards qualification as part of their registration with (SCW). The manager ensures care staff are informed about any changes or priorities in the home. We saw team meeting minutes which demonstrated the home's focus on providing person centred care.

Summary of Non-Compliance			
Status	What each means		
New	This non-compliance was identified at this inspection.		
Reviewed	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.		
Not Achieved	Compliance was tested at this inspection and was not achieved.		
Achieved	Compliance was tested at this inspection and was achieved.		

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people's well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

Priority Action Notice(s)				
Regulation	Summary	Status		
N/A	No non-compliance of this type was identified at this inspection	N/A		
15	Personal plans are not co-produced with people and do not always reflect current health needs.	Achieved		
58	The service does not have sufficient arrangements in place for the safe handling and administration of medication.	Achieved		

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement			
Regulation	Summary	Status	
N/A	No non-compliance of this type was identified at this inspection	N/A	
44	The service does not have safe and appropriate fire safety arrangements.	Achieved	
60	CIW have not been informed of all reportable events under Regulation 60.	Achieved	
26	The provider does not have effective arrangements in place to ensure people are protected from harm and abuse.	Achieved	
66	The RI does not have sufficient systems and processes in place to enable proper oversight of the service.	Achieved	

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Date Published 15/04/2024