

Inspection Report on

Merton Place

8 Pwllycrochan Avenue Colwyn Bay LL29 7BU

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

03/01/2023



About Merton Place

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	ClwydAlyn Housing Limited
Registered places	54
Language of the service	Both
Previous Care Inspectorate Wales inspection	19/6/2018
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

This is the first inspection following re-registration with Care Inspectorate Wales (CIW) under the Regulation and Inspection of Social Care (Wales) Act 2016 (RISCA).

People are very happy with the quality of care they receive and speak highly of the staff who provide their care and support. Care staff enjoy working at the service, want the best for the people they support and feel supported in their roles. Activities are regular and varied to ensure people's physical and emotional well-being needs are met. People are involved in devising their plan of care, so support is delivered in the way they need and prefer. Care documentation is thorough and robust, and people have access to health professionals when they require it.

The service is managed well, and the manager, deputy, and care staff respect people, are approachable and kind. The home's care documentation and quality assurance systems confirm people receive a good standard of care in a way they want it, and all staff and the management team strive to ensure a good service is provided. Training is provided to support care staff in their development and help them carry out their work safely. Recruitment processes are robust. The home is well maintained, spacious, safe, and secure and improvements and investment is ongoing.

Well-being

People have choice and control regarding the care and support they receive at the home. People are offered an active offer of the Welsh language and there is ample bi-lingual signage throughout the home. The homes Statement of Purpose can be made available in Welsh if requested. Kitchenettes are available on each floor with fresh fruit, snacks and refreshing drinks for people to help themselves. People look happy and told us they are happy and comfortable in the company of staff and are uplifted by the support and care they receive. We saw staff communicating with people in ways they understood. People choose how to spend their day and carry out their daily routines.

People's physical, mental, and emotional well-being is looked after by care staff who seek professional advice promptly as soon as it is required. Personal plans are devised with the people and their relatives so that specific aspirations and preferences are captured accurately. A multi-disciplinary team approach is undertaken, advice and guidance is sought promptly when needed to ensure people's needs are reviewed and effectively met. A variety of activities are provided to ensure people can do things that matter to them. Care staff have access to training and their knowledge and competence is checked.

People are protected from abuse. Staff are trained and policies and procedures help to guide staff practice. Recruitment of staff is safe which helps to ensure staff employed are suitable to work with vulnerable people. Security measures are in place to protect people from unauthorised visitors and environmental checks are routinely undertaken. Care staff demonstrate a good understanding of responsibilities in relation to safeguarding and the correct action they would take in the event of any concerns. The service has arrangements in place to ensure any decisions that restrict a person's liberty are made only in their best interest and with full consideration of the family and other agencies.

People live in a clean and comfortable environment. There are sufficient lounges to ensure people have a choice about where they want to spend their day. Furniture is comfortable and of good quality. Rooms are personalised with each person's own belongings, pictures, and other items they enjoy. The service is clean, homely and maintenance work is completed to ensure people live in a well-maintained environment. Equipment is regularly serviced and maintained to ensure safety.

Care and Support

People are cared for in the way they want. A plan of care is devised with them or their representative. Prior to the person being admitted into the service, pre-assessments are completed and all necessary paperwork from other services such as health, specialist services or local authority care is obtained. Care records are comprehensive, current, and relevant. Staff review personal plans monthly and any changes to the person's circumstances are recorded and updated within the plans to ensure staff have the most upto-date information. The home has enrolled in the 'Gwen am Byth' programme which aims to improve oral hygiene and mouth care for people living in a care home.

People didn't have to wait to receive support, we saw staff approaching and speaking with people, asking them what they wanted before they had to ask. Care files contain a "This is Me" document which include details of people's likes, dislikes, routines, and what is important to them. Appropriate numbers of staff are on duty to enable people to receive the care they need at the right time. We observed some care staff speak Welsh to some people when providing care, reassurance, and choice. People are not left unattended for long periods of time and care staff spend meaningful time talking with people and supporting them to engage in varied activities. These include visits from the local churches, music sessions with entertainers, bingo, beauty afternoons, cocktail making sessions and a visit from the local schools at Christmas time where Christmas cards were made, and people enjoyed food tasting events.

Safe practices are adhered to in relation to the management and administration of medication. We viewed a sample of Medication Administration Records (MAR) and saw they contained people's photographs and any known allergies they had. People receive their medication as prescribed in a timely manner and people who have been prescribed anti-psychotic medication are reviewed regularly. It is advisable that any side effects from such medication is recorded in people's personal medication plan's so that staff are aware of what to look out for. Medication is stored securely, and regular audits are carried out to make sure people's medication is administered safely. Care staff receive training and are deemed competent before managing and administering medication.

There are procedures in place to safeguard people. People who lack capacity to make day-to-day decisions are subject to Deprivation of Liberty Safeguards (DoLS)to ensure they are protected and decisions regarding their care and support and safety are made in their best interests. People have access to an advocacy service if needed and information and contact details are displayed in the home. Care staff are trained in safeguarding and are confident in reporting poor practices and any safeguarding concerns with the manager. There are policies and procedures in place to help protect people.

Environment

Overall, people live in a safe, secure environment. The service has a visitor book which is completed in accordance with fire safety arrangements and visitor identity checks are undertaken. Fire safety documentation is in place including personal emergency evacuation plans (PEEP). Up-to-date health and safety documentation including, water temperatures and the risk of legionella, fire and electrical safety certificates, portable appliance tests (PAT) and fire risk assessments are in place. Records show staff receive training to enhance safety, this includes first aid, food hygiene, fire safety, health and safety and moving and handling to support them in their role. Extensive and remedial work is due to commence in order to bring the building up to current fire safety standards.

The manager completes monthly environment audits and cleaning schedules are in place to ensure all areas and equipment is cleaned and any areas which require attention are reported to the maintenance team to action. We saw potential hazardous items such as cleaning products and any item which pose a hazard are securely locked away. Equipment is stored away from areas frequently used by people, leaving corridors free from obstacle. Some attention is needed in cleaning the carpets in the main corridors in the home as they have become worn and stained. The provider is currently addressing this.

There is sufficient internal and external space and facilities to meet the needs of people. The home is purpose built which provides good quality accommodation. People told us they are happy with their rooms and that they felt that they had what they needed. There is clear, appropriate bi-lingual signage around the home which helps people to find their way around independently. People can move around the home freely and safely as there is ample grab rails. People's rooms have a wet room, are comfortable, homely, clean, warm, and people are encouraged to furnish their rooms with personal items of importance to them such as photographs and ornaments. The ground floor has an enclosed wheelchair accessible garden with ample seating areas and sunshades are available when the weather is fine. Wheelchair height planting troughs are available for people to plant flowers or vegetables. On the first and second floor a small contained outside area is available. There are various sized lounges and a kitchenette on each floor for people to meet, and be sociable, or to be private as they so wish.

Leadership and Management

People can be confident that they receive high quality care from a service which sets high standards for itself, is committed to quality assurance and constant improvement. The service has an up-to-date statement of purpose (SOP), which is reflective of the service provided. Policies and procedures are in place and kept up to date. The Responsible Individual is accessible and monitors the performance of the service as required by regulation. People and their relatives/representatives know how to raise any concerns and feel comfortable in doing so should any arise. People told us they have choice and control about matters, which affect them. As part of quality assurance measures people are asked for their views and records show they are happy with the care and support they receive.

People living in the home benefit from a service which follows a robust recruitment process and ensures staff members receive training opportunities. We looked at staff files and found all the information required, such as references, evidence of all staff Disclosure and Barring Service (DBS) completions, dates and authorisations and offers of employment, were all present. Staff training records show a variety of online training pertinent to their roles is completed such as falls management, manual handling, diabetes, tissue viability and nutrition and hydration. Staff told us the management team have a positive attitude towards training. Some staff have received training in 'six steps' which relates to good end of life care.

People can be assured staff are valued, supported, and given clear direction. Staff meetings are held regularly with a focus on residents' well-being. We saw minutes and agendas which confirmed staff could contribute to the agenda. Care staff have regular one to one supervision meetings to support and discuss their practice and developmental needs. Annual staff appraisals are currently due, and plans are in place to complete these soon. The management team have a visible presence in the service and care staff confirmed they feel well supported, valued and enjoy their work. Staff confirmed the managers door is always open and the management are approachable.

The service provider has oversight of financial arrangements and invests in the service. The provider has not declared any financial concerns. We saw ample amounts of food and fresh produce. Management confirmed any equipment required is purchased without hesitation. We saw there was enough staff on duty to meet the needs of people.

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

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	N/A
	inspection	

Date Published 08/02/2023

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