



# Inspection Report on

**Mariam House**

**Barry**

## **Date Inspection Completed**

07/06/2023

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## About Mariam House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gofal Cymru Care Ltd
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">23 March 2022</a>
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language.

### Summary

People appear satisfied with the service and their representatives are complimentary about the care staff. Since the last inspection, the provider has appointed a new manager and several new team members. The care team is enthusiastic and dedicated to supporting people to achieve their outcomes. The provider understands the importance of further developing skills and knowledge around people's individual needs.

There are effective systems for monitoring the quality of the service and the responsible individual (RI) demonstrates consistent oversight of the care and support people receive. This is an improvement since the last inspection. Care staff feel well supported and have access to policies and procedures which are regularly updated. People's care and support needs are documented in detailed personal plans which fully inform care staff of a person's routines, and choices. The service recognises and values the importance of continuity of care for people and aims to sustain a stable workforce to meet the needs of those using the service.

## Well-being

Overall, people receive person-centred care and support and are involved in day-to-day decisions about the service they receive. The provider has effective admission procedures involving people, professionals, and representatives. Professionals told us the service keeps them well informed when people move into the home and would like regular updates to be maintained. The provider understands the importance of keeping others informed to ensure people's outcomes are consistently being met.

Detailed personal plans focus on what is important to people and they are invited to review the plan to include any changes to their care and support needs. Professionals and representatives can expect to be informed when reviews are being planned. Those who require additional support to make decisions have access to advocacy services. We found records relating to people's rights and choices detail their day-to-day decisions, such as attendance at medical appointments, activity levels and engagement with staff.

The provider applies for Deprivation of Liberty Safeguards (DoLs) and completes best interest decisions for people who require additional support to keep them safe. The provider understands their responsibility to inform the regulator of applications made to protect people. Staff told us they understand how to keep people safe and are confident in reporting concerns to the provider. Staff attend safeguarding training and have access to up-to-date policies relating to safeguarding and whistleblowing which are in line with current legislation.

People have contact with family and friends and visitors are welcome in the home. Some representatives told us staff ensure their family member is as well as they can be whilst some people have experienced a fluctuation in health and well-being. The provider understands their responsibilities to ensure all people receive consistency in care and support and staff are suitably skilled and knowledgeable about specific needs.

The environment meets the needs of people living in the home. On the day of the inspection people were taking part in activities of their choice. The provider is aware of their responsibilities to ensure the home continues to meet the needs of all people and for staff to provide meaningful and individualised support to keep people active and stimulated.

## Care and Support

People can expect continuity of care from a kind and compassionate care team. Information about the service is readily available to people and their families or representatives. The statement of purpose (SoP) sets out what people can expect from the service. The provider reviews the SoP on a regular basis to ensure information is current and accurate.

Staff follow thorough care documentation for each person living in the home. People contribute to their personal plan to have their say on how they are supported and voice their preferences. People are invited to review their plan on a regular basis, the inclusion of family members or representatives will strengthen future reviews. Staff consider the rights and choices of people, and the provider can demonstrate action taken when a person's health or well-being may be in decline. People attend medication reviews and routine health appointments with the support of staff. Staff complete informative records about any appointments attended and future appointments are planned for people.

We found most daily care records are fully completed, and essential information about people's health and wellbeing is appropriately shared between staff. People's right to decline some aspects of care and support or health appointments are documented, as are the follow up actions taken by the provider.

The management of people's medication is thorough. There are safe procedures for accepting incoming, storing, and administering medication. People's medication is administered by fully trained staff, a suitably qualified person regularly reviews staff competencies. There is a thorough medication policy in place.

People are offered a broad range of home cooked foods and have a choice of what they choose to eat and drink throughout the day. Staff encourage healthy choices but also acknowledge people's preferences. Care staff routinely monitor people's weight and keep a record when people do not want to take part.

Care staff have access to detailed and up to date specific guidance and risk assessments providing further information about a person's care and support. The provider understands the need for staff to have the opportunity to further develop their skills, knowledge and understanding of specific conditions to support purposeful outcomes for all people at the service. Visiting professionals and family members expressed to us this was an important point for them to feel assured staff are suitably skilled and knowledgeable.

## Environment

The home is well-maintained and decorated in a neutral but homely style. The environment supports the well-being of all people living there. On the day of the inspection, we found the home to be a calm and relaxing environment. The provider identifies areas of wear and tear around the home and makes repairs and redecoration where needed. Staff told us the provider is quick to resolve any maintenance issues in the home. The provider has taken prompt action when some equipment identified during the inspection required servicing. Confidential information is stored securely.

People's bedrooms are spacious and decorated with personal items, all are furnished with en-suite facilities suitable to meet their needs. We found most bedrooms to be clean and bedding freshly laundered. People are encouraged to take part in household tasks such as cleaning their rooms. There is a good standard of hygiene and infection control throughout the home and staff complete daily cleaning routines. Weekly and monthly monitoring ensure systems such as water temperatures, fridge and freezer temperatures and medications storage temperatures are within a safe range.

Records relating to fire safety and maintenance of equipment are up to date and all people have a current personal evacuation plan. Staff receive fire safety training and further fire warden training is planned for staff who require it. The staff team complete fire evacuations on a regular basis and the provider is seeking guidance from Health and Safety Executive resources on best practice for recording fire drills.

On the day of the inspection people chose to spend most of their time relaxing in their bedrooms or visiting the local community. However, we observed people enjoying the enclosed patio garden, and communal lounge to watch television. The garden offers people a safe and pleasant outdoor space. Staff told us they have interesting ideas to enhance the garden with plants to offer people a more sensory experience and provide them with the opportunity to take part in gardening activities.

There are effective procedures in place to monitor the environment to keep people safe. Items that could cause harm to people are securely stored. The manager has oversight of the day-to-day operation of the service and the RI completes environmental audits during formal visits to the home. The RI speaks with people during the visit to seek their views about the home and opinions about what would make the environment better for them, with one person suggesting a covered smoking area.

## Leadership and Management

Since the last inspection the provider has taken positive steps to appoint a manager dedicated to this service. This is positively impacting on staff continuity and the stability of the team. The provider recognises the impact on people using the service when established care staff choose to leave and understands their responsibility to provide continuity of care to people by suitably skilled staff. Care staff consistently told us they feel listened to and valued, and their training and development is a strength of working for the provider.

We found safe recruitment procedures in place for most staff employed at the service. The provider ensures all staff have a current Disclosure and Barring Service (DBS) check and most staff are registered with Social Care Wales, the workforce regulator. Some staff have a recognised qualification and others are waiting to start their studies. We found staff numbers sufficient on the day of the inspection and the use of agency staff has significantly reduced.

All staff receive timely supervision, and the manager is receiving strong support from the RI to embed and develop the skills of the staff team. There is effective oversight of staff training, competencies, personal development, and annual appraisals. Gaps in core training are promptly addressed.

Systems for electronic record keeping, auditing, and monitoring of the service are consistently good, and this is an improvement since the inspection. The RI regularly visits the home to speak with people, staff, and manager and to sample records for quality assurance. The RI understands the value of family input for future visits. Stakeholder's views and opinions on the service inform the quality care review. There is a clear organisational structure. The RI updates the provider of how the service is performing. People can be assured the quality of the service is being effectively monitored by the RI and remedial action plans inform the provider of anything that is highlighted when seeking people's feedback.

There is a culture of effective and positive teamwork and staff consistently told us achieving the best outcomes for people living in the home is at the heart of the service. Throughout the inspection we found the RI to be open, honest, and keen to develop the service based on the findings of the inspection and the feedback from stakeholders.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
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N/A	No non-compliance of this type was identified at this inspection	N/A
8	Several management and oversight systems in place did not identify the issues noted during our inspection	Achieved

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