



Inspection Report on

Meifod & Vicarage Court

**Garden Road
Wrexham
LL14 2EN**

Date Inspection Completed

14/07/2022

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About Meifod & Vicarage Court

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Llewelyn Healthcare Group Ltd
Registered places	40
Language of the service	English
Previous Care Inspectorate Wales inspection	22 August 2019
Does this service provide the Welsh Language active offer?	Yes. 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

People are happy with the care and support they receive from well-trained care workers. Care staff are knowledgeable, respectful, caring and are available in sufficient numbers to meet people's needs. People receive the care and support they require. There are opportunities for people to take part in regular activities and have a choice in the food they eat at mealtimes. There are substantial stocks of food in the kitchen and people can get food at any time of the day. Managers have effective oversight of the service and there is a comprehensive range of management audits in place. The Responsible Individual (RI) visits and formally reviews the home regularly. The views of people living and working at Meifod and Vicarage are taken seriously. There is clear evidence of on-going investment in the home.

Well-being

People have control over their day-to-day lives. People participate in choosing the care and support they receive, and this is reflected in care documentation which is reviewed regularly with input from people if they wish. People's personal plans are up to date and are an accurate reflection of the person, their requirements, and the outcomes they wish to achieve.

People are happy with the range of activities available to them and have good relationships with care staff. The rapport between care workers and people is respectfully familiar. People can express their views and the service is accommodating to people's preferences.

People are protected from abuse and neglect. Care workers and senior managers work well with other health care professionals. Risk assessments and personal plans are in place, accurate and kept up to date. Risk assessments are also reviewed at appropriate intervals. Training records and our discussions with care workers show they are trained in and understand safeguarding of adults at risk of abuse. People confirm they get the support they require. Other areas of mandatory training are also up to date. Policies and procedures are in place to protect people and staff recruitment processes are robust. We saw protective measures in place due to the pandemic including additional cleaning being undertaken. We saw visitors being tested for Covid 19 before they could enter the home.

The service supports people to achieve their outcomes. New lifts and washing machines have been purchased and shows continued investment in the home. The home is clean, on a hot day cool and comfortable, and bedrooms reflect individuality.

Care and Support

People can be confident care workers have an accurate and up to date plan for how their care is to be provided. People are provided with the quality of care and support they need, which, if they wish to be, they are consulted about. People we spoke with tell us they receive appropriate care and support which meets their needs. Pre-assessments, personal plans and risk assessments accurately reflect people's needs. Records give care staff detailed instruction on how to support the person and are reviewed at appropriate intervals. These documents are specific to the person and the risk associated with the individual and focus on the outcomes for the person. Managers and care staff tell us care workers are advised of any changes to people's care and support requirements in a timely fashion.

People receive personalised care and support. Meal options, daily routines, and the activities they can be involved in evidence people living at Meifod and Vicarage have choice in the lives they lead. We saw food stocks are plentiful and people we spoke with said the food was good and they get enough to eat and drink. People have choice in what they can eat and can ask for something to eat or drink at any time. Most people we spoke with said there are enough activities going on and we saw people engage in activities they clearly enjoy. People tell us they can get up and go to bed whenever they want. People's personal plans reflect information provided by professionals which is also available on people's files. We saw good care staff interaction with people throughout the day. We witnessed a teatime meal where there was good staff interaction with people, with care workers sitting and helping people with their meals. However, we observed a mealtime where care workers seemed task orientated, with little meaningful conversations taking place between care staff and people. People we spoke with said staff were respectful and treated them with dignity.

People are safeguarded from harm and neglect. We saw evidence in people's files healthcare professionals are contacted in a timely fashion if required. We spoke with health care professionals who are complimentary about the service and the way any issues are dealt with by care staff and managers. One professional told us of the improvement in the person they support whilst at the home, whilst another told us the homes end of life support "*Is phenomenal.*" We also viewed kitchen records which show people's dietary requirements are being followed. The provider is using a specialist catering firm which provides pre-prepared meals to suit people's dietary needs.

Medication administration is safe and ensures the protection of people's health and well-being. The recording and dispensing of medication by appropriately trained staff is carried out. Medication is stored appropriately. We also saw evidence regular medication audits are undertaken by managers.

Environment

The service provider ensures the environment supports people to achieve their personal outcomes. The layout of the home, together with the provision of aids and adaptations ensures the environment promotes people's independence. We viewed some people's rooms which evidence people could personalise them according to their wishes. People have their photograph on their door and memory boxes on the wall outside their room. This helps people with their sense of orientation and belonging. We saw people can walk around the home as they chose, freely and securely.

Good arrangements are in place to ensure risks to people's health and safety are identified and mitigated. We saw evidence appropriate checks and tests are being undertaken for visitors upon arrival. The home is clean, and cleaning is an ongoing process throughout the day. Call bells are in operation to alert care staff to when individuals needed assistance, these are not intrusive. We saw maintenance records show audits of the environment are conducted to identify and address problems and servicing and testing of equipment is carried out regularly. However, the five-year electrical test was out of date, senior managers have advised us a date for this to be completed has been arranged. We also saw evidence of recent investment in the home, with new lifts having been ordered and washing machines having recently been purchased, this investment is ongoing.

Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service and ensure high quality care and support is provided. Records show the RI visits the home and conducts regular audits of the service. A quality assurance review is undertaken to ensure people are satisfied with the service. We saw the RI undertakes their reviews of the service in line with regulations. We saw senior managers have a comprehensive range of audits in place to ensure the home is run effectively. There are a range of policies, such as safeguarding and challenging behaviour, which staff must familiarise themselves with to make sure the service is run safely and as intended

People are supported by trained care staff, safely employed in sufficient numbers. We saw the manager carries out all the required checks to vet people before they are employed. Training records show care workers are equipped with the knowledge they need to meet people's needs which was confirmed by care staff. People we spoke to confirm they get the care and support they require. One person we spoke to told us they get *"The best support"* and staff were *"Very kind."* Care workers and people we spoke with confirm there are enough staff on duty, this was confirmed by records viewed. Care workers confirm senior managers take issues seriously, with one member of care staff advising us *"Managers are really responsive, can phone senior managers whenever you want."*

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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Date Published 30/08/2022