



Inspection Report on

Coed Mor Residential Care Home

**Coed Mor Residential Home
Groes Lwyd
Abergele
LL22 7TA**

Date Inspection Completed

28 October 2021

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About Coed Mor Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	SI Medicare LTD
Registered places	19
Language of the service	English
Previous Care Inspectorate Wales inspection	This was the first inspection since the registration of SI Medicare Ltd
Does this service provide the Welsh Language active offer?	Working towards

Summary

Coed Mor provides care and support in a warm and friendly environment. The premises are safe and accessible, and offer a homely, improving environment.

Staff know people well, interact in a kind and caring manner and provide support when and how people like it. Care files detail how people like their individual needs met. Activities at the service are regular and varied to ensure people's physical and emotional well-being. People are kept safe through good safety measures, including infection control.

There is good management oversight of the service. The Responsible Individual (RI) visits the home on a regular basis and talks to people who live in the home and staff to obtain feedback about the service. Staff feel supported by the manager and receive supervision. There is training in place to support staff development and help them carry out their work safely and effectively.

Well-being

People are well supported to have control over day to day life. Their care and support plans detail their individual needs and preferences. They can choose when they would like to get up and where they spend their time. People can voice their opinions on matters such as food menus, activities and décor as the cook and the manager regularly take time to talk to people about their preferences. They can also express their opinions in regular resident meetings. People told us they feel listened to by everyone in the service and feel they live somewhere that is improving.

People's physical and mental health are promoted. There are regular activities, which people can choose to join in with and make suggestions as to what they would like to do. People's risk of harm or abuse is well managed. Staff receive regular training and updates on safeguarding, and there is an up to date policy that is easily accessible. Staff understand their responsibilities to report any concerns. Everyone has a personal emergency evacuation plan (PEEP). There are good systems in place to manage infection control. People we spoke with told us they feel safe in Coed Mor.

People have, and are supported to maintain, good relationships with others. During the Covid 19 pandemic people have been supported via a range of means to keep in contact with those who are important to them.

Care and Support

People receive care and support that meets their individual needs. People's needs are assessed and planned for before they arrive at the service. Personal plans we saw are thorough and demonstrate people's individual preferences are known and understood. Care and support plans are reviewed, as required, to ensure they are up to date. People told us they are happy with their care, and the support staff are kind.

People receive good support from friendly and respectful staff. People receive support as described in their care plans. It is clear that people can follow their own routines. Staff are kind and respectful and provide care in a relaxed manner. People told us they like the food, can choose alternatives if they don't like what is on offer and are regularly offered drinks and snacks.

People have access to a range of healthcare support. People are supported to access a wide range of healthcare professionals, including GP's, nurse practitioners and community psychiatric nurses. The manager monitors falls and analyses the information to see if any further preventative actions can be identified. A range of activities to support people's mental well-being, for example, quizzes, arts and crafts, armchair exercise, bingo and entertainers are provided. The service has invested in a large 'SMART' TV and age appropriate applications to boost their range of activities on offer, including 'armchair travel'. People receive the medication they require. Staff competency is checked before they can administer medication and the manager maintains oversight of their practice.

People's safety is well maintained. The service has good systems in place to ensure people are safeguarded from abuse, through regular training and easily accessible policies. Infection control systems are good, and there is a wide range of measures in use to ensure people are safe from Covid 19. This includes testing visitors to the home, as well as good use of personal protective equipment (PPE) by staff and visitors.

Environment

The service provides people with care and support in a homely environment. Facilities and equipment promote personal outcomes effectively. It is accessible and safe with appropriate security measures in place. The general environment is warm, welcoming and clean. Redecoration and refurbishment in some areas has taken place, and more work is planned. People are able to choose where to spend their time, be it in their own personalised rooms or the lounge, which has been divided into three areas so people can choose to be with others doing activities or in a more quiet space.

Health and safety of the home is well managed. The fire risk assessment by an independent suitably qualified person has been arranged for November 2021. Regular fire systems checks are carried out. The home has a Food Hygiene rating of 5, the highest score possible, and the recently appointed cook continues to make improvements to the kitchen hygiene processes. The service has employed a part time handyman so any repairs and ongoing maintenance can be done speedily.

Leadership and Management

People can be confident that the service has systems in place to monitor the smooth operation of the service. The RI is regularly in the home and speaks with people who live in the home and staff. There is a range of audits to ensure all aspects of care are monitored and reviewed. Quality of care reports have been completed as required, and provide good evidence the quality of the service and improvement plans.

People are supported by a staff team who have the appropriate knowledge and skills. Where new staff have been employed, safe recruitment practices are followed. The service ensures that staff training is up to date, and where some have lapsed, due to the Covid 19 pandemic, are working to rectify this. Staff are being supported to develop their knowledge, by appointing champions in certain care aspects and receiving extra training to support these roles. Staff receive regular supervision which ensures they feel supported and information about additional wellbeing resources are shared with them regularly. Staff told us they feel well supported by the manager and the RI and feel they all work well as a team. Staff appear motivated and caring towards 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	N/A

	this inspection	
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