



## Inspection Report on

**Mayflower Care Home**

**Mayflower Care Home  
Alltwn Pontardawe  
Swansea  
SA8 3JG**

## **Date Inspection Completed**

31/01/2024

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## About Mayflower Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Mayflower Care Limited
Registered places	43
Language of the service	English
Previous Care Inspectorate Wales inspection	16 July 2022
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 and their relatives are very happy with the care and support provided at the service. They live in a comfortable, welcoming and homely environment which is warm, clean and suitable to meet their needs. The service has invested in recent years in upgrading the internal and external areas of the home and continues to do so. There is good information available for staff to understand how to best meet people's care and support needs. People have personal plans in place which are reviewed regularly. There is a Responsible Individual (RI) in place and a manager registered with Social Care Wales.

Staff are available in sufficient numbers and have a mix of skills to adequately provide care and support to people. Care workers are knowledgeable, respectful and caring. Safety equipment is in place and health referrals are made when necessary to promote people's health and well-being. There are opportunities for people to take part in activities at home and in the local community but this could be strengthened.

There is an effective and visible management team at the service. The service provider has developed systems to enable them to capture people's views and put checks and processes in place to keep service delivery under constant review. This feedback from people is then utilised for improvements in the service.

## Well-being

People and their relatives are very happy with the care and support provided. There is excellent information available for staff to understand how to best meet people's care and support needs. People told us they get on well with staff and commented, *"I love it here, I love my view, I changed my bedroom recently and I was able to choose which room I wanted."* A relative commented *"They are very caring and understanding. We're happy with staff."* Records show people are offered choices to make everyday decisions. The responsible individual (RI) regularly speaks with people who live at the service and their families about what is important and how to best support them and this was supported by documentation seen by us.

People are protected from abuse and harm. Mayflower Care Home has an appropriate safeguarding policy in place and staff receive training in the safeguarding of adults. The Service Manager has a good understanding of the safeguarding requirements and understands when a safeguarding referral needs to be made to the Local Authority. Mayflower is a welcoming and very well-maintained service and there are robust checks in place to ensure it remains safe, clean and homely.

People get the right care and support. Records show that timely provider assessments are completed and referrals are made to a variety of healthcare professionals such as psychiatrists and physiotherapists. This is confirmed by comments from visiting professionals who told us they are satisfied with the care at Mayflower. They commented *"Things have improved a lot since they've had a new manager. I don't have any concerns at all."*

People can do the things that matter to them when they want to do them. There are a range of activities available which are meaningful to people. Throughout our visit we observed activities taking place facilitated by care workers. People told us they enjoy taking part in a variety of activities such as going out for a coffee, attending local attractions and local clubs. Relatives told us their family member is encouraged to stay active and to do as much as they can for themselves. A relative commented *"She likes arts and crafts; always has something she has made."*

People live in suitable accommodation, which supports and encourages their well-being. People's bedrooms contain personalised items of their choice and are suitably furnished. They have facilities which encourage their independence. The building is very well-maintained and safety checks are completed when required. The RI told us of the upgrade of the Broadband connection to the home to improve performance of the electronic record system in use.

## Care and Support

People are supported well with personal plans and risk assessments that reflect their needs. A sample of personal plans viewed contain detailed information regarding personal interests, likes and dislikes. We saw that personal plans are developed following discussions with people and their family. Personal plans and risk assessments are regularly reviewed in consultation with people wherever possible. We saw that care logs did not always sufficiently record the amount of fluid provided by staff and discussed this with the manager who agreed to address this. We also discussed with the manager the continued need to strengthen people's community involvement and participation which she agreed to review.

We saw staff contributing to the well-being of people through sensitive and warm interactions. People we spoke with told us "*Staff know what I want and like.*" People told us that "*staff are very helpful and friendly.*" We observed people at lunchtime enjoying a meal. Support was provided by care workers in a respectful and dignified manner. All interactions seen were positive and people appeared relaxed as they interacted with care staff. At present there is not a daily menu on display but the manager informed us of plans to have one on display. Menus are currently kept in the kitchen and kitchen staff inform people of the menu choices on a day to day basis. Kitchen staff showed us a dietary matrix which has information about people's dietary requirements and preferences. The dining area is spacious, and people are able to comfortably eat at dining tables or at cantilever tables. We were informed that people can eat in their rooms if they prefer.

People are supported to access healthcare and other services to maintain their ongoing health. Personal plans document people's medical requirements and details of relevant healthcare professionals. Documentation viewed details visits with a wide range of healthcare professionals. We spoke with a visiting professional who spoke highly of the service saying, "*I have good communication with the service, they always take on board my suggestions and will implement changes if things aren't in place.*"

The service has safe systems for medicines management. There is an appropriate medication policy and procedure in place for medicines management which is reviewed annually. Medication is stored appropriately in a secure locked room. As and when required medication (PRN) is administered appropriately in accordance with PRN guidelines. Medication room temperature is checked daily to ensure medication is stored at the correct temperature.

## Environment

The accommodation is welcoming and homely and benefits from good quality decor and furnishings. There is a large communal lounge/dining room area on the ground floor and a bar and cinema room just off this. Corridors, doorways and lifts are well lit with clear unobstructed and clean flooring. There are pictures of the local sports memorabilia on display which enhances the feeling of belonging to the community. There is also a hair dressing room for people to enjoy having their hair done and a pamper session away from the living area of the home. There is also a large second lounge dining area on the third floor which was unused at the time of our visit. The environment is free of clutter throughout. We saw people sitting in the dining room and lounge on the ground floor and sitting in the comfort of their bedrooms. We saw that bedrooms were homely and personalised with relevant adaptations and equipment where necessary to meet people's needs.

The external grounds have been improved significantly since the last inspection with an impressive upgrade to the front garden with clear unobstructed pathways, seating, tables, water features and goldfish pond. One relative commented "*We enjoy seeing my mum in the garden when the weather permits.*" The garden can be accessed independently and/or with support if required. Other areas of the outside grounds have been improved upon such as removal of storage containers around the back area of the home and secure fencing around the property.

There is a system of monitoring and auditing, which supports a planned maintenance schedule and renewal programme for the fabric and decoration of the premises. This is managed by the staff at the home under the guidance of the manager and RI. The sample of bedrooms we viewed have facilities and equipment which are suitable for the individual.

The service provider has procedures in place to identify and mitigate risks to health and safety. The oversight of health and safety is in place with regular audits of the environment taking place. The maintenance person carries out daily checks within the service to maintain the safety of people. Records show equipment is regularly serviced to make sure people remain safe. People's personal records are held securely and access to the home is monitored by staff.

Laundry is managed appropriately and is well organised. All laundry equipment is in working order. There is an area with shelving for linen storage and ironing facilities. There is an organised storage area for household waste and clinical waste bins. The storage of substances which have the potential to cause harm was safe because we found that materials used for cleaning were stored in an appropriate locked cupboard.

## Leadership and Management

The service provider has governance arrangements in place to support the smooth operation of the service. Measures for the oversight of the service are in place, such as systems for care planning, monitoring, and review to enable people to achieve their personal outcomes. The service is provided in line with the objectives of the Statement of Purpose, which is regularly reviewed. We saw Policies and procedures are in place and reviewed regularly.

People can be assured the service provider and the management team monitor the quality of the service they provide to a high standard. The RI visits the home regularly and meets with people and staff. The latest quality monitoring report showed people's feedback. Recommendations for improvements are included and implemented effectively. The RI has excellent oversight of the service and the manager conducts quality assurance monitoring to ensure a high standard of quality care is delivered. However, we discussed with the manager the need to review the quality assurance policy to ensure it clearly states what audits need to be carried out regarding care.

The service provider has extensive oversight of the financial arrangements and investment in the service. The RI assured us the service is financially sustainable to support people to be safe and achieve their personal outcomes. The RI told us of investment such as *"Maintaining the recent environmental improvements and supporting staff recruitment and also developing staff accommodation to support this."*

There are enough staff on duty to safely support and care for people. Records show there has been a turnover of staff recently but are able to maintain a stable and consistent team with a mixture of experienced and new staff available. This was seen during our inspection. There is some use of agency staff to enhance the numbers of staff. The RI told us that this was being reviewed to reduce the numbers of agency staff used. In order to maintain staff levels, the service provider has recruited a number of agency staff who are provided with accommodation whilst working at Mayflower. We discussed and agreed with the RI the need to ensure that agency staff are subject to the same checks as permanently employed staff and have evidence to demonstrate that the checks have been undertaken. We also discussed the need to ensure that agency staff are supported with an induction to the service and arrangements for supervision. Since the inspection, the RI has developed a process for oversight of agency workers employed at the service. People living at the home told us *"They're all lovely to me"* and a relative commented *"Can't fault them, Fabulous, they look after her well."*

### 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
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