

Inspection Report on

Coed Craig

Coed Craig Methodist Home 35 Tan Y Bryn Road Rhos On Sea Colwyn Bay LL28 4AD

Date Inspection Completed

Date_Last_Inspection_Completed_29 March 2020



About Coed Craig

| Type of care provided | Care Home Service Adults Without Nursing |
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| Registered Provider | Methodist Homes |
| Registered places | 45 |
| Language of the service | English |
| Previous Care Inspectorate Wales inspection | 29 March 2020 |
| Does this service provide the Welsh Language active offer? | This is a service that is working towards providing an 'Active Offer'. |

Summary

People are given opportunities to get involved with activities which enhance their well-being. Care staff are kind and provide good quality care. Management are supportive and ensure care staff receive appropriate support and training. The provider has processes in place for oversight of the care being provided; although they should ensure thorough oversight to ensure communication between care staff to professionals is consistent. Appropriate referrals are made to health care professionals. They have ensured people's safety by taking steps to input infection control measures.

Well-being

People have control over their daily routines; they are offered a choice of varied activities to enhance their well-being, including music therapy. We saw people enjoying getting involved and we observed the positive impact this has. Care records show, music therapy is having a positive impact on people's well-being and behaviour. We found people to be at ease with care staff, who are encouraging and kind in their approach to people.

People are encouraged and supported to be as healthy as they can be. We found appropriate and timely referrals are made to health care professionals and care records demonstrate this. However, we found communication between care staff, management and visiting professionals needs to be clearer and requires improvement. For example, we evidenced communication during handover of care is not clear if/when care needs change. We discussed this with the provider who has taken steps to ensure communication is more efficient. People told us they are happy with the care they receive. One person told us "I am very happy here and the staff are very helpful". We found people are given a variety of healthy menus for each meal on a daily basis. People are offered the 'dining experience' and their views are gathered about their choices before each meal. People told us they enjoy the food.

Steps are taken to safeguard people. Care records show risk assessments are in place when risks are identified. We found these are reviewed and updated when care needs change. Three care staff we spoke with told us they know what to do if they are concerned about someone. However, we also found care staff need to be more familiar with people's individual care needs. Staff files we viewed showed care staff receive appropriate training in safeguarding, within required timeframes. Records show appropriate action is taken to report and refer concerns. We viewed the service safeguarding policy and procedures, which are up to date and in line with current guidance and legislation.

People are encouraged to get involved in a variety of activities, including outings, games, crafts and themed events or celebrations. The activities coordinator works closely with the music therapist and care staff to encourage people to participate if they want to. Care staff receive appropriate and varied training within timescales. We viewed the training matrix which evidenced this. Two care staff told us they have recently attended training including oral care, moving and handling and falls prevention. Supervision records demonstrate, management support care staff to attend and receive up to date training. The environment is spacious with several communal areas where people can get together.

We found people are content and happy. People told us they feel at home in the service and are happy with the care they receive. We observed people laughing and joking with each other and with care staff. Care staff are responsive to people's needs. However, people would benefit if care staff communicated people's care needs clearly to ensure people's health needs are met. We found the environment is safe. People's bedrooms are

| clean and tidy and filled with people's personal items. We found arrangements in place for various and required checks and maintenance are undertaken. |
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Care and Support

The service provider ensures people's care records are up to date, detailed and in line with their care needs. The care records we viewed show care staff update care records daily and when care needs change. We observed care staff updating records while they were with people. Care records show appropriate and timely referrals are made to health care professionals to ensure people receive the care they need. However, communication to visiting professionals, about changes in care needs requires improvement. Three professionals we spoke with evidenced this. One professional told us "care staff record change in needs, but need to ensure this information is also verbally communicated with relevant professionals". We have shared this with the provider who has taken steps to improve this aspect of care.

People receive the care they need. The service provided is planned via consultation and feedback from people, their family and professionals involved. We spoke with three people during our visit who told us they were happy with the care they receive. One relative told us they were happy with the care their relative receives. We saw people respond positively towards care staff. We found people have the same care staff linked to their care needs, which means care staff should know people well. We found signatures by people and care staff within these records. Individual risk assessments are undertaken where needed; we found these are clearly recorded, detailed and consider a range of care needs including individual routines, dietary needs, choices and mobility, oral care, skin care, and falls management.

People are supported to access the health care they need. We evidenced health care professionals visiting people on the day we inspected. Care records show health care professionals are involved in the planning and review of care. This demonstrats information and advice from health care professionals is included in the care provided. We observed oral hygiene guidance is adhered to, and care staff have received training in this area. However, we found communication between care staff during handovers should be more efficient to ensure clarity and consistency in care.

Infection control and prevention is maintained throughout the service. We viewed the service policies and procedures, which are up to date and in line with current guidance and legislation. We found management ensure care staff are updated on any changes to guidance; we evidenced this in a variety of documentation including service policies and procedures team meeting minutes, supervision and memo's to care staff. We witnessed care staff wear and maintain Personal Protective Equipment (PPE) correctly and appropriately. We found there are effective cleaning and hygiene routines in place. Thorough oversight of the cleaning processes by the manager and provider would be beneficial. We discussed this with the provider who has taken steps to improve in this

area.

We found service medicine management systems are safe and effective. Senior care staff are responsible for administering medication. We evidenced they have received appropriate training and competencies to administer medication effectively. Senior care staff told us they felt confident in undertaking this task. The Medicine Administration Records (MAR) we reviewed are accurate and are monitored by the manager, senior management and external services. We found the medication is organised, stored and locked safely. The service medication policy and procedure are up to date and aligned with current guidance and legislation.

Environment

We found the service to be homely and tidy. People are comfortable in their surroundings; we saw people enjoying their time in the communal areas. Management promote infection control measures. We found all heavy furnishings are attached to walls. We found certain communal areas including a seating area on the outside rear of the service required cleaning. Effective cleaning routines need to be reviewed by management. We discussed this with the manager who took steps to review the cleaning processes and oversight of this.

On entering the service, we found the entrance to the service was secure. We found safe infection control measures were taken; these included checks for infection and handwashing. Maintenance records show electrical, lighting and fire safety equipment are tested within required timeframes. We found people have individual mobility aids and hoists. We evidenced these are checked and monitored as required. There are several large communal living areas both upstairs and downstairs; people gathered for music therapy and we saw people enjoying being there.

Leadership and Management

Management have established arrangements to oversee the care provided. Care records show they are reviewed, checked and overseen by management. Care staff told us they enjoy their caring role and feel supported and receive regular and ongoing formal support. We found the support care staff receive is provided within required time frames. Care staff files evidenced they receive regular support. Service policies and procedures are regularly reviewed, up-dated and in line with current guidance and regulation.

There are systems in place to review and monitor the quality of the care provided. We evidenced ongoing systems in place, where the provider has taken steps to receive feedback from families and provide feedback and guidance to plan improvements and developments. We viewed documentation and record information gathered by the provider, which demonstrated an efficient system of review. Although there is regular communication between the provider and manager, we found there needs to be more efficient communication between the manager, seniors and care staff to ensure any change, developments or professional advice about care can be clearly established. We discussed this with the provider and manager who explained what actions they will take to improve this aspect. Management are efficient in taking action to improve the service.

The provider has efficient ongoing financial sustainability and oversight of the service. We found there are several plans to improve the service environment. The service continues to invest in ensuring service insurance, policies and procedures are up to date and in line with current legislation. The service has an established hierarchy of management to ensure the smooth operation of the service. We found there is sufficient stock of food, including fresh food. Care staff are established and there are ongoing recruitment processes in place. We found care staff are encouraged to attend a variety of training.

There are measures in place to ensure efficient staffing levels. We found sufficient staffing on the day we visited the service. We viewed the rotas for the last four months which demonstrated ongoing sufficient staffing. We spoke with four care staff who told us they felt there were always enough care staff present to be able to full fill their role and focus on the people they care for. We found care staff are familiar with the service policies and procedures which underlie the training attended by care staff. We evidenced care staff signatures when they had reviewed the procedures. We viewed information provided to care staff and supervision records which referred to the service policies, procedures and upcoming training.

The provider and manager are efficient in notifying appropriate information about incidents which may affect people's well-being. The information sent to regulatory bodies including Local Authority (LA) and Health professionals are timely. We also find notifications sent to Care Inspectorate Wales (CIW) are appropriate and timely.

| Areas for improvement and action at, or since, the previous i | nspection. Not Achieved |
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| None | |
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| Areas where priority action is required | |
| None | |
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| Areas where improvement is required | |

None

Areas for improvement and action at, or since, the previous inspection. Achieved

Date Published 13/09/2021