

# Inspection Report on

Maes Y Vaynor

Mold

## **Date Inspection Completed**

04/07/2024



### **About Maes Y Vaynor**

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Coed Du Hall Ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	21 April 2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

#### **Summary**

People are supported by trained staff who are enthusiastic and caring in their work. The individually arranged activities and events are particularly enjoyed with everyone happy they are doing things that interest them. Staff enjoy working in the home and feel well supported by the manager; they describe a sense of 'family', and it is clear they know the people they support well. Care is person centred and helps people achieve their goals. The effectiveness of care provided is evaluated every month so people can express their views on progress made and review their goals as they wish. People are supported to access any health service they need, and their well-being is closely monitored. People enjoy living in what is a large family home with plenty of space to spend their time doing what they want to do, whether that be watching the smart television, listening to music, or engaging in games and crafts. Large gardens allow for outdoor socialising. The provider of the service is kept well informed of how the service is running as the responsible individual visits frequently and can feedback progress and challenges. They know what is working well and where improvements could be made.

#### Well-being

People have control over their day-to-day life. They are asked about their preferred activities and events they want to attend and staff source opportunities to do these. They shop for their preferred groceries and plan their own meals; they get up and go to bed when they choose. There are lots of opportunities to contribute to decisions that affect their life, and to express their views on their home and what happens here. People are respected as individuals, their needs and preferences catered for.

People are happy and do things that make them happy. Monthly evaluations with keyworkers provide opportunities for people to express what they would like to achieve in the month and explore ways of achieving this with their keyworker. Any problems are explored, and actions put in place to resolve them. They get the right support when they need it as the service is quick to seek advice and guidance from their own experts and other external agents.

People are safe and protected from abuse and neglect and they know how to make their concerns known. All staff are trained in matters relating safeguarding, such as what is abuse and when to raise concerns and they adhere to the service's written policies and procedures. The safeguarding authority is alerted quickly if there are any related well being issues that need to be explored. People living in the home feel comfortable expressing their views to staff and the manager at any time.

People are supported to learn and develop to their full potential and do the things that matter to them. Weekly planners help people structure their week so they can accomplish things that are important to them and that promote their independence skills. People have a budget, plan their meals and do their shopping. They contribute to the upkeep of their home keeping their spaces tidy and clean. People enjoy the facilities and events in their community; they make time to meet up with friends and relatives. Keyworkers work to establish what is important to each person, their relationships and interests, and then plan how this will be achieved.

The home is laid out as a family home with ample communal space, bedrooms, bathrooms and outside space. People have plenty of room in the home so can make choices about where to spend their time. The home is in a town with lots of facilities, shops and cafes to enjoy.

#### **Care and Support**

The service has arrangements in place to ensure there is a thorough assessment of people's needs and wishes prior to admission in the home. These assessments evaluate the resources required and resources available to meet the person's needs, and carefully consider whether the service can support the person achieve their outcomes. There is a twelve week in house assessment period during which people's well-being and compatibility with others is closely monitored. Staff are guided by policies on positive behaviour support that help them understand people's challenges and support them through this transition effectively. We saw resources can be quickly adjusted to suit people's changing needs.

There is an up to date and accurate plan for how care and support is to be provided. A key worker is assigned to each person so they can spend time getting to know them well. Records of monthly meetings show how aspirations are explored and action plans devised to help people achieve these. It is clear people are at the heart of these discussions; plans are person centred and capture the current views of the person. Some outcomes change as people want to follow specific activities or attend certain events and plan trips. We saw photographs that evidence when outcomes have been met and people have done the things they planned.

Individuals are provided with care and support through a service designed in consultation with them. Comprehensive plans outline all elements of care and support required and associated risks are also assessed and mitigated. People's unique and specific needs are identified through careful information gathering from the everyone involved with the person. One person told us they are 'treated well and feel that they (staff) like her a lot. She enjoys doing things for herself and says, 'I have full choice'. They enjoy their time with their keyworkers and feel they are listened to, their views respected and concerns taken seriously.

Medication records are kept helping ensure safe practices and accurate administration. A schedule of audits means these and other records are audited routinely, for accuracy and completeness; the RI is in the process of strengthening these arrangements, so they always continue in any event. One member of staff is trained to check staff competence in managing medications and has completed these checks for all staff. All staff with responsibility for administering medication have been trained and are due to attend further face to face training on the subject.

#### **Environment**

Care and support are provided in an environment that helps people achieve their outcomes. The home is situated in a town so people can walk to the shops, use the local leisure facilities and visit local cafes and restaurants. People living at Maes Y Vaynor enjoy a spacious, homely environment with plenty of communal rooms and personalised bedrooms. They prepare meals in the kitchen if they wish; they spend time in the garden where there is plenty of room to socialise with friends and other visitors. The lounges have smart televisions so people can watch favourite programmes and listen to music on demand. Bedrooms are bright and comfortable with modern, quality furniture, the provider invests in the environment to make it a home people are proud to live in. This is a large family home, in which everyone can find space to do what they want.

The service provider identifies and mitigates risks to health and safety. There is a planned maintenance schedule so management can keep track of safety checks and make sure they are all in date. We saw certificates and other evidence of safety checks on electrical installation, gas safety, portable appliance (PAT) tests, fire risk assessment, infection prevention and control and routine inhouse checks of various fire safety equipment and alarms. The service arranges it's own health and safety visit following which a report is completed. We saw this is very thorough, confirming areas of full compliance and where any improvements could be made. Staff support people living in the home to keep it clean and tidy.

#### **Leadership and Management**

The service provider has governance arrangements in place to support the smooth operation of the service. The manager is supported by the RI who frequently visits the home and is always available to respond to any queries. The service has just appointed a senior support staff who is very experienced in medication practices and who will be responsible for ensuring all staff are competency checked and up to date with their training. The RI is very familiar with the people living in the home; they know how the service is supporting everyone to achieve their outcomes and any challenges they are facing. The manager feels well supported by the RI.

The RI has good oversight of the service because of their frequent visits and close support of the manager. Every three months, the RI competes a formal, recorded visit of the home during which they conduct audits to check records, inspect the home and speak with staff and people living here to seek their views. The RI completes biannual quality of care reviews, analysing the information they have collated through the year, including the responses to the annual satisfaction questionnaires and they complete a report of their findings. They know what is working well and where improvements need to be made.

People are supported by appropriate numbers of staff who have been thoroughly vetted prior to commencing work at the home. They have been inducted and trained in a wide range of relevant topics to meet the needs of people living in the home, most of which is mandatory. Additional training is also sought and provided to inform staff about specific individual mental, emotional and physical needs. They have a good understanding of people's experiences and challenges they may face. Staff told us how they enjoy working in the home; they describe a sense of 'family' and express enthusiasm, kindness and care for the people they support. They value the 'hands on' approach of the manager and their willingness to listen and support them.

The provider is keen to invest in the service to be sure people are in the right place and have everything they need to achieve their outcomes. They fund the 'therapeutic earnings' people are given every week for following their self-development plans and agreed daily routines. The RI and the manager confirmed the provider provides funding quickly when it is requested, including for social fun events, and it is clear the building is being maintained to a good standard, and with care to keep its characteristics and original features.

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 this	N/A
	inspection	

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