



## Inspection Report on

**Maes-y-felin Care Home LTD**

**MAESYFELIN CARE HOME  
DREFACH  
LLANYBYDDER  
SA40 9YB**

## **Date Inspection Completed**

17/01/2020

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## **Description of the service**

Maes Y Felin is situated in the village of Drefach, it has ample parking and well maintained grounds. The service provides care and accommodation for up to 19 people.

The service provider is Maes Y Felin Care Home Limited. Nalini Parmar is the responsible individual (RI) overseeing the service. There is a manager who is registered with Social Care Wales, supported by a deputy manager and a senior team.

## **Summary of our findings**

### **1. Overall assessment**

People are able to enjoy a high quality of life as a result of a well organised service. The care and support provided at Maes Y Fein Care Home is good. People are treated with warmth and kindness from a dedicated management and staff team, who have a good understanding of their needs, and what is important to them. Management are visible, approachable and responsive. The staff are well led, supported and trained to perform their role. We found the staff to be caring, attentive, engaging and responsive to people's needs. As a result there was evidence of this positively impacting on people's lives. There is a strong commitment to the local community and Welsh language. The service operates safely and efficiently for the people receiving care and support.

### **2. Improvements**

This is the first inspection under the Regulation and Inspection of Social Care Act (RISCA) 2016. Any improvements will be considered as part of the next inspection.

### **3. Requirements and recommendations**

Section five of this report sets out the actions the service providers need to take to ensure the service meets the legal requirements under the Regulation and Inspection of Social Care Act (RISCA) 2016. No requirements and non-compliances were issued from this inspection

# 1. Well-being

## Our findings

People's well-being is enhanced as they are cared for within a welcoming, comfortable and safe environment, which meets their needs. We found people received care and support within a clean, homely and personalised environment. People's preferences about where to spend their time, in communal lounges or their bedrooms, were respected by staff. We saw a choice of areas available for people to spend their day, in the company of others or within their own rooms if they preferred. We consider people live in a home environment that best supports them to achieve their well-being.

Staff provided good care and support which is planned with the individual, this included access to additional support for health care. There was a variety of activities which interested people and they could make choices about how they spend their time. Leadership at the home was very strong, with staff aware of accountability and of the ethos of the service. Policies and procedures provided clear guidance for staff to understand their role and how they should provide care and support. We conclude people receive good care and support, have the opportunity to stay healthy and active and participate in meaningful activities.

This is a service which values and respects the Welsh language and culture. We saw documentation including the statement of purpose and information guide were available in Welsh. We heard staff speaking bilingually and people told us that they felt comfortable speaking the language of their choice. The home has strong links within the local community and many of the people and staff knew each other. The deputy manager told us the Welsh language was very important, and we saw this was reflected in staff supervisions" the care worker *is able to listen and provide reassurance in people's preferred language.*" We consider that people's well-being is enhanced as they are able to communicate in the language of their choice.

People are supported to have a voice and understand their rights. We were shown a poster advertising a forum to be held both in Welsh and English to discuss "rights, control and your voice." We saw a copy of Declaration of Rights for Older People displayed. We read people's responses to quality assurance questionnaires and noted action points were developed from those responses. We consider people are supported to understand their rights and have a voice in the care and support they receive.

Systems are in place to safeguard people from abuse and neglect. People were given information regarding how to raise any concerns they may have. Risk assessments had been completed to reduce the risk of harm, and were reviewed on a regular basis. Staff received training to ensure they had the knowledge to raise concerns. They were also aware of their responsibilities in terms of safeguarding people from abuse. The service's safeguarding policy had been reviewed and was available to staff. The evidence suggests

people can be confident they are protected from abuse and neglect and are provided with information about how to raise concerns.

## 2. Care and Support

### Our findings

People enjoy a high standard of care and support. People and their relatives whom we spoke with were unanimous in their praise for the service provided by the staff at Maes Y Felin. Comments included, *“I have absolute peace of mind, the continuity of care really comes in to its own.”* Of particular note was the time staff are able to spend with people in order to provide reassurance and personal care. Documentation encouraged staff to get to know people, spend time to enable them *“to understand x’s perspective.”* Relatives told us how the care provided by staff had resulted in a physical as well as emotional improvement in their relative, stating their relative was less anxious and felt secure. We were able to confirm improvements in skin integrity by reading the person’s care notes. People told us they felt safe and were reassured by knowing staff well. Care and support is provided by dedicated care staff. We observed positive interactions between people and care workers. Risk assessments and personal plans are detailed and reviewed within required timeframes. We conclude people can expect a high standard of care and support from a committed staff team.

People are supported to achieve their personal outcomes. We saw personal plans were detailed, person centred and reflected people’s current support needs. Real time records are held electronically and reviewed regularly. Staff have access to personal plans on hand held devices. Evidence we saw confirmed people are consistently involved in planning and reviewing their care and support. We saw staff were responsive to people’s needs. This is made possible by effective communication within the home. For example, we observed a staff member access electronic records to provide a detailed account of a person’s night care and therefore, the relative was able to make an informed decision regarding plans for the day. We noted language used throughout personal plans we read, was appropriate and matched the ethos of the service. For example, *“maintain a sense of self hood”* and *“be aware of the impact of spatial awareness”*. We judge people are supported by a care team who are able access relevant, appropriate information to enable positive outcomes.

People benefit from a varied diet and they are able to make choices regarding their meals. We had a detailed conversation with the chef and read the four week rolling menu. We discussed options and people’s choices. We noted much of the food to be home cooked and included the use of pulses and bran. People and their relatives whom we spoke with were particularly complimentary regarding the vegetarian menu options. We observed lunch time meals appeared well presented and smelt appetising. We observed people had a choice of where to eat their meals. We overheard comments including *“you couldn’t get better than that”* and *“this is a really good cawl.”* We saw the home has the highest food hygiene rating, five (very good). People were offered drinks throughout the day as well as with their meals. We consider people’s nutritional and hydration needs are being met.

There are effective systems in place to support people to manage their medication. We saw that medication is stored safely, accurate records are in place to support correct administration of medication. We saw the medication administration records (MAR'S), were completed with all required information for each individual living at the home. Each person had a medication profile in place which included their picture and any allergies .We reviewed the training matrix and saw in staff training records medication training and competency checks had been undertaken. Staff are appropriately trained and competent, in line with the care home's medication policy. We conclude people are safeguarded by the medication systems in place and supported by staff that are appropriately trained in accordance with the policy.

People have access to healthcare when needed. Records seen showed that timely intervention from healthcare professionals was sought. This included district nurse, chiropody, tissue viability, lymphoedema and GP support. We saw that thorough records are held to monitor changes in people's health including weight monitoring, skin integrity and nutritional and hydration intake of people. This is a service which seeks to support people to remain as healthy as possible.

### 3. Environment

#### Our findings

People are cared for in safe and secure surroundings. We were required to show identification and sign in the visitors' book on arrival. It was noted that not all healthcare professionals visiting the home were signing in. This was discussed with the responsible individual and had already been highlighted in the annual quality review. It was confirmed that staff would reiterate the importance of signing in to all visitors including healthcare professionals. We saw safety checks were carried out on all the equipment in use at the home. Maintenance records showed problems are identified and swiftly resolved. We saw the fire log book was up to date and peoples personal emergency evacuation plans (PEEPs) were easily accessible. Grab rails were in place along the corridors. Storage of cleaning fluids was secure in line with Control of Substances Hazardous to Health regulations. We consider that people are supported to live in a home that, as far as possible, has identified potential risks and acted to mitigate them.

People's well-being is supported and promoted by the high standard of the environment. The decoration and atmosphere of the property is homely and traditional. The home is situated on the outskirts of Drefach and is very much part of the community. The accommodation provides a choice of quiet or communal areas for people to use. There are two lounges and a dining area with separate seating. Seating is configured in such a way to provide opportunities for private conversation and meetings with family and friends. There is access to a good sized court yard/patio area with planters maintained by people and their relatives. There is a large outdoor space to the rear of the property and consideration is being given as how to make this area more accessible and user friendly. The home is clean, well decorated and provides a homely environment for people to live in and enjoy. Rooms were personalized with photographs, furniture and ornaments of people's choosing. People we spoke to told us they liked their room "*I like it , I have everything to hand , I like being here.*" We therefore consider people are able to enjoy the facilities the home can offer and that they are supported to live in a clean and well maintained home offering a sense of homely familiarity.



## 4. Leadership and Management

### Our findings

People can be assured oversight and governance arrangements are robust. The service provider has prepared a statement of purpose which accurately reflected the service being provided. We reviewed the 2019 edition of the statement of purpose and found it to be accurate, up to date and in line with requirements outlined in the regulations. The document is also available in Welsh as is the residents guide. We found the model of care documented in the statement of purpose accurately reflected the approach being followed during the inspection. This was evidenced through reviewing people's personal plans, discussing people's care and support with them and through discussions with care staff. We read the latest quality assurance report and saw people were being given the opportunities to discuss their support and provide feedback on the service they received. The methodology used to compile the report included questionnaires. Responses were all positive including "*staff are warm and courteous*" and managers are "*excellent and responsive*." We saw any action points were drawn up and progress monitored. We noted policies and procedures are up to date and reviewed regularly. We conclude people benefit from receiving a service which is provided in accordance with the statement of purpose and seeks to drive continuous improvement.

People receive high quality care and support from a service, which sets high standard for itself. We spoke with the RI and it was clear they were very much involved with the home. This was also confirmed by the deputy manager, staff and relatives/representatives of the people receiving a service all of whom praised the RI involvement and caring attitude, "*you can see the joy she gets of doing a good job*." We conclude people receive good care from a service, which is committed to providing the best possible outcomes for people.

Staff are trained and developed to perform their roles. We reviewed the staff induction documentation which demonstrated staff achieved competency in their roles and practice. Training is supported by the role of training manager and the computerised training matrix which means it is easy to see when updates are due. A record of individual staff training is maintained. A number of staff have gained a recognised qualification in care. Staff whom we spoke with enjoyed participating in training and felt well supported in their role. Staff receive individual supervision from senior staff. They receive an annual appraisal. Staff meetings are held to inform and update staff. We found that people benefit from staff trained and supported to carry out duties. Staff have the necessary skills and knowledge to perform their duties.

## **5. Improvements required and recommended following this inspection**

### **5.1 Areas of non compliance from previous inspections**

None

### **5.2 Areas of non compliance from this inspection**

None

### **5.3 Recommendations for improvement**

We recommend the following in order the service is able to further support the well-being of people whom have chosen Maes Y Felin as their home:

- To access guidance <https://gov.wales/food-and-nutrition-older-people-care-homes-complete-guidance>.

## 6. How we undertook this inspection

We undertook a full unannounced inspection of the service looking at the four themes. We visited the home on 17 January between 08.50 am and 14.30 pm. The following regulations were considered as part of this inspection:

- The Regulated Services (Service Providers and Responsible Individuals) (Wales) Regulations 2017.

The methodology used at this inspection included: During the inspection, we spoke with the following:

- Three people.
- Two relatives.
- Four staff.
- The responsible individual and the deputy manager.

We looked at:

- Four care records of people living in the home.
- Four staff files.
- Fire safety records.
- Responsible Individual quality of care review.
- The statement of purpose and service user guide.

In addition, we:

- Toured the property.
- Observed interactions between staff and people.

Further information about what we do can be found on our website:

[www.careinspectorate.wales](http://www.careinspectorate.wales)

## About the service

Type of care provided	Care Home Service
Service Provider	Maes-y-felin Care Home Ltd
Responsible Individual	Nalini Parmar
Registered maximum number of places	19
Date of previous Care Inspectorate Wales inspection	18 April and 3 May 2018
Dates of this Inspection visit(s)	17 January 2020
Operating Language of the service	Both
Does this service provide the Welsh Language active offer?	This is a service that provides an 'Active Offer' of the Welsh language. It provides a service that anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service. Evidence we saw demonstrated that the service provided bilingual documentation, signs throughout the home, we heard conversation in Welsh throughout our inspection and Welsh culture is promoted and respected.
Additional Information:	

Date Published 09/03/2020

