

Inspection Report on

Marleyfield House

Marleyfield House Nant Mawr Road Buckley CH7 2BL

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

05/02/2025



About Marleyfield House

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Flintshire County Council Adults and Children's Services
Registered places	64
Language of the service	Both
Previous Care Inspectorate Wales inspection	3 February 2023
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 happy living in Marleyfield House. They value the choices they have over their daily routines, their food, the entertainment and taking part in the many activities that are arranged. They also praise the staff for their kindness and their willingness to go above and beyond and regard them as close to family. Care plans focus on what people want to achieve in the home and provide detailed information about who they are and what is important to them, so staff know them well. The original and older part of the home is very comfortable, providing several homely lounges and other communal spaces to sit in. The newer part of the home is spacious so people using mobility equipment can get around more easily. There are large lounges and dining areas so people can socialise and partake in activities with others in the home. The service is well managed with two assistant managers to support the manager and a team of trained, experienced care staff, many of whom have worked at the home for several years. The RI (responsible individual for the home) visits the service to check it is operating smoothly and that people are happy with the care provided. They know what is working well and where improvements could be made.

Well-being

People have control over their day-to-day life. They choose what they want to eat and what activities they want to engage with, they choose their daily routines such as getting up and going to bed; they choose where to sit and who to chat with. They know what is available to them, and they have a say about their environment. People are treated in the way they prefer and with dignity and respect. Staff address them in their preferred name. People feel listened to and know they can contribute to decision affecting them.

There are lots of activities to keep people happy and healthy. Health and weight is monitored and fitness encouraged through exercise, supervised mobility and healthy diets. People access the help they need from health professionals who visit the home and are supported to attend their appointments.

Staff are trained in safeguarding so people are protected from abuse and neglect as much as posisble. Staff are guided by policies and procedures and know what to look for and how to report any concerns. People living in the home told us they are quick to raise any issues if they have them. They know how to make their concerns known.

People are assisted to learn new things such as using their electronic devices and their smart televisions. The manager encourages staff to take time to teach them. The activities organiser arranges arts and crafts and other interesting sessions so people can use their skills and learn new ones.

Lots of activities involve people from the local community coming into the home to sing or entertain in other ways. School children visit and have time to chat with people living in the home, providing an opportunity to share experiences. People enjoy these visits and the social opportunities they bring.

The home is suited to the needs of people living here and allows them to meet their outcomes. Rooms in the original part of the building are homely and efforts are made to decorate bedrooms as people would have them at home. There are communal rooms to choose from where people can socialise with each other. Most areas are accessible so people can wander freely wherever they wish to go.

Care and Support

People come into the home only following a full assessment of their needs. Records show a range of information is collated from the person and others who know them well. Personal plans are very comprehensive and give a clear picture of the person, their history, background and what is important to them. People's wellbeing and progress is reviewed monthly by keyworkers and again quarterly by the manager. Plans are person centred, and outcome focused so it is clear to care staff how the person wants to be cared for.

People are provided with the care and support they need and prefer as the service has been designed in consultation with them and others who know them well. They praise the care given saying they are treated very well and all their care needs are met according to their preferences. One plan identifies an outcome of socialising to avoid isolation, and staff are instructed to encourage the person to spend some time in the communal spaces. We saw this person making their own way to the central hall where friends were chatting on the comfortable sofas. Another person's plan says they enjoy a glass of wine, and they told us they have a glass in the evening. The activities organiser works five days a week and everyone agreed excellent activities and entertainment is arranged. Minutes of a residents meeting held in January complimented the activities provided over the Christmas period. One person said, 'It was the best Christmas I had', another agreed 'it was fantastic'. The activities organiser told us of upcoming events such as the 'house of memories road bus', and many activities involving people in the local community. The home has been approached with a view to film and share their examples of activities with other services.

People re supported well to access healthcare and other services when they need them. District nurses and other health professionals visit the home. A chiropodist and hairdresser were working in the home during our visit. Records show GP visits are arranged when required and medication reviews are conducted to ensure people are on the correct medication as their needs and risks change. One person had their medication reviewed following a fall and this was changed. People are supported to attend hospital appointments.

Medication is well managed to ensure practices are safe. A weekly audit ensures records are accurately kept and medications are safely stored. The recommendations of a recent pharmacy inspection have all been actioned to further improve this aspect of care and all staff dealing with medications are trained to do so.

Environment

People receive their care in a home that is well equipped to help them meet their outcomes. People who want to socialise can do so in one of the many communal rooms available. We saw people gathered chatting in the hairdressing salon, the foyer and also in living rooms. A large dining room facilitates those who prefer to dine with others and a large room provides ample space for activities such as seated tennis and arts and crafts as well as visitors form the community who come to entertain. Corridors are spacious allowing people to move freely with their mobility equipment. Baths are designed to be safe and comfortable for people with limited mobility and there are fully accessible wet rooms for those who prefer a shower. Bedrooms are personalised with people's own pictures and other things that matter to them, and some are recently decorated to the tase of the occupant. The home is situated where people can enjoy continued contact with friends and family in the local community and local people come to celebratory fetes and fayres.

Risks to health and safety are mitigated through various checks and measures. Safety certificates were seen to be in date for electrical equipment testing, fire detection and alarms system and other fire equipment, electrical installation condition report, and gas safety. A workplace regulations annual detailed assessment is completed by the manager and weekly environmental audits are completed for outside and inside the building. Infection control audits are also completed to ensure practices, and the environment is safe. Personal emergency evacuation plans and risk assessments all help to ensure people's safety.

Leadership and Management

The service provider has systems in place to ensure the smooth operation of the service. There is a manager who is supported by two assistant managers and a team of senior carers. There is an established care staff team, many of whom have worked at the home for a long time, and other staff who are responsible for administration tasks, cooking, activities, cleaning and maintenance. The RI (responsible individual) provides support to the manager and meets regularly for updates on how the service is running. The manager arranges meetings with staff every two months to share information and seek views about what is working well and what needs to change.

The service has arrangements in place to monitor the quality of the service. The RI (responsible individual) visits the home every three months to check it is operating well, that all areas of the service are compliant with regulations and that people and staff are happy here. They keep a record of their visit and their findings. The service distributes questionnaires to people using the service and their relatives to gain their views of how the service is running. The RI analyses the findings of these and of any other checks completed and produces a biannual report that identifies what is going well and what could be improved. We saw a schedule of audits carried out routinely to check practices and procedures are being carried out effectively and accurately.

People are supported by staff who have been thoroughly vetted to ensure safe recruitment and have received training necessary to carry out their roles. In the older part of the home, people told us staff respond promptly when they are needed. In the newer part of the home, where people have less mobility and greater needs, two people told us care staff are sometimes held up. Staff told us there are recently more people who need the support of two staff for their care. The assistant manager said she is monitoring this and will feed back to the manager so that the situation might be reviewed. Staff are inducted upon employment and records how they are provided with all the training necessary to carry out their roles. We spoke to staff who all confirm they feel valued and well supported. They receive regular one to one supervision during which they can speak openly about their working practices and receive feedback about their own performance. They feel they are listened to and have great respect for the management team.

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.

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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