



Inspection Report on

Mariam House

Barry

Date Inspection Completed

18/11/2024

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About Mariam House

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gofal Cymru Care Ltd
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	07 June 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 settled and happy with the service and share positive relationships with care staff. The care team is consistent and dedicated to supporting people to achieve their daily outcomes. People spend their time doing things they enjoy which are important to them. An increase in activity levels and opportunities to people is positively impacting their well-being, such as going on holiday and maintaining their skills around the home. Care staff access up-to-date care documentation which informs them of how a person chooses to be cared for. Care staff complete training in topics which are relevant to the needs of people living in the home.

Governance arrangements are suitable to ensure day-to-day management of the home is effective. There are suitable systems for monitoring the quality of the service. The responsible individual (RI) demonstrates consistent oversight of the service. Care staff feel well supported and have access to policies and procedures and regular staff meetings to keep them updated. People's care and support needs are documented in well-thought-out personal plans which fully inform care staff of a person's routines, and choices. The service sustains a stable workforce to meet the needs of those using the service.

Well-being

People's voices are heard, and their opinions valued by the service and are involved in day-to-day decisions about the service they receive. People meet monthly with key worker care staff to discuss their care, support and well-being. Key workers detail people's progress, well-being and things which are important to the person. The service supports people to achieve their goals, which include self-care milestones, getting involved in tasks around the home but also social outcomes such as holidays, hobbies and days out. Care staff facilitate monthly home meetings for people to get together should they choose to, where their opinions, and requests are noted. We saw requests are acted upon.

People access the right information when they need it. Service information is available with some details in an easy read format. The service assesses people's communication preferences on admission. There is not a current requirement for the service to be provided through the medium of Welsh language, we saw information around the home in accessible formats, and some signage in Welsh. The service is working towards the Welsh Active offer and care staff complete an on-line course as part of their core training.

The service understands people's individual circumstances. Those who require additional support to make decisions access advocacy services. The provider understands the importance of keeping others informed to ensure people's outcomes are consistently being met. Professionals and representatives can expect to be informed when reviews are being planned. We found records relating to people's rights and choices detail their day-to-day decisions, such as attendance at medical appointments, activity levels and engagement with staff. The provider applies for Deprivation of Liberty Safeguards (DoLs) and completes best interest decisions for people who require additional support to keep them safe. The provider understands their responsibility to inform the regulator of applications made to protect people.

People are protected from harm and abuse. The service follows safe recruitment practices and maintains good oversight of supervision of care staff. Care staff attend safeguarding training and have access to up-to-date policies relating to safeguarding and whistleblowing which are in line with current legislation. Training for care staff includes core training in topics relevant to meet the needs of people living in the home. Overall, people are consistently achieving their daily outcomes in-line with their personal plan which positively impacts their well-being.

Care and Support

Information about the service is available to people and representatives. The statement of purpose (SoP) sets out what people can expect from the service. A service guide provides some information available in an accessible format. Service agreements are completed for people when they initially move into the home. Risk assessments are in place and additional safeguards are applied for those who require them.

The service completes the personal plan to inform care staff of a person's care and support needs. The personal plan contains most key information, including people's likes and dislikes, what they can do for themselves, and what is important to them. We found personal plans are reviewed on a regular basis and updated with new information. The service includes people and their representatives to contribute to the review.

People receive the right care at the right time in-line with the personal plan. Care staff know people very well and their individual needs are catered for. Records relating to daily care are complete. People are achieving good outcomes because of the consistent and effective approach to their care needs. The service is supporting people to maintain a healthy diet and follow daily personal care routines which is positively impacting on their general health and well-being.

The service supports people to access health care professionals and care staff keep up to date records of all appointments. Care staff understand their roles and responsibilities to support people to maintain good health. People's choices around accessing health appointments are documented. We found essential health needs are met and people's health is reviewed by appropriate professionals.

The management of people's medication is thorough. There are safe procedures for accepting incoming, storing, and administering medication. People's medication is administered by fully trained staff, a suitably qualified person regularly reviews staff competencies. There is a medication policy in place. People experience good outcomes with their medication. We saw people have reduced their need for some daily medication because of the support they receive to eat well and sustain a diet which suits their specific needs.

Environment

The home is well-maintained and decorated in a homely style. On the day of the inspection, we found the home to be a calm and relaxing environment. The provider identifies areas of wear and tear around the home and makes repairs without delay. Since the last inspection, we found communal areas redecorated and flooring replaced, ensuring a safe environment for people.

People's bedrooms are spacious and recently decorated with people's input to choose their theme. Furniture in all bedrooms is new and we found new equipment for one person who requires it. The manager has oversight of when equipment will need servicing. People have access to en-suite facilities suitable to meet their needs. We found bedrooms to be clean and pleasant places for people to spend time in.

There is a good standard of hygiene and infection control throughout the home and care staff complete daily cleaning routines. We found ample supplies of PPE. Weekly and monthly monitoring ensure systems such as water temperatures, fridge and freezer temperatures and medications storage temperatures are within a safe range. Records relating to fire safety and maintenance of equipment are up to date and all people have a personal emergency evacuation plan. Care staff complete fire safety training and easy read guidance is visible in the home to tell people what to do in the event of an emergency. Fire evacuations are completed on a regular basis, which include people.

On the day of the inspection, we saw people playing cards and chatting with care staff in the lounge before going out for the day. They have easy access to an outdoor space; the patio garden offers people a safe and pleasant area. People told us they like being in the garden. The provider values people's feedback and requests, and since the last inspection they have fitted an outdoor covered area where people choose to smoke. We saw photographs at the service of people in the garden during the summer months tending to plant pots. There is ample seating in the garden for people and care staff.

There are effective procedures in place to monitor the environment to keep people safe. Items that could cause harm to people are securely stored, such as cleaning fluids and medications. The manager has oversight of the day-to-day operation of the service and the RI completes environmental audits during formal visits to the home.

Leadership and Management

There are clear governance arrangements and an organisational structure with suitable support for the day-to-day management of the home. The RI formally visits the home and speaks with people and staff. They consider care documentation, records relating to accidents, safeguarding matters and the environment. The RI effectively evaluates the quality of the service people receive and values their input. The RI informs the provider and produces a quality-of-care review which documents what the service is doing well, and what they can focus on to continue to deliver a good quality service to people. The statement of purpose (SoP) accurately describes the service, which is a regulatory requirement.

We found the service to have a consistent team of care staff, and the provider values personal development and career progression. We saw safe recruitment procedures in place for care staff employed at the service, and effective oversight to ensure the correct personnel documentation is retained. All care staff hold a current Disclosure and Barring Service (DBS) certificate, and all are registered with Social Care Wales, the workforce regulator. Several care staff have a recognised qualification, and others are working towards attaining a suitable qualification for their role. They receive timely supervision, and the newly appointed manager is receiving strong support from the RI. Training compliance is reliable, and the range of core training meets the current needs of people living in the home. Competencies are complete and most care staff feel their learning and development is important to the service. Management is demonstrating effective oversight of staff training, competencies, personal development, and annual appraisals.

Systems for electronic record keeping, auditing, and monitoring of the service are consistently good, and allows the manager and RI to identify areas of need. Robust remedial action plans inform the provider of anything which needs addressing.

There is a culture of effective and positive teamwork and care staff consistently told us this is a strength of the service. Care staff are united in their approach to support the best outcomes for people living in the home. Throughout the inspection we found the RI to be open, honest, and keen to develop the service based on the findings of the inspection and the feedback from stakeholders.

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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