



Inspection Report on

Min y Mor Residential Care Home

**Minymor Residential Home
Wellington Gardens
Aberaeron
SA46 0BQ**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

11 November 2021

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About Min y Mor Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ceredigion County Council Adults and Children's Services
Registered places	30
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service

Summary

This focused inspection is to review one open Priority Action Notices (PAN) around the provider's oversight.

People continue to receive individualised care and support that meets their needs. The provider has made steps towards improving the environment and has a clear plan to complete the works.

The provider has improved the oversight of the service. The Responsible Individual (RI) has visited the home and involves people, their representatives and care workers in their visit and subsequent Quality of Care report.

Well-being

People receive person centered support and enjoy stimulating activities such as daily quizzes that encourage interaction and fun. Care workers respect people and understand their needs; an individual told us *“the staff, they are excellent”*. Staff consider people’s individual circumstances by supporting them to complete life books with their family and friends to tell their life story.

People and their representatives are involved in decisions and express their views about the service. The RI intends to address concerns raised about the visiting restrictions and is reviewing the visiting guidance. People are involved in decisions around the refurbishment, a person chose ‘daffodil yellow’ paint for their bedroom walls. When finished the environment aims to enhance people’s well-being by helping orientation and to make the most of technology that supports people with memory challenges.

People are also able to express their views about the service because the RI involves them and/or their representatives in quality assurance audits. Staff contribute with ideas and suggestions to improve the quality of service during RI quarterly visits. Information from internal audits and surveys enables the RI to monitor and assess the quality of the service. Clear actions and time frames enables the provider to enhance the overall service it offers to people.

Care and Support

Care and support was not a focus of this inspection, however our discussions with people who live and work in the service again show that the service is meeting people's health and well-being needs.

People spoke positively about the care and support they receive. Interactions are supportive and friendly. An individual who lives at the service told us *"I really appreciate the work the staff do for us"*. Another person enthusiastically told us about the fun they have with workers, family and friends while creating their memory books.

Good hygiene practices continue throughout the service. Staff wear the correct PPE and following Public Health Wales guidance

Environment

The environment was not a focus of this inspection, we previously identified as an Area for Improvement. The provider has started a refurbishment programme that will improve individual's health and well-being.

Improvements to the grounds and paths have commenced and internal decoration has started. The Registered Individual has secured funding to make the necessary improvements to the building. They expect to complete the work by March 2022 and we will test this in the next inspection.

Leadership and Management

The provider has improved its arrangements to monitor, review and improve the quality of the service. The latest Regulation 73 report is comprehensive and details many discussions with people and their representatives. Workers who met with the RI spoke positively about the visit and the chance to discuss the improvements. Those who did not meet the RI were unaware of the plans for the service. Representatives are pleased to be involved in the service but want to see changes to visiting guidelines. The RI confirmed that visiting is individually risk assessed and can take place inside the home. The provider is reviewing their visiting policy in December 2021.

The six month Quality of Care Review is detailed and contains feedback from people and their representatives. Information from internal audits and surveys enables the RI to monitor the service with clear actions on how to improve quality. The refurbishment programme is a key focus of the report.

The service is currently operating without a manager and the RI has a contingency plan to cover the vacancy. The RI intends to meet with staff at the service on a one-to-one basis to gain their feedback and to communicate the plans for the service.

We can conclude that the oversight of the service by the RI has improved and is focusing on service improvements. We expect this level of oversight to continue and this will be tested in future inspections.

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
6	Provider Oversight and Governance	Achieved

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
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44	<p>This is an Area for Improvement carried over from an inspection on 17.08.2021 and will be tested in the next inspection to give the provider enough time to address the issues. The grounds are unkempt. Inside there is chipped paintwork on skirting boards and door frames, peeling wallpaper and frayed carpets . Windows are damaged and are difficult to see out through. The environment does not support people's well-being and potentially pose a risk to people.</p>	New
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