



Inspection Report on

Celynbrook Care Home

BARRY

Date Inspection Completed

05/12/2019

Welsh Government © Crown copyright 2019.

You may use and re-use the information featured in this publication (not including logos) free of charge in any format or medium, under the terms of the Open Government License. You can view the Open Government License, on the National Archives website or you can write to the Information Policy Team, The National Archives, Kew, London TW9 4DU, or email: psi@nationalarchives.gsi.gov.uk
You must reproduce our material accurately and not use it in a misleading context.

Description of the service

Celynbrook Care Home is situated on the outskirts of Barry which is a seaside town located in the Vale of Glamorgan, South Wales. There is a wide range of activities and amenities a short distance away and there are transport links close by.

Celynbrook Care Home provides personal care and accommodation for up to five adults with a learning disability, functional mental health needs and or a physical disability.

The service is owned and operated by Valebrook Care Home Ltd who have nominated a Responsible Individual (RI), Ashley Moore, who has overall responsibility for the service. The service also benefits from a suitable manager who is registered with Social Care Wales (SCW).

Summary of our findings

1. Overall assessment

People receive the care they require, from staff who understand their needs. Staff are recruited safely, well trained and happy in their work. Management staff are visible within the service and complete appropriate monitoring and quality assurance as required. People are cared for in a warm, welcoming and well maintained environment that would benefit from signage to provide better orientation for people.

2. Improvements

We noted that the following improvements had been made since the last inspection:

- Care files contained up to date information only.
- References had been verified.
- Statement of purpose was up to date.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service and the areas where the care home is not meeting legal requirements. These include the following:

- Equipment storage.
- Bathrooms.
- Medication storage.
- Orientation.
- Policies.
- Review documentation.

- Menu.

1. Well-being

Our findings

People can be assured that their voice is heard and listed to.

We saw evidence that people were treated as individuals by staff who had a clear understanding of their needs and were able to anticipate the needs of people who could not communicate these themselves. We viewed care documentation which was person centred and clearly highlighted personal preferences, likes and dislikes of the person being cared for. We viewed food menus within the home and saw that there was always choice available, and people were supported to eat meals according to their needs.

We saw that routines within the home were individual, with some people receiving full support while others were supported to be as independent as possible. People were supported to engage in social activities appropriate to their choices and abilities and had good access to the community as and when they wished.

People were cared for in single spacious rooms which were warm, clean and personal.

We saw evidence that appropriate quality assurance monitoring was taking place with consultation with people using the service or their representatives to ensure that people are getting the service they want at all times.

We conclude that people are supported to have control over their lives.

People can be assured that they get the care they require without delay.

We saw staffing levels were appropriate to meet the needs of people using the service, and staff had a good understanding of the needs of the people they cared for. We witnessed staff providing care with dignity and respect whilst showing care and compassion.

We viewed a selection of care files and saw that they were person centred, robust and reflective of the person receiving the care. We recommended some improvements in regard to the reviewing documentation as care plans stated that they were reviewed six monthly, but we were told that this was completed monthly. We also recommended that the monthly reviewing documentation was stored within working care files.

We viewed the medication processes within the home and found these to be safe and robust with Medication Administration Record (MAR) charts being completed correctly.

We conclude that people's physical and emotional needs are met appropriately.

People can be assured that they are safe.

We saw that Celynbrook was a secure property that allowed authorised access only.

People were cared for in a suitable environment that was free from hazards and had equipment to maintain safety and independence.

We saw that all staff had undertaken safeguarding of adults training and a safeguarding policy was in place, but we made some recommendations in regard to this policy to ensure that it contained detailed up to date information. We saw that the service had a complaints policy in place, but no complaints had been received since the service re-registered.

Staff recruitment is safe and robust; we saw evidence that references and DBS certificates were sought before employment was offered and reference checks were also taking place. The service had systems in place to ensure that Disclosure and Baring Service (DBS) certificates were renewed every three years.

We conclude that people are protected from abuse and neglect.

2. Care and Support

Our findings

People can be confident that their individual circumstances are considered. We saw that people had their own personal routines with care documentation clearly highlighting preference, likes and dislikes. We saw that staff had extremely good knowledge of the people they cared for and were able to anticipate the needs of people who could not communicate for themselves. We viewed practices within the home and saw staff treating people as individuals and providing care with dignity, kindness and respect. Staff we spoke with were positive about their roles and were committed to promoting the independence of people using the service; one person said, *“coming here is not like a job, it’s like one family”*. We observed lunch time within the home and saw staff providing support to people in accordance to their needs. Some people were fully supported to eat their meals while others were given verbal guidance and reassurance. We saw that people were offered a choice in regard to what they ate and drank, but we did view the food menu and recommend that the home ensures that at least five fruit or vegetables are on offer daily to ensure that people have access to optimum nutrition. We conclude that people are encouraged to have autonomy over their own lives.

People can be assured that they get the care they need as early as possible. We found staffing levels at the home were sufficient to meet the needs of people using the service, and were in line with those set out in the statement of purpose. We saw that staff provided the care required as and when it was required, and were able to anticipate the needs of those who could not articulate their needs. We examined the care files of two people using the service and found them to be person centred, robust and reflective of the person receiving care. We saw that personal plans stated that they were to be reviewed every six months, but when we discussed this with the RI we were informed that all residents were reviewed monthly but the paperwork was not stored within these files. We recommended that the reviewing arrangements documented was changed to reflect the actual arrangements and that review forms were stored within working files, so that staff can see any changes. We saw that referrals were made to external agencies appropriately without delay and any guidance or recommendations was reflected in the personal plan and followed appropriately. We examined medication processes within the home and found them to be safe and robust, but we did recommend improvements to the storing of medication. Medication was stored in a dedicated room within a locked cabinet, but on our arrival we saw one person’s medication on the work top and two boxes of paracetamol balancing on a notice board within the room. The medication on the work top was later removed and we were assured the paracetamol belonged to the staff and would be moved. We examined the Medication Administration Record (MAR) charts and found they all contained a picture of the person receiving the medication, and had been completed correctly with no gaps. We saw staff administering medication in pairs and following the guidance of the home’s policy. We conclude that people’s well-being is promoted by the care they receive.

People can be assured that their social and recreational needs are met.

We viewed individual plans and saw that activities and social inclusion were well documented and tailored to the person. We saw evidence that most social activity was within the community and there were ample vehicles available to facilitate this.

On the day of inspection all five residents were at the service, but we were told that some people accessed day services on some days. We saw one person being taken out for a walk in their wheelchair while others spent time in their bedrooms or communal areas with staff. One person we spoke to told us about a bowling trip the day before and also that they enjoyed shopping trips to buy CD's and DVD's. Staff we spoke with had a good understanding of the social preferences of people and told us "*we will support people to do what they want*".

We conclude that people are encouraged to do things that matter to them.

3. Environment

Our findings

People can be assured that they live in an environment that meets their needs.

Celynbrook is a single storey bungalow with suitable access to and from the building. We found the environment to be warm, welcoming and homely but noted that the majority of internal doors were all identical and so it was hard to know which doors led where, and so we recommended some signage to the doors would provide better orientation for people. Celynbrook benefited from spacious communal areas including a large lounge and a kitchen dining room. People had access to ample bathrooms and toilets within the home, which were clean and contained appropriate equipment to maintain safety and independence, but we did note that bathrooms would benefit from a general tidy up, with equipment such as mops and towels being stored away.

People were cared for in spacious single rooms and were encouraged to make the rooms as personal as possible. We viewed a number of rooms during inspection and saw that they were clean, warm and personal to the person occupying the room.

We conclude that people live in a home that promotes their well-being.

People live in a safe environment.

On arrival we found that the main door was locked and we had to ring the doorbell to gain access to the building. We were asked for identification and to sign the visitor's book before we were authorised access. As we entered the service we saw a large hoist situated in the hallway in front of the main door. We discussed this with staff who told us that the hoist is kept elsewhere but is charged in this location. We recommended finding an alternative charging point as the hoist would block an exit and pose a risk if there was a fire.

We saw the home had handrails in situ and appropriate flooring for use of wheelchairs and walking aids, and all harmful chemicals were locked away safely.

We saw that all residents had a Personal Emergency Evacuation Plan (PEEP) in place, which is a plan on how people should be evacuated in the event of an emergency or a fire. We viewed the maintenance file and saw that gas and electricity safety testing was up to date and all serviceable equipment had been serviced appropriately. We saw that all residents had access to equipment needed to maintain their safety and independence at all times.

We conclude that people's safety is maintained within the environment.

4. Leadership and Management

Our findings

People benefit from the leadership and management arrangements.

Celynbrook benefited from a manager who is registered with Social Care Wales and an RI who had good oversight of the service. We spoke to the RI at length during inspection and were satisfied that they understood their legal requirements in regard to the role of RI. We saw that quarterly RI visits were being completed and appropriate quality assurance monitoring of the service was taking place.

We viewed a selection of policies and procedures within the home and found them to be adequate, but we did advise that the safeguarding policy should be expanded and updated to contain current legislation in regard to safeguarding adults at risk of abuse. We saw that the service had a clear complaints policy in place and no complaints had been received since the service re-registered.

We saw evidence that Deprivation of Liberty Safeguards (DOLS) applications and regulation notices were submitted appropriately which indicated that the home understood and was fulfilling its legal requirements.

We conclude that leadership and management is effective.

People can be assured they are supported by people who are safely recruited.

We examined a selection of staff personnel files and found them to contain all required information including identification and a full employment history. We saw that pre-employment checks including references and Disclosure and Barring Service (DBS) certificates were applied for before employment was offered. These checks are important as they determine the suitability of a person to work with vulnerable people. We saw there was a system in place to ensure that DBS certificates were renewed every three years.

We examined the staff training and supervision matrixes and found that they were all up to date. Staff we spoke with told us they receive training and were fully supported within their roles. One staff member told us *"we are encouraged to progress if we want to"* and another said *"we are very well supported, you can go to the manager or the RI with any problem at all"*.

We conclude that staff are well trained and supported.

5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections

None identified at the last inspection.

5.2 Recommendations for improvement

- Hoist not to be charged in the main hallway.
- Medication to be stored neatly in treatment room.
- General tidy up of bathrooms.
- Some signage within home for better orientation.
- Safeguarding policy to be expanded and updated.
- Food menus to offer five fruit and veg per day.
- Review forms to be kept in individual working files.

6. How we undertook this inspection

This was a full inspection completed as part of our annual inspection programme. We visited the service unannounced on 05 December 2019 arriving at 10:00am and leaving at 13:50pm.

The following regulations were considered as part of the inspection:

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

The following methods were used:

- A tour of the building.
- Discussion with RI.
- Observations of practices within the home.
- Observations of medication administration processes.
- Viewing a selection of policies and procedures.
- Discussion with one resident.
- Discussion with four staff members.
- Viewing of two resident files.
- Viewing of two staff personnel files.
- Viewing the training and supervision matrix.
- Viewing of the maintenance file.
- Viewing of staff rota.
- Viewing of service user guide.
- Review of information held by CIW including statement of purpose and notifications.

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

www.careinspectorate.wales

About the service

Type of care provided	Care Home Service
Service Provider	Valebrook Care Homes Ltd
Responsible Individual	Ashley Moore
Registered maximum number of places	5
Date of previous Care Inspectorate Wales inspection	06/12/2018
Dates of this Inspection visit(s)	05/12/2019
Operating Language of the service	English
Does this service provide the Welsh Language active offer?	No
Additional Information:	

Date Published 07/02/2020