



Inspection Report on

Cartref Bryn yr Eglwys

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

28/11/2019

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Description of the service

Cartref Bryn Yr Eglwys is situated in a rural village and is part of the local community. The home is owned by Nant-Y-Foel Cyfyngedig. Meryl Welsby is the responsible individual, and manager who is registered with Social Care Wales. The home provides nursing and/or personal care for up to 20 adults.

Summary of our findings

1. Overall assessment

Cartref Bryn Yr Eglwys offers continuity of care from a stable staff group who know people's needs well. People spoken with were happy living in the home and we received good feedback from a family and the local GP. We identified some environmental issues which did not meet health and safety legislation, these were quickly rectified by the provider and evidence of compliance was sent to Care Inspectorate Wales (CIW), within a timely period. Other issues identified such as people's continence plans were also improved in a timely manner. The provider had also invested in new cot side bumpers and pedal bins to ensure good infection control in the home.

2. Improvements

This was the first inspection post registration to the Regulation and Inspection of Social Care Act (Wales) 2016 (RISCA). Any resulting improvements will be reported upon in future inspections.

3. Requirements and recommendations

Section five of this report sets out our recommendations to improve the service. These include the following:

- Spot checks to ensure environmental standards are maintained.
- Consider menu choices in light of nutritional training and new legislation.
- Consider review of employment application forms in line with employment legislation.

1. Well-being

People's rights are protected. People's individual needs were central to their plan of care, we recommended further detail as to people's preferred routines should be included and were assured this would be done. People and their families had access to the Statement of Purpose document which explained the services offered, the staff structure, and how to express concerns should they need to. We identified some areas which required more detail in the Statement of Purpose, namely, the manager's qualifications and the service's active offer of the Welsh language. This was rectified within a timely period and the revised version shared with CIW. People who could not advocate for themselves or did not have a representative could access an independent advocate via social services. People and their families' views were sought and reported upon in the annual quality review audit and the results of any changes to the service were made freely available. People's voices are heard and listened to.

People are enabled to maintain their well-being. A familiar staff team knew people well and were able to support them to do things which made them happy. People were offered regular activities by staff and had opportunities to be sociable. People's health care needs were met in a timely way. We identified some environmental standards which could be improved upon and these were rectified in a timely manner. We observed people were treated with dignity and respect. People are supported to be active and healthy.

People feel safe. The service was able to safeguard people through staff training and following the regional safeguarding process. The service was monitored and audited by management to guard against abuse and neglect. There was a whistle-blowing policy for staff to safely report poor practice. Staff felt supported and enabled to report adverse incidents to the management. The home also has a general complaints policy and process. We saw evidence of the manager treating a disciplinary incident regarding a staff member in a robust manner. The home consistently reports incidents to Care Inspectorate Wales (CIW). People are protected from abuse and neglect.

People benefit from a continually improving environment. The home was warm and homely. People were able to personalise their rooms with items of importance and sentimental value. Corridors and rooms were clear of trip hazards so that residents could safely walk around. An extension was being built to provide further beds for people wishing to be cared for in the home. The home is fit for the safe and appropriate care of residents.

2. Care and Support

Care is planned according to individual need. It was not clear at inspection what people's habits and preferred night time routines were especially as regards going to the toilet. This was fed-back to the manager who devised more detailed plans acknowledging people's preferences. We advised the manager to consider language used in written reports to ensure it reflected the lived experience of the person, and not the judgement of the carer and explained how some descriptive words could be viewed as judgemental. The manager told us that no judgement was intended and different descriptive narrative would be considered in the future. Plans contained people's social and recreational preferences as well as any communication needs. Plans were reviewed monthly and updated as required. We observed staff treated people with dignity and respect, the care giving seen was timely and calm.

We heard several staff members speak with people in Welsh as was the person's personal preference. We heard staff frequently give people choices throughout the day, for example, what to eat/drink, where to sit and which activities they wished to engage in. We saw menu choices offered one main choice for lunch, an alternative was given to people who did not like the meal. We recommended the menu be revised in light of the new nutrition legislation to ensure people had opportunity to have at least five portions of fruit and vegetables a day, one portion of oily fish per week and an appropriate balance of other nutrients. We witnessed staff doing a general knowledge quiz with people in the afternoon, people were laughing and enjoying themselves. A Christmas party was organized which family, friends and the family of deceased residents could attend if they wished. Residents spoken with said they were comfortable and happy in the home and that the staff were very nice. They said their room was comfortable and they felt safe in the home. We saw thank-you cards from families with comments such as, *"thank you for your care and kindness."* A card written in Welsh praised staff for their special care and for making the resident's days more comfortable, *"Diolch yn fawr am y gofal arbennig ac am wneud ei dyddiau yn fwy cyffyrddus."* A resident's relative told us the care was good in the home and they communicated well with them as a family. People have choices regarding their daily care and their voices are heard.

The service is mindful of people's physical, emotional and mental health. We saw regular review visits from health care professionals such as the doctor, and social worker were documented in people's plans. We saw a GP visiting a resident during inspection. The GP praised the care in the home and said reports from staff of changes to people's physical conditions were appropriate and timely. Instructions and outcomes were also noted in the plans and communicated between staff members from one work shift to another. We saw end of life plans where people could have the opportunity to express their wishes if they were able to do so. People's health indicators were monitored such as monthly weights and any problems highlighted for health care professional review as appropriate. We saw risks of falls were assessed and regularly updated. Wound care was documented using forms which were detailed and included body maps and photos. We saw regular checks were performed for people to ensure they were comfortable and their skin was not getting sore. People's food and fluid intake was monitored to ensure good hydration and nutrition. People's emotional condition and expression of anxiety was reflected in their personal plans and instructions given

regarding the best way to reassure the person. People get the right care and support in a timely way.

People are protected from abuse and neglect. Staff were aware of the local safeguarding procedures and had received training in protecting people's liberty. People who were unable to make their own decisions regarding care and where to live were subject to Deprivation of Liberty Safeguards (DoLS). We saw DoLS applications and paperwork were appropriate and sufficiently detailed. People who could not speak for themselves or did not have an identified representative could access an independent representative via social services. The RI visit reports demonstrated an over-view of the home and the service offered. People are as safe as possible in the home.

3. Environment

People live in a continually improving, homely environment. We identified some environmental issues during inspection, some rooms were not as fresh as expected. We were told that rooms were not cleaned until people had received care and gone downstairs to the lounge but that they were cleaned daily. Some health and safety issues were seen such as electrical equipment stored in a bathroom and the need to clean windows and install restrictors. The RI responded quickly to this and cleared the bathroom and maintained the windows and also ordered restrictors. People living in the home told us they felt comfortable and “*at home*” in the environment. The RI also sent evidence of new cot side bumpers for beds purchased and pedal bins for bathrooms to ensure good infection control. We recommended recorded spot checks be done to ensure continued good environmental standards.

Overall, we saw the home was spacious with lounges for people to be sociable in as well as quieter areas. People were encouraged to sit in the lounge to socialise and join in with the day’s activities. People were able to sit around the table for meals if they wished to do so. People were able to personalise their rooms with items of importance to them and homely touches. People could access activities of interest such as arts and crafts, entertainments, TV and be sociable with others in the home. People were regularly offered snacks and drinks by staff. Sensitive information such as people’s personal files and staff files were kept in lockable cupboards in a designated office. Medications were safely kept in locked cupboards, trolleys and fridges as appropriate. Medication monitoring and administration systems were satisfactory. Maintenance, fire and health and safety checks were up to date. The home was as secure as possible. The front doors were locked and people were asked to sign in and out of the building. We were asked to show our identity card to verify who we were. People live in a home which supports their well-being and safety.

4. Leadership and Management

People are cared for by staff who are trained and supported. We saw on-going training was offered to staff by the provider on a rolling basis. The manager confirmed that staff had received nutritional training in line with new legislation. Supervision was offered to staff on a regular basis to offer support in their daily practice and identify training needs. Staff told us they were happy in their work and felt well supported by the manager. Staff felt their voices were heard and they could contribute their ideas to further improve the service. Staff said they were aware of the whistle-blowing policy and would feel able to report any poor practice to the manager. We noted staff worked well together as a team to achieve people's aims. Staff told us there was good support amongst staff members. People are supported by staff who have the knowledge and skills to enable individuals to achieve their personal outcomes.

The service is measured as to its quality. We found the service was audited monthly regarding falls, infection control and staffing. Other aspects of the service such as personal plans and medication administration records were also audited. Audit results were shared with staff to ensure continued good practice. We audited the medicine administration, recording and storage practices in the home and found them to be satisfactory. RI visit records demonstrated a good over-sight of the service and took into account the views of families and residents. Overall, people are offered a continually improving service.

Recruitment and employment practices are generally satisfactory. We viewed staff files and saw appropriate checks were made to ensure staff were appropriate to work with vulnerable adults. We saw some references were taken over the phone and suggested these be consistently witnessed and signed for, and where possible, written references be obtained to ensure a robust audit trail. The employment application forms were a little dated and we recommended they be updated and reviewed to ensure compliance with employment legislation. We saw new staff were given an in-house induction to ensure their familiarity with health and safety in the home and time to read policies and protocols. Shadow shifts and supervision were also given to new staff to ensure their familiarity with people's needs and what was required of them in their role. People can be assured of satisfactory recruitment practices in the home.

5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance from previous inspections

This was the first post RISCA registration inspection for the service.

5.2 Recommendations for improvement

We recommend the following to enable good outcomes for people living in the home:

- Documented spot checks to ensure environmental standards of cleanliness, infection control and health and safety are maintained.
- Consider menu choices in light of recent nutritional training received by staff and compliance to new legislation. People should have opportunity for at least five portions of fruit and vegetables a day, a good balance of proteins and carbohydrates and a portion of oily fish per week for heart health.
- Consider reviewing the employment application forms to comply with employment legislation.

6. How we undertook this inspection

This was a full, unannounced inspection conducted by two inspectors which took place on 28 November 2019 between the hours of 10:10am and 7pm. The inspection was undertaken as part of our inspection programme under The Regulated Services (Service Providers and Responsible Individuals (Wales)) Regulations 2017.

This inspection was part of the CIW review of outcomes for people living with dementia in care homes.

The following methods were used during the inspection:

- We spoke with the manager, deputy manager, four staff members, one family member, three people living in the home and a GP.
- We used the Short Observational Framework for Inspection (SOFI, version 2). The SOFI tool enables inspectors to observe and record care to help us understand the experience of people who cannot communicate with us.
- We toured the home and facilities including a selection of people's rooms.
- We conducted a medications review.
- We considered a wide range of records as kept by the registered service and concentrated upon, six people's care files, four staff files, fire safety audit and records, maintenance records, health and safety audits, manager's monthly report, RI reports, DoLS documents, staff supervision and training records, activity file, menus and Statement of Purpose.

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	NANT-Y-FOEL CYFYNGEDIG
Responsible Individual	Meryl Welsby
Registered maximum number of places	20
Date of previous Care Inspectorate Wales inspection	This was the first post RISCA registration inspection.
Dates of this Inspection visit(s)	28 November 2020
Operating Language of the service	Welsh
Does this service provide the Welsh Language active offer?	Yes, the service offers care giving through the medium of Welsh and supports people's first language choice, culture and ethnicity.
Additional Information:	

Date Published 09/03/2020

