Inspection Report on
Brynwood care Home

2 Intermediate Road
Brynmawr
Ebbw Vale
NP23 4SF

Mae’r adroddiad hwn hefyd ar gael yn Gymraeg
This report is also available in Welsh

Date Inspection Completed
20/11/2019
Description of the service

Brynwood Care Home is operated by Plasgeller Care Home Ltd who were re-registered with Care Inspectorate Wales (CIW) under the Regulation and Inspection of Social Care (Wales) Act 2016 on 12 February 2019. The service offers care and support to a maximum of 40 adults who may or may not need nursing care. At the time of this inspection we were advised that 32 people were currently living at the home. The company has nominated Mr Sanjiv Joshi as the responsible individual (RI). He is responsible for strategic and operational oversight of the service. There is an appointed manager who is appropriately qualified and registered with the workforce regulator (Social Care Wales).

The home is located in a predominately residential area in Brynmawr, close to Newport. It occupies a site alongside two other homes operated by the same provider.

Summary of our findings

1. Overall assessment

Brynwood Care Home is well thought of by those who live there, their families and professional visitors. Everyone we spoke with commented highly about the care provided and we saw staff working with people in a warm and friendly manner. A visiting health professional commented that staff knew people and their needs well. A review of the care documentation highlighted this knowledge was not well incorporated into the paperwork which supports care delivery and we have brought to the attention of the service provider, that action is required to bring this into line with legal requirements. Staff are safely recruited and are supported with training and supervision.

The home is safe and provides people with functional and comfortable surroundings. There are improvements which could be made that would better support people with a diagnosis of dementia enabling them to more easily orientate themselves within their environment.

The service provider has oversight of the service through the regular visits of the responsible individual. This is further promoted by the responsible individual’s quality of care review report.

2. Improvements

This was the first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016 and its associated regulations.

3. Requirements and recommendations

Please refer to section five of this report for full details of our findings.
1. Well-being

There are opportunities for people to express their opinions and make choices but the chances for people to influence their care are more limited. We observed staff interacting in a respectful and caring manner with people, offering people choices about important aspects of their day, for example, what activity they would like to do, what they wore, what they drank. This was confirmed by family and a professional visitor to the home, all of whom spoke highly of the service provided at Brynwood Care Home. However, the care documentation was not up to date and this required attention. People should be consulted as part of the care planning and review processes to ensure they are able to express how they would like their care delivered. The provider ensures people have some control over their everyday lives but needs to review and revise the care documentation in consultation with people to promote a greater sense of autonomy and well-being.

The home supports people to be healthy and active. We saw attention was paid to people’s physical health. Referrals to health professionals were made promptly when required and a visiting nurse told us any advice she provided was acted upon. A review of medication management practices did not identify any areas of concern. There were arrangements in place to ensure people saw their general practitioner in a timely manner. People we spoke with were complimentary of the care and support provided. In addition, we noted people’s psychological health was supported through the provision of activities which kept people engaged and active. The range of things on offer to people was highlighted to us as an area of strength for the home by people we spoke with. The service provider works to ensure people’s physical and emotional health and well-being are promoted.

There are mechanisms in place to protect people from abuse and neglect. We saw a comprehensive safeguarding policy. This provided staff with clear advice and guidance on such matters and explained to them the steps they needed to take if anything was disclosed to them or they became concerned about someone. Staff also received training on this important topic. Safeguarding matters were subject to audit by the responsible individual, meaning the provider had oversight of safeguarding referrals. The provider has clear processes in place to support people’s sense of safety and therefore their sense of well-being.

People are provided with a functional home with the required facilities and the environment is as described within the statement of purpose. An assessment of the environment, which considered the extent to which the home supports people with dementia, demonstrated there were improvements that could be made which would help people with a diagnosis of dementia to better orientate themselves. These are detailed within section three of this report. The environment is safe. The entrance to the home is protected by a key-code entry system. We saw the necessary health and safety checks were undertaken on a regular basis. The service provider offers people a comfortable home which could be improved to promote the well-being of those with dementia.
2. Care and Support

Support is provided to help people remain as healthy as possible. A review of the care documents for four people showed there was consultation with healthcare and other professionals when required. The diary maintained by the nurses demonstrated there was regular contact with people’s general practitioners. Any health concerns therefore received prompt attention. We spoke with a visiting nurse who talked positively about the home and the care it provided. She explained that her recommendations were always “taken on board”. We carried out a partial audit of the medications kept at the home. The treatment room was clean and well-organised. The records relating to medication administration were complete with no gaps or errors apparent. This indicated people received their medicines as prescribed. We did however discuss one person with the manager whose records showed they had refused medications. She advised this issue was due to be discussed with the person’s doctor but stated she would follow this up. There were also opportunities for people to engage in activities they enjoyed. This helped to promote their psychological health. We saw a large number of photographs depicting people engaged in various activities and during the inspection we saw people playing bingo. The nurse we spoke with mentioned the range of activities available to people as an area of strength for the home. The provider operates a service which pays attention to the physical and emotional health of people by ensuring prompt access to medical advice and other services, providing opportunities for people to be occupied in activities as well as through the safe management of medications.

Staff treat people with dignity and respect. Observations showed staff engaged with people in a warm and friendly manner and were caring in their approach. We spoke with the relatives of three people living at Brynwood. They all spoke highly of the staff and we heard comments such as: “the girls aren’t long in coming if I call them”, “the staff seem really lovely” and “the staff are marvellous, nothing is too much”. A nurse visiting the home also commented upon the quality of staff saying “the interactions are good” and “they know the residents well”. We saw people were well-presented in clothes of their choosing or which were appropriate to the circumstances. We did however note two occasions where staff were congregated and holding conversations with each other rather than with people living there. We raised this with the manager during the inspection visit and received an assurance this would be addressed. It is important to people’s well-being that they have a sense of belonging, this can be achieved through ensuring they are engaged in the conversations taking place. Nevertheless, people were offered choices about every-day matters, such as what they ate and how they spent their time. We therefore conclude the provider seeks to give people a sense of autonomy, thereby enhancing their sense of well-being.

There are personal plans in place for every person at Brynwood Care Home. Personal plans are essential documents which should inform staff about each person’s life history, their wishes, preferences, likes and dislikes, as well as their care and support needs and the actions required of staff to meet those needs. We considered the personal plans for three people. We saw the plans were reviewed on a regular basis, however those reviews did not always result in the necessary changes being made to ensure the plans remained current and accurate. We informed the provider legal requirements were not being met. A review of the daily records, which should detail all the care and support provided to each person, showed them to be very sparse with little information about how the person spent
their day. We recommended to the manager that consideration should be given to how these records might be improved. The provider needs to take action to bring people’s personal plans up-to-date to ensure staff have the necessary information to help promote well-being.

People are safe. We saw a safeguarding policy was in place. This was detailed and provided staff with all the necessary guidance to deal with any disclosures or allegations of harm or abuse. Staff also received training on this important topic. Observations of staff practice demonstrated they had an understanding of how to keep people safe. Equipment was used when necessary to assist people to move around. People provided with support to eat or drink were cared for patiently and unhurriedly. The records detailed the assistance people received to maintain their skin integrity. Collectively, these aspects of care provision help to promote a sense of well-being for people because they all support a sense of safety. The provider has mechanisms in place which enhance the safeguarding of people.
3. Environment

Brynwood Care Home offers people a functional home. A visual inspection of the home showed it was clean and free of malodours. There were two main lounge/dining rooms which were well utilised. We also conducted a more in-depth assessment of how well the environment supported people with dementia. This highlighted the following positive aspects to the home:

- Use of large signs clearly highlighting bathrooms and toilets.
- People’s rooms contained personal items and decorations promoting a sense of belonging.
- There were no unnecessary restrictions on people’s ability to move around the home.

The assessment also demonstrated there were parts of the home’s environment which might be improved to better support those living with a dementia illness:

- Consider removal of notices and notice boards where possible.
- Consider the home’s décor and how greater contrast might be introduced. This helps people to better orientate themselves within their surroundings.
- Consider how the furniture might be arranged in lounges to facilitate small groups of people sitting together. This can promote interaction between people thereby enhancing interpersonal relationships.

We discussed our findings with the provider’s well-being lead who responded positively and gave an undertaking she would review these matters. The provider offers people a generally comfortable home which meets their needs but which could be improved to better support people living with dementia.

People are provided with a safe home. The entrance to the home was secured with a code-entry system and visitors were asked to sign in to the premises. There were CCTV (closed circuit television) cameras covering the outside of the building. We reviewed documentation relating to health and safety matters. Management audits were carried out on infection control and we saw regular fire drills were conducted. There were health and safety certificates demonstrating regular checks were completed on electrical equipment and boilers. Fire safety equipment was checked regularly and the records indicated findings from an inspection by the Fire and Rescue Service had been addressed. The provider takes all necessary steps to ensure people are protected within their surroundings.
4. Leadership and Management

People are provided with the necessary information to allow them to make an informed decision about Brynwood Care Home. We reviewed the statement of purpose. This is an important document which should outline how the service is provided, the range of facilities available and the underpinning care philosophy. This document advised “We will support people to make decisions regarding their everyday life and if they are unable to do so, assist decision making with the person’s family, advocates and healthcare workers”. We found this was achieved as we saw staff seeking people’s opinions and offering choices throughout the day. Other aspects of the statement of purpose were consistent with what we saw. These included the emphasis on activities and the range of facilities available. The provider ensures the service is provided in accordance with the statement of purpose.

Staff are safely recruited and fit to work in a care environment. We reviewed the personnel files for four members of staff. These were well organised and it was easy to locate the information needed. Each member of staff had two references in place including, where appropriate, one from a previous employer in care. There was also evidence that a check with the Disclosure and Barring Service had been undertaken. This is essential to ensuring people are appropriate to work in a care environment. There were sufficient numbers of staff to meet the needs of people. Lounges were well supervised and care was provided in an unhurried, calm manner. This was confirmed by a review of the staff rota, which demonstrated there were adequate numbers of staff on each shift. The visitors we spoke to also commented on how prompt staff were when called. There was evidence staff received training necessary to fulfil their roles and of regular supervision for staff. In this context, supervision refers to a one-to-one meeting between a staff member and senior member of the team to discuss performance, support and development needs. We had recently received a concern suggesting that despite the above, there were instances where people were awoken early to be washed and dressed. We could see no evidence to support this. However, we discussed the matter with the home manager who provided a firm assurance she would look into the issue and address it at a staff meeting. The provider seeks to ensure there are sufficient numbers of suitably qualified and experienced staff to meet the needs of the people living at Brynwood.

There are processes in place to give people confidence the provider has oversight of the service. We saw evidence the responsible individual visited the service regularly. These visits allow for monitoring of the operation of the home and provide an opportunity for people living and working there to express an opinion about how the service is doing. A recent quality of care review report was also available. This gives a summary of the findings of the quality assurance tasks undertaken over a six-month period as well as a decision as to the quality of care and support provided and any development or improvement actions identified. We noted the manager carried out regular audits. The provider has effective oversight of the service and information from quality assurance processes is used to inform the development and improvement of the service.
5. Improvements required and recommended following this inspection

5.1 Areas of non-compliance identified at previous inspection

This was the first inspection under the Regulation and Inspection of Social Care (Wales) Act 2016.

5.2 Areas of non-compliance identified at this inspection

The service provider was non-compliant with Regulation 16 (5). This was because reviews of personal plans did not routinely result in the plans being revised to accurately detail people's current needs and the actions required to meet those needs.

We did not issue notice because we did not find evidence of significant impact upon people however, we expect the service provider to take immediate and effective action to address this matter.

5.3 Recommendations

We made the following service improvement recommendations:

- Ensure staff do not congregate together and hold conversations which exclude the people living there
- Consider how the content of daily records might be improved to provide a more rounded picture of people’s day
- The environmental matters outlined in part 3 of this report
- The manager should consider undertaking night visits to the home to assure herself residents are not awoken unnecessarily early
6. How we undertook this inspection

We carried out an unannounced inspection visit on 20 November 2019. The inspection was carried out as part of our annual inspection programme. To inform this inspection report the following sources of information were considered:

- The information held by CIW about the service
- The statement of purpose
- Conversations with people using the service and their visitors
- Discussion with a visiting professional
- The care documentation for four people
- A partial audit of medication management systems
- The King’s Fund ‘Is your care home dementia friendly’ assessment tool
- A visual inspection of the care home
- The health and safety records
- Personnel files for four staff
- Safeguarding policy
- Evidence of RI visits
- The quality of care review report
- Observations of daily life in the home
- Discussion with the home manager and the well-being lead for the company
- Staff training records

Further information about what we do can be found on our website:
www.careinspectorate.wales
About the service

<table>
<thead>
<tr>
<th>Type of care provided</th>
<th>Care Home Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Service Provider</td>
<td>Plasgeller Care Home Ltd</td>
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<tr>
<td>Responsible Individual</td>
<td>Mr Sanjiv Joshi</td>
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<tr>
<td>Registered maximum number of places</td>
<td>40</td>
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<tr>
<td>Date of previous Care Inspectorate Wales inspection</td>
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<td>Dates of this Inspection visit(s)</td>
<td>20 November 2019</td>
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<tr>
<td>Operating Language of the service</td>
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<tr>
<td>Does this service provide the Welsh Language active offer?</td>
<td>The service provider is working towards providing a service in Welsh (the active offer)</td>
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Additional Information:

**Date Published** 09/01/2020
No noncompliance records found in Open status.