



## Inspection Report on

**Bryn y Mor Ltd**

**Bryn Y Mor Residential Home  
Llaneilian  
Amlwch  
LL68 9NH**

## **Date Inspection Completed**

27/02/2020

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## **Description of the service**

Bryn Y Mor care home is located in Llaneilian, Anglesey. Bryn Y Mor Limited is the service provider. The care home is for up to 22 adults. There was a registered Responsible Individual (RI) for the service during the time the inspection visit was completed; the RI has since cancelled their registration. CIW are awaiting an application from a designated director for Bryn Y Mor Limited for the role of RI. The service has a manager in place registered with Social Care Wales (SCW).

## **Summary**

People are treated with kindness by caring, friendly staff. Personal plans and risk assessments are reflective of people's current individual needs however, they require review to ensure they are written in a more detailed, person centred and outcome focused way. We saw that there had been an improvement in the recording of medication administration. Electrical extension leads were not seen to be used within people's bedrooms. Quality assurance surveys are completed which contain the views of people living in the home, staff, family/representatives and professional services. People benefit from a service that is led by a manager who knows them and their staff team well. However, improvements are needed in relation to staff support through regular staff supervision. The environment would benefit from investment. Improvements are required to fully meet requirements in relation to staff recruitment, medication management, resolving any areas requiring maintenance in a timely way, written information about the service, activities, policies guiding care workers and notification of incidents to CIW.

# 1. Well-being

## Our findings

People have control over their day-to-day lives. We saw that people are settled and comfortable with the care workers supporting them; they treated individuals with courtesy and kindness. We observed positive relationships and warmth between staff and people living at the home. We saw people are happy and are able to make choices and decisions about their daily routines and where they spend their time and with whom; visitors were free to come and go to the service. People are able to contribute to decisions affecting their lives.

People's physical and emotional well-being is maintained and enhanced. Care documentation demonstrated people were referred to healthcare professionals as required. We reviewed personal plans and found assessment and care planning enabled people's individual needs to be met, however personal plans require more detail and improvement by being written in a more person centred and outcome focused way, efforts should also be made to ensure every resident or their representatives' involvement is evidenced. Our observations and review of care records showed that people received timely care, which was supportive of their independence. We saw the care home's menu which offered healthy, varied and appetising meals; people were consulted about the choice and quality of meals provided. The home was inspected on the 20 June 2019 by the Food Standards Agency and been awarded a food hygiene rating of four out of five, which is good. People benefit from a service where their physical, psychological health and well-being is sustained.

People are protected from harm; however, improvements are required to policies and employment procedures to further support this. Staff are trained in protection of vulnerable adults, and told us they would feel confident to report any concerns they had. A safeguarding policy is in place, however this would benefit from review to ensure the policy fully meets regulatory requirements. Improvements are required to ensure the service provider is fully assured staff are fit to work at the service. People live within a service where practices protect people from harm, however staff recruitment practices require strengthening and the safeguarding policy requires review to support this.

The upkeep and maintenance of the environment requires improvement. We saw the home was domestically furnished and people were relaxed in their surroundings. The home was clean with space for people to spend time together or alone as they wished. Improvements are required to ensure possible environmental risks to people's health are rectified without delay. There are areas of the environment that would benefit from redecoration, upkeep and maintenance. We conclude that people live in a suitable home; however, the timeliness in responding to possible risks within the environment requires improvement to fully ensure people are continually achieving a sense of well-being within the environment they live in.

## 2. Care and Support

### Our findings

People receive good care and support from a service which considers their personal wishes. People we spoke with told us they were happy living at Bryn Y Mor. People told us they were '*happy with the help and support provided*' and when asked if they were happy in this care home their response was '*feels like home*'. People told us they were able to get up and go to bed at a time of their choosing. People were supported to access resources to practice their faith and are able to keep pets i.e. bird or fish with the support of their relatives. On the day of inspection we did not see any activities taking place that were in line with the activity schedule, the manager confirmed this was because of care workers prioritising how they spent their time as a result of changes in a person's care needs. The manager informed us that music entertainers and a therapeutic dog visit the home regularly, and a visiting relative informed us of plans they had with another person's relative to keep people active through chair exercises. The manager confirmed that the activity book is no longer used as a result of storing information electronically, we recommend that a record of when people have joined in or refused to participate in activities be utilised to monitor what activities people enjoy and benefit from. We saw staff supporting people in a warm, kind and caring manner; and residents were very complimentary of the staff and the care they receive. We saw staff checking on people's welfare and observed people had the opportunity to converse with staff in Welsh and English. We conclude people experience warmth from staff who treat them with kindness and are offered a choice of how they wish to spend their time. However, the recording of activities and the activities available to people would benefit from regular review, in consultation with residents, to ensure that people are stimulated and involved in their preferred activities.

People are supported by care workers who have the information required to provide the correct care and support. Personal plans were functional and outlined the actions expected of care workers and we found that risks identified as part of the care planning process were supported by risk assessments; they were current and regularly reviewed. Improvements are required to ensure people's personal plans are written in a more detailed, person centred and outcome focussed way. People and/or their representatives' agreement should also be sought and documented to demonstrate people are fully involved in planning their own care. We conclude personal plans and risk assessments are in place to support the provision of quality care.

People are helped to keep well by the medication procedures in place, some improvements are needed for the management of medication. We saw that care workers were trained in the safe administration of medicines and that there is a medication policy in place, however the policy required review to ensure the document follows up-to-date best practice guidelines and does not reference out of date regulatory law. We saw that people are prescribed medication and that records are kept about how this is administered, we recommended to the manager that people's records require a picture of the person and that

prescribed creams require to be kept securely when they are in people's rooms. The medication fridge temperature was monitored and was at a satisfactory temperature; we highlighted to the manager that improvements are required to ensure there are no gaps in the daily recording of temperatures. People live within a care service where they are receiving medication to meet their health needs. The medication arrangements help to keep people well, some improvements are required.

People are supported by care workers who have the knowledge to keep them from harm. We spoke with care workers who demonstrated they know the residents well and know how to protect them. We reviewed the safeguarding policy and found the policy requires strengthening to ensure it meets regulatory requirements. We also reviewed policies in relation to fire safety and falls, whilst they provided staff with guidance they would benefit from regular review to ensure they are detailed and include the most recent of guidance available to inform care workers. A review of the staff records showed they had received recent safeguarding training. The service provider has measures in place to ensure people are protected against harm and abuse, however reviewing the safeguarding policy would enhance this further.

### **3. Environment**

#### **Our findings**

People live in a homely environment that meets their individual needs, however improvements are required to ensure any areas that require addressing are done so in a timely manner to support people's well-being. We saw that people had personalised their rooms to varying degrees with their own pictures, ornaments and memorabilia. We saw that the home had bilingual signage to support residents to orientate themselves around the service. People we spoke to stated that they were happy with their bedrooms. We saw that all areas of the home were clean; however, there were areas, which would benefit from further redecoration and maintenance. We did not find the service provider to take prompt action to ensure people are cared for in a suitably heated environment. On the day of inspection we found the bedrooms within the annexe area were cold and people were voicing that they were cold prior to receiving their lunch in the dining room. We saw that this was identified by the RI during their visit to the service on the 24 January 2020, however we received confirmation by the manager that the boiler had not been repaired on the 24 March 2020. Parts of the environment require improvement, such as the dining room wall had damp damage and there was crumbling plaster at the bottom of the wall, there were two bedrooms that also had damp damage. The manager confirmed that the damp had been treated and the service provider stated that the damage was caused by the roof requiring maintenance and repair. There is a tear in the vinyl flooring in a bedroom and the artwork within the environment was discussed with the manager and RI. People are safe and cared for in their home but improvements are required to ensure a more proactive approach to maintenance.

The service has systems in place to ensure people's safety; however, there are areas which require improvement to ensure a consistent approach. We saw evidence that the Portable Appliance Testing (PAT) test was completed and valid until November 2020. We requested an electrical installation condition report however have not received evidence that this has been completed. The service has a fire safety policy in place and residents have personal emergency evacuation plans. We saw that cleaning chemicals and vinyl gloves had been left unattended, vinyl gloves may pose a risk of choking to some vulnerable people. We recommend that cleaning chemicals and disposable vinyl gloves are not left unattended. We saw that many people's en-suite toilets lacked a toilet roll holder and toilet roll had been kept on top of the cistern, we have recommended that all rooms have suitable toilet roll storage to promote good infection control practice. Written records demonstrated that daily fridge and freezer temperature checks were being recorded, however there were gaps in recording. We saw this as an area for improvement to ensure temperatures are recorded on a consistent basis. We recommend audits be regularly completed to assess the environment and records to ensure the measures to ensure people's safety are robust.

## 4. Leadership and Management

### Our findings

People live in a service where the recruitment processes requires strengthening. We examined staff employment files and saw references had been sought for each employee and disclosure and barring service (DBS) requests had been completed. However, when we identified that a staff member had started a day before their DBS information was available, we were told that new employees were supervised when providing care and support until (DBS) information was available. Following discussion with the manager, they stated that the process of employing future staff would be strengthened with immediate effect. The staff files we reviewed did not include a recent picture of staff members; however, there was a picture of the staff available electronically for two out of three of the staff files we sampled. We also found there was no risk assessment in place for a staff member who had positive DBS check. We recommend that the service reviews their recruitment processes to ensure they are fully compliant with regulatory requirements.

People receive support from a motivated workforce, however improvements are required in ensuring care workers are formally supervised. Discussions with staff members showed them to be enthusiastic about their work and they felt enabled to care for people well. People and care workers benefit from the stability provided by an experienced manager. We observed the manager was known to the people living at the home and they, and care workers, were able to approach the manager with ease. Care workers told us they felt supported by the manager and saw records that demonstrated bi-monthly staff meetings were held however not all staff have received regular formal supervision. Care workers should receive supervision on a three monthly basis. Staff records showed care workers received regular training and staffing rotas demonstrated staffing numbers were consistent with the needs of people living at the home. We saw that staff spent time with people and we observed people's needs being met. This leads us to conclude that sufficient numbers of trained staff support people living in the home, however more frequent one to one supervision sessions for staff are required.

People can be assured that there are systems in place to assess the quality of the service in relation to outcomes for people; however, the notification of incidents and events to CIW require improvement. We reviewed the service's Quality Assurance surveys; the reports consider the views of individuals who use the service, staff and stakeholders. The RI evidences they complete formal visits to the service at least three monthly to review the quality of care provided. The service has failed to notify CIW of two occurrences that are notifiable by regulations, one in relation to the removal of a company director and one in relation to staff misconduct. Improvements are needed in relation to notifying CIW of notifiable events that may affect the running of the service.

## **5. How we undertook this inspection**

This was the first inspection of the service following re-registration under The Regulation and Inspection of Social Care (Wales) Act (RISCA) 2016. A full inspection was undertaken as part of our inspection programme. We made an unannounced visit to the service on 27/02/2019 between 8:45 a.m. and 8:20 p.m.

We used the following sources of information to formulate our report:

- Statement of purpose;
- Service User Guide;
- Quality of Care surveys dated January 2019 and October 2019;
- food menu;
- observations of daily routines and care practices;
- discussions with the responsible individual, manager, eight people using the service and three staff;
- we looked at personal plans and associated documentation relating to three people living at the home;
- employment files for three members of staff;
- staff training records;
- staff meeting records for 15 August 2019 and 18 October 2019;
- residents meeting record 21 October 2019;
- joint staff and residents meeting 11 December 2019;
- copies of the care home's weekly staff rotas for February 2020;
- RI visit records dated 17 September 2019, 25 November 2019 and 24 January 2020;
- tour of the home including communal areas and sample of bedrooms;
- we reviewed policies regarding medication, fire, safeguarding and falls;
- we received completed questionnaires from three people living at the service and one relative.

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

[www.careinspectorate.wales](http://www.careinspectorate.wales)



## About the service

Type of care provided	Care Home Service
Service Provider	Bryn y Mor Ltd
Responsible Individual	The responsible individual cancelled their registration during the inspection process. CIW are awaiting an application from a designated director for Bryn Y Mor Ltd for the role of RI.
Registered maximum number of places	22
Date of previous Care Inspectorate Wales inspection	29/11/2018
Dates of this Inspection visit(s)	27/02/2020
Operating Language of the service	Welsh and English
Does this service provide the Welsh Language active offer?	Yes
<b>Additional Information:</b>  This is a service that provides an 'Active Offer' of the Welsh language. It provides a service that anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.	

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