Inspection Report on

Brynwood Care Home
Intermediate Road
Brynmawr
NP23 4SF

Date of Publication

4 October 2018
**Description of the service**

Brynwood Care Home is situated in Beaufort, near the town of Ebbw Vale.

It is registered with Care Inspectorate Wales (CIW) to provide nursing or personal care to a maximum of 40 people over the age of 65 years. The service also has a condition of registration which allows them to accommodate, within their numbers, up to three people over the age of 65 years with a diagnosis of dementia who require nursing care.

Brynwood Care Home is operated by Plasgeller Care Homes Ltd. The company has a nominated responsible individual who oversees the management and operation of the service.

The registered manager was absent on the days of inspection. We were informed that there were 28 residents at the home on the day of inspection.

**Summary of our findings**

1. **Overall assessment**
   People are settled, content and have good relationships with the staff that care for them. The home has a welcoming and homely atmosphere. People have opportunities to feel involved in life at the home and to participate in social/recreational activities in order to enhance their overall well-being. People benefit from healthy food options and their individual needs and preferences are mostly understood and anticipated. Overall people can be assured they are protected, their safety is maintained and their right to privacy is respected within a secure environment. People can be sure that there are robust, transparent systems in place to assess the quality of the service they receive. The home provides clear information so that people know and understand the care, support and opportunities which are available to them. People are supported by a stable and dedicated care team. However, management should ensure that staff numbers are maintained in line with the staff rota. People receive care and support from staff who are mostly safely recruited and appropriately trained for the roles they undertake.

2. **Improvements**
   We identified the following improvements since our last inspection:
   - The service user guide and statement of purpose now meet regulatory requirements.
   - Care documentation is now reviewed on a regular basis
   - Quarterly monitoring reviews are undertaken…
   - Sluice rooms were locked and secure.

3. **Requirements and recommendations**
   Section five of this report sets out our recommendations to improve the service.
1. Well-being

Summary
People are settled, content and have good relationships with the staff that care for them. The home has a welcoming and homely atmosphere. People living at the home and their visitors are complimentary about the care and support provided at the home. People have opportunities to feel involved in life at the home and to participate in social/recreational activities in order to enhance their overall well-being.

Our findings
People are able to exercise choice and control over their every-day lives. We observed from staff interaction with people that consideration was given to peoples’ wishes, likes and dislikes. We saw that people were able to choose where they wanted to spend their time, either privately in their bedroom or in one of the communal areas. We observed care workers asking people how they wished their individual care needs to be addressed, where they wanted to spend their time, and what they wanted to do. We examined care records and saw that peoples’ individual likes and preferences were identified. People told us that care workers offered a choice of meals and we saw that care workers asked people their preference of food and drink at lunch time. Therefore, people’s views and opinions are acknowledged, thereby promoting a sense of belonging and value.

People living at the home relate well and have good relationships with the staff that care for them, and are satisfied with the care they receive. We saw that care workers spent most of their time with people delivering care, participating in activities and generally chatting. Staff appeared to be aware of people’s individual needs and responded to people with kindness and respect in a calm, unrushed manner. We saw that interactions between care workers and people were warm and kind, and for the most part meaningful. We observed that interactions between residents and staff were not just task focused but engaging and positive. We spoke to two independent advocates who told us that there had been significant improvement in care over the past five years. One advocate told us ‘I would let my relative stay here now’ and that ‘staff care for the person not just doing care tasks’.

People living at their home and their visitors were complimentary about the care they received, and were positive about their relationships with staff. Examples of what we were told were:

‘Staff are great’
‘Food is good’
‘The quality of care is high- they can be short staffed at times but they cope’ (relative)

We conclude that people are happy and content living at the home
People are able to choose and participate in activities. Care plans we examined clearly documented peoples' likes, preferences and what was important to them. The service employs an activities co-ordinator who works 20 hours a week. They are able to use these hours flexibly throughout the week. We saw that the home had a range of timetabled social and recreational, events and activities. These included Zumba classes and themed meal times, relevant music was played and residents were encouraged to dress according to the theme. In addition, Bingo evenings were organised and relatives were encouraged to take part, as well as activities such as arts and crafts and trips out to the cinema. On the day of our visit we saw residents and staff engaged in a variety of group and individual activities. There was a keep fit class and bingo event. On the day of our visit we saw relatives and friends freely visiting the home, and they were made welcome by care workers. People can therefore do things that matter to them and have opportunities to feel involved in life at the home and to participate in social/recreational activities in order to enhance their overall well-being.

We were told by the registered manager that, in addition to translating the statement of purpose into Welsh, they provided Welsh flash cards for every day things, developed bi-lingual signs and identified Welsh speaking staff. Although the home does not anticipate that they will be asked to provide a Welsh language service in the near future, the above shows that they are working towards providing an ‘Active Offer’ of the Welsh language.
2. Care and Support

Summary
People have good relationships with staff and are treated with dignity and respect. People benefit from healthy food options and people’s individual needs and preferences are mostly understood and their care needs are anticipated.

Our findings
People mostly receive person centred care focused on their individual needs, preferences and wishes. We examined four care files and found that these contained all the necessary documentation. We saw that care files were comprehensive and clear about people’s identified needs and how they were to be met. At the last inspection we noted that people’s care plans were not reviewed and updated following indications of a change in their care and support needs. At this inspection, we saw that care reviews were carried out on a regular basis. However, we noted that whilst fluid intake was recorded, the amounts were not being totalled at the end of each day to ensure that people were getting enough fluids. We found that referrals were made in a timely way to relevant health and social care professionals. We saw from individual care records that people were referred to healthcare professionals for treatment when required such as the general practitioner, speech and language therapy, dentist, optician, community nursing services, and dietician. During our visit, a visiting professional told us they “staff had a good attitude” and that ‘people seem happy and well cared for’. Therefore people receive the right care at the right time and in the way they want it.

People’s medication is managed safely. Medicines were stored securely in a suitable locked medication trolley, located in a locked room. Records evidenced that daily temperature recordings of the medication fridge had been undertaken and were within a satisfactory range for the safe storage of medication. We reviewed a sample of people’s medication administration records (MARs) which were accurate and complete. During our inspection visit we observed that medicines were administered safely, and good practice was adhered to on each occasion. This indicated that staff followed safe medication administration practices. Therefore, people are safeguarded by the home’s medication procedures.

People are offered healthy and nutritious meals and drinks. People had access to healthy and varied food options. Snacks such as a choice of fresh fruit, biscuits and hot and cold drinks were offered throughout the day. The home had a four weekly menu and the cook told us that they discussed and reviewed the menu with people living at the home. A daily menu was displayed on white boards in both lounges and people were given choice of what they wanted to eat and drink. We observed lunch being served and found it to be a quiet, relaxed occasion. We conclude that mealtimes are a positive experience, and that people’s nutritional needs are being met.
3. Environment

Summary
Overall people can be assured that they are protected and their safety is maintained and their right to privacy respected within a secure environment. The environment supports people’s well-being and people are protected from harm. Their safety is maintained and their right to privacy is respected.

Our findings
People are protected and their safety is maintained. We found access to the home to be secure via a call bell entry and key pad system. This helped reduce the risk of unauthorised access to the home. Visitor identity was checked before entering the property along with signing of the visitor book. We saw that the CIW registration certificate was correct and displayed in the entrance hall along with a current insurance certificate. We noted that there was a large notice board in the hallway that provided a range of information as well as that latest statement of purpose and service users guide. We reviewed a sample of documentation and certification which evidenced that health and safety checks and measures in relation to portable appliance testing (PAT), gas installation and safety records, and electricity were satisfactory and up to date. Therefore, people are protected from harm, their safety is maintained, and their right to privacy respected within a secure environment.

People benefit from a safe, clean and secure environment, the layout of which enables them to easily spend time privately or communally. The home has two residents’ lounges and the décor was homely and welcoming. The home appeared generally well maintained. We noted that the sluice rooms were locked and secure. People’s rooms contained personal items of their own choosing, and people who wanted to had photographs outside their bedrooms. We observed people and their visitors using the communal areas of the home freely according to their wishes. The home had sufficient bathing and toileting facilities for the people living and working there. The home was generally tidy. The home was very clean and free from unpleasant odours throughout. There was cleaning being undertaken throughout our visit. We conclude that the environment suits people’s needs, is uplifting and homely.
4. Leadership and Management

Summary
People can be sure that there are robust, transparent systems in place to assess the quality of the service they receive. The home provides clear information so that people know and understand the care, support and opportunities which are available to them. People are supported by a stable and dedicated care team; however, management should ensure that staff numbers are maintained in line with the staff rota. People receive care and support from staff who are mostly safely recruited and appropriately trained for the roles they undertake.

Our findings
There are robust, transparent systems in place to assess the quality of the service, which includes obtaining feedback from people using the service and their representatives. The home provided people with the opportunity to attend coffee mornings where their views about the home were discussed. We saw that three monthly quality monitoring visits were undertaken by the responsible individual and a report followed these visits. We saw that there was an ongoing process to review the quality of care provided at the home which included feedback from people living at the home and their visitors, which was generally positive. We conclude that people are consulted about the service they receive and that the registered provider demonstrates a commitment to quality assurance and constant improvement.

The home’s vision and purpose is made clear through its statement of purpose. This is an important document which should be kept under review. It should provide people with detailed information about the services and facilities offered within the home and should also outline the home’s underpinning philosophy and approach to care delivery. We noted that the document had been reviewed to reflect the requirements of the new care legislation. This shows that the home provides clear information so that people know and understand the care, support and opportunities which are available to them.

People are supported by a stable and dedicated care team. Staff we spoke with were satisfied working in the home and they told us that they felt supported by management. However, staff also told us that, on occasions, staff sickness was not covered which impacted on the quality of care provided. The responsible individual told us that bank staff were being recruited to address this, which would help cover sickness and holidays. On the days of inspection we observed that care was provided in a calm unrushed manner. We did not observe any unmet needs during our inspection visit. We saw that generally staff spent time sitting with people participating in activities, or chatting when not undertaking personal care. We conclude that staff have sufficient time to spend with people to ensure their emotional and psychological needs are met as well as physical and health care needs,
however, management should ensure that staff numbers are maintained in line with the staff rota.

People receive care and support from staff who are mostly safely recruited and appropriately trained for the roles they undertake. We examined four staff files which contained the required information to ensure their suitability and fitness. It was evident from the staff personnel files examined that the necessary pre-employment checks to ensure that staff were fit to work at the home, such as references and disclosure and barring service (DBS) checks, had been completed and found to be satisfactory. However, we found that two staff application forms contained gaps in employment history which had not been followed up. We recommended that the interview record form contained a section for managers to record gaps in former employment history. Care workers told us that they had sufficient training to undertake their roles competently. We saw that staff had achieved qualifications under the Qualifications and Credit Framework (QCF) and that training records contained details of training relevant to the care needs of people such as infection prevention and control, medication administering training, first aid and protection of vulnerable adults. Policies were available to support practice at the home. Staff told us that they felt supported, however the staff personnel files we examined evidenced that some staff had not received regular one-to-one supervision. Management told us that this was being addressed as a matter of priority. Staff meetings were held regularly and minutes detailed that matters such as regulatory changes, training and care plan reviews were discussed. This indicates that staff are mostly recruited, supported and trained in a way that improves outcomes for people.
5. Improvements required and recommended following this inspection

5.1 Areas of non compliance from previous inspections
The registered provider was not compliant with regulation 15(2) (d) of the Care Homes (Wales) Regulations 2002. This was because people's care plans were not reviewed and updated following indications of a change in their care and support needs. A non compliance notice was not issued as no adverse impact was identified.

We found that the registered provider was now compliant with this regulation.

The registered persons were not compliant with regulation 4(1) of the Care Homes (Wales) Regulations 2002. This was because the statement of purpose did not clarify

- The arrangements for consulting residents about the running of the home.
- The arrangements for reviewing the service user guide.

A non compliance notice was not issued as no adverse impact was identified.

We found that the registered provider was now compliant with this regulation

5.2 Areas of non compliance identified at this inspection
None.

5.3 Recommendations for improvement
We made the following recommendations to help improve the service:
- Fluid intake data is totalled at the end of each day and analysed to ensure that people receive sufficient fluids.
- Management should ensure that staff numbers are maintained in line with the staff rota.
- The staff recruitment process should check continuity of employment and the reasons for any gaps should be documented.
- Management should ensure that staff receive regular supervision in line with regulations.
6. How we undertook this inspection
We undertook a full, unannounced inspection on 3 and 6 August 2018. We looked at aspects in all four domains including; people’s well-being, their care and support, quality of leadership and management and quality of the environment.

The information and evidence for this report was gathered from the following sources:

- Consideration of information held by and provided to CSSIW by the service and about the service.
- An observation using the Short Observational Framework for Inspection (SOFI2) tool. The SOFI2 tool enables inspectors to observe and record life from a resident's perspective, how they spend their time, activities, interactions with others and the type of support received.
- Discussion with residents and relatives.
- Discussion with employees.
- Discussion with the responsible individual.
- Examination of care documentation in relation to four residents.
- Examination of employee documentation in relation to four employees.
- Examination of other documents evidencing how care delivery to residents was managed.
- A partial medication audit.
- Observation of the care home environment.
- Review of the documentation evidencing maintenance of equipment and utilities.
- Statement of purpose.

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>Adult Care Home - Older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Registered Person</td>
<td>Plasgeller Care Home Ltd</td>
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<tr>
<td>Registered Manager</td>
<td>Sian Marshall</td>
</tr>
<tr>
<td>Registered maximum number of places</td>
<td>40</td>
</tr>
<tr>
<td>Date of previous Care Inspectorate Wales inspection</td>
<td>31 August 2017</td>
</tr>
<tr>
<td>Dates of this Inspection visits</td>
<td>03 &amp; 06 August 2018</td>
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<tr>
<td>Operating Language of the service</td>
<td>English</td>
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<tr>
<td>Does this service provide the Welsh Language active offer?</td>
<td>This is a service that is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.</td>
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**Additional Information:**