



# Inspection Report on

**Ceiriosen Bren**

**Llandysul**

**Date Inspection Completed**

*27/02/2023*

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## About Ceiriosen Bren

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Inspiration Lifestyle Services Limited
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	<a href="#">29 October 2021</a>
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

### Summary

The service is in the process of transferring ownership to a new provider. People and their representatives are very happy with the service they receive, a family member told us *“We are really happy and they have worked wonders with [person]”*. Motivated support workers are guided by accurate and detailed person-centred plans that focus on what individuals can do for themselves. People are encouraged to be as active and as independent as possible; a support worker said, *“it’s great to see people are so busy and happy doing things”*.

The environment is homely and reflective of the people who live there and there is a big focus on inclusive communication throughout. Maintenance checks of the building and equipment are completed.

The manager of the service has a hands-on approach, they are accessible and well respected by people who live and work at the service. The provider has good oversight of the home and focuses on improving the quality of service for people. The Responsible Individual (RI) completes reports with detailed actions following their quarterly visits.

## Well-being

People receive person centered support and are involved in decisions about the service they receive. Detailed information is recorded in plans, individualised communication tools mean people speak for themselves and direct their service. People remain as healthy as possible because staff support them with guidance and advice from health and social care professionals. People contribute to decisions that affect them because staff involve them in developing and reviewing their personal plans, which focus on things that matter to them. A worker told us *“I love them (people) to bits and wouldn’t change anything”*. People use public transport to access their local community; activities are individualised and promote health and well-being.

Recruitment and training ensures people get the right care and support, from skilled and knowledgeable workers. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People and/or their representatives are able to make a complaint if needed.

The building is homely and people personalise their own rooms as they choose. Communal areas are comfortable, bright and spacious. People use the different spaces available to do things they enjoy, for example watching TV, playing pool, gaming and cooking for each other. Gardens are accessible and people can do things that matter to them.

People have a voice and input into the running of the service because the RI involves them in quality assurance. Governance processes focus on developing the service by using information from surveys and audits. The Quality of Care Review identifies areas to improve following consultation with people who live and work at the home.

## Care and Support

People are very happy with the support they receive from skilled staff who understand them, their individual needs and preferences. Representatives are positive about the service and the effective relationships people have built with their support workers. A family member told us *“The staff are great, they understand him and know how to get the best out of him”*.

People have personalised, accurate and up-to-date plans on how they choose to be supported. Documents focus on people’s strengths and clearly guide staff on how best to support them. The manager considers a wide range of information from the person, their representatives, workers and external professionals. Risk assessments help to maintain people’s safety, while promoting their independence. The manager regularly reviews plans with individuals and their representatives so they remain relevant. Daily notes are detailed and show the support people receive to work towards their goals. For example, people go to the local shops, cafes and volunteer at a local community farm, a dog sanctuary and activity centre. There is good evidence of health and social care professionals being involved in people’s lives.

Many of the support workers have been at the service for years and have longstanding relationships with individuals. Interactions between people who live and work at the service are very positive and patient. Staffing levels are sufficient and the manager allocates dedicated one-to-one time in line with each person’s assessed needs.

Medication is administered appropriately and the provider has policies and procedures to manage the risk of infection. There are good hygiene practices throughout and staff follow the latest Public Health Wales guidance.

## Environment

The environment supports people in line with their needs. People use the different communal areas to socialise, do activities or to have quiet time alone. People appear very comfortable throughout the service. Individual's rooms are personalised and people can decorate as they wish. Accessible and well maintained grounds are used throughout the year. People have pride in their home and enjoy cleaning and maintain the building to a high standard.

Managers complete regular Health and Safety audits of the property. Substances that are potentially hazardous to health are stored safely. Testing of fire safety equipment is up-to-date and actions from the last fire regulations inspections have been completed. Personal Emergency Evacuation Plans are individualised and available in emergencies.

The kitchen is accessible to everyone and has a food hygiene rating of five. Support workers promote independence and encourage people to buy and prepare their own meals. People discuss and agree the menu together and alternative meals are also available if people wish to choose something different.

## Leadership and Management

The home is being managed by a new provider and they have effective arrangements in place for monitoring, reviewing and improving the quality of the service. The RI has remained in post through this transition period and their statutory quarterly visits involve people, their representatives and support workers. Staff told us they feel supported by the new senior managers and are in the process of getting to know them. Managers use accessible surveys to gather feedback from people to allow them to communicate their views about the service. Information from internal quality assurance systems informs the action plan that focuses on improving the service. The six monthly Quality of Care Review; shows positive feedback from individuals, staff and professionals. These reviews would benefit from feedback from people's representatives.

There is an open and supportive culture at the service. The manager is accessible and helpful. A support worker told us *"[Manager] is amazing, I trust her and I respect her"*. Person focused team meetings take place and staff constructively share challenges and good practice. Workers confirm they receive regular supervision meetings and appraisals and records corroborate this. When discussing their supervisions a support worker told us *"[Manager] is very calm and fair, our conversations are confidential"*. Staff members have a good understanding around safeguarding. Procedures are in place to support good practice and staff have a sufficient understanding of key policies.

The provider intends to transfer their care and personnel information onto a new electronic system. A senior manager told us this system will make planning and reviewing personal plans more effective as well as improving their oversight of the service.

Pre-employment checks take place before new employees start work. These include references, right to work and Disclosure and Barring Service (DBS) checks. Staff receive mandatory, person specific and developmental training to meet people's needs and enable outcomes. When discussing training a support worker said *"training is good and keeps us up to date, the face to face training with the Manager or RI is good"*.

Adequate numbers of staff meet people's needs. A stable and consistent staff team ensures people get continuity and the most effective support to meet their needs. A persons representative said *"We have been very lucky to find the home and [Person] has developed so much"*.



### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	Compliance was reviewed at this inspection and was not achieved. The target date for compliance is in the future and will be tested at next inspection.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	Compliance was tested at this inspection and was achieved.

We respond to non-compliance with regulations where poor outcomes for people, and / or risk to people’s well-being are identified by issuing Priority Action Notice (s).

The provider must take immediate steps to address this and make improvements. Where providers fail to take priority action by the target date we may escalate the matter to an Improvement and Enforcement Panel.

### Priority Action Notice(s)

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A

Where we find non-compliance with regulations but no immediate or significant risk for people using the service is identified we highlight these as Areas for Improvement.

We expect the provider to take action to rectify this and we will follow this up at the next inspection. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

### Area(s) for Improvement

Regulation	Summary	Status
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N/A	No non-compliance of this type was identified at this inspection	N/A
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