



Inspection Report on

Ty Brynteg

Porth

Date Inspection Completed

03/05/2023

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About Ty Brynteg

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ocean Community Services Limited
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	02 November 2021
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

Ty Brynteg provides care and support to people with a range of different needs, some of which could be considered challenging. A person-centred approach to care planning ensures people's outcomes are identified and met. Risks are thoroughly assessed and managed. Multi-disciplinary team reviews ensure people get the right care at the right time.

People are cared for by a dedicated staff team who enjoy their roles and feel valued and supported by the management. There is a safe recruitment process ensuring care staff are suitable to support vulnerable people and there are safe and effective staffing levels. Care staff are trained to meet the needs of the people they support and are aware of their responsibilities in relation to keeping people safe. There are robust governance and quality assurance measures in place helping the service run smoothly.

The environment is clean, comfortable, and well-maintained. Regular health and safety audits ensure hazards are identified and actioned. People are encouraged to personalise their rooms and communal areas both in and outside of the building provide pleasant spaces where people can relax or participate in activities.

Well-being

The service promotes people's physical, mental health and emotional well-being. People have access to a range of health and social care professionals when needed. Activities on offer are held in the home and wider community helping people access community facilities and engage in a wide range of pursuits they enjoy. People are supported to consume a healthy diet. Care staff help people to shop for groceries and prepare their food.

People are treated with dignity and respect and can voice their opinions. Care staff are warm and friendly and are familiar with each person's care and support needs. Personal plans are developed in conjunction with the person, their representatives and wider multi-disciplinary team. People are encouraged to achieve their own goals and ambitions and there are plans helping people do this safely. People are involved in the review process to ensure they have a say about the care and support they receive.

There are systems helping to keep people safe. There is a safeguarding policy and care staff know the process for raising concerns. Detailed risk assessments provide information regarding people's vulnerabilities. Care staff receive relevant training in areas such as safeguarding, medication management and health and safety.

The environment helps support people's well-being. The home is clean and comfortable throughout. People can personalise their rooms to their preference. Communal areas are nicely decorated and suitably furnished. There is a large garden area people can use when they choose to do so. The home is well-maintained. Regular checks, servicing and repairs ensures the environment is safe.

Care and Support

People are happy with the care and support they receive and have positive relationships with care staff. People we spoke to provided complimentary feedback regarding the service provided and the staff who deliver their care. One person said, *“It was my decision to move here. I like it here, it’s great”*. Another person told us, *“The staff are absolutely lovely. I get on well with all of them”*. Positive interactions between staff and people we witnessed during our inspection supported people’s comments. We saw staff engaging with people in meaningful conversations. It was clear care staff know the people they support well and are familiar with how best to communicate with them.

Personal plans consider peoples outcomes and provide clear instructions with regards to supporting people to achieve their goals. We examined a selection of personal plans and found they are person centred. This means they are specific to each persons care and support needs. They contain clear and concise information in relation to the practical care and support people require. For example: Positive Behaviour Support (PBS) plans highlight proactive strategies to prevent triggers which could set in motion instances of challenging behaviour. They also set out reactive strategies to calm potentially challenging situations. Risk assessments are detailed providing information on how to keep people safe. Routine reviews are undertaken to ensure care documentation is current. The service adopts a multi-disciplinary approach to the review process to make sure people experience the best possible outcomes. Care staff we spoke to confirm care documentation contains a good level of information helping them provide quality care and support.

As well as containing information regarding peoples care and support needs, personal plans outline people’s likes, dislikes, and activities they enjoy. Personal plans we viewed show people have access to a wide range of activities including leisure pursuits, domestic tasks, volunteering and educational opportunities. One person explained care staff support him to attend classes in a local community centre.

People have access to a range of health and social care professionals and medication is stored and administered in line with best practice guidance. We saw timely referrals are made and all medical correspondence and appointments are recorded in people’s personal plans. There is a comprehensive medication policy which is aligned with current best practice guidance. Medication is securely stored and administered as prescribed. We examined a number of medication administration records (MAR) which confirmed our findings. Routine medication audits are undertaken to ensure discrepancies are identified and actioned.

Environment

The home can accommodate up to five people. There is also a separate self-contained flat within the grounds providing accommodation for one person. The home is secure from unauthorised access. Confidential information and substances hazardous to health are securely stored and can only be accessed by authorised personnel. Communal areas are uncluttered, comfortable and nicely decorated. People's rooms are decorated to their preference and contain personal items. Some rooms have ensuite bathroom facilities. People in rooms without ensuite facilities have access to communal bathrooms which are clean and well maintained. We conducted a visual inspection of the home and found it was clean throughout and free from hazards. People have access to a large garden which has a number of areas providing seating. People are able to utilise this space for relaxing or participating in activities.

A rolling programme of maintenance and checks ensures the environment, it's facilities and equipment are safe to use. We saw up to date safety certification for utilities and fire safety features. All people living at the home have a personal emergency evacuation plan (PEEP) in place. This document provides care staff with practical information regarding the best ways of supporting people to evacuate the building in the event of an emergency. Monthly health and safety audits are completed so that any potential hazards can be identified and reported for repair or replacement.

Leadership and Management

Quality assurance measures are strong, helping the service reflect and develop. Regular quality of care reviews help monitor the services performance. We looked at the latest quality of care reports and found they clearly highlight the services strengths and areas it can develop further. People are consulted regarding the service they receive. The service also seeks the views of other professionals and staff to inform improvements. The Responsible Individual (RI) visits the home regularly to maintain oversight of service provision and meet with people and staff to gather their views about the service. Records show the RI is up to date with all their specific duties.

Policies and procedures underpin safe practice. We viewed several policies and procedures including Behaviour Management, Safeguarding, Medication and Whistleblowing. We found the policies are detailed and contain current statutory and best practice guidance. Policies and procedures are kept under review and updated when necessary. Other written information we viewed included the statement of purpose and user guide. We found both documents accurately describe the service, are available in a selection of formats including easy read and contain all the required information.

Care staff are recruited in line with regulation and have access to an ongoing programme of training and development. We examined several personnel files and found all the required pre-employment checks had been completed prior to offering a potential employee a contract. These checks include references from previous employers and Disclosure and Barring Service (DBS) checks. New employees have to work a probationary period where they have to complete a structured induction. Following this ongoing training is provided to ensure care staff are sufficiently skilled. Records we viewed in relation to training show the service is 97% compliant with its training requirements.

Care staff are happy working at the service and feel competent in their roles. Care staff we spoke to used words like *“brilliant”*, *“supportive”* and *“approachable”* to describe the manager. They explained they have regular supervision sessions where they get the opportunity to discuss work related matters and reflect on their performance. We looked at the services supervision matrix which confirmed care staff receive the recommended level of managerial support. Care staff told us working at Ty Brynteg can present challenges, but, on the whole, it was a nice place to work and they felt supported by fellow team members and the management.

Summary of Non-Compliance

Status	What each means
New	This non-compliance was identified at this inspection.
Reviewed	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.
Not Achieved	Compliance was tested at this inspection and was not achieved.
Achieved	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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Date Published 25/05/2023