

Inspection Report on

Bryn Ivor Lodge

Bryn Ivor Lodge Care Home Bryn Ivor Lodge Newport Road Cardiff CF3 2UQ

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

11/08/2022 09 August 2022, 11 August 2022



About Bryn Ivor Lodge

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Barchester Healthcare Homes Limited
Registered places	80
Language of the service	English
Previous Care Inspectorate Wales inspection	27 September 2019
Does this service provide the Welsh Language active offer?	The service 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.

Summary

Bryn Ivor Lodge is registered to provide care services with nursing for up to 80 people. This includes specialist provision for people living with dementia, in the 'memory lane communities.' People living at the service and their loved ones told us about the very high-quality care and support they receive.

Personal plans are clearly written and instruct care workers on how best to support people. Plans are reviewed regularly to make sure they reflect people's current needs and aspirations. Care records are kept accurately and consistently.

The home was purpose built, the environment is extremely well maintained and provides a luxurious, homely and relaxed atmosphere for people to live in.

The service is exceptionally organised and benefits from strong management and oversight. Care workers enjoy working at the home and feel very well supported in their roles. We found some gaps in the records of staff which we expect the provider to address. The Responsible Individual (RI) visits regularly and knows the care staff and residents well.

Well-being

People have control over their day-to-day lives as much as possible. We saw people socialising with each other and engaging with care workers. People choose where to spend their time. We saw some people prefer to stay in their rooms, whilst many spend time in the communal areas.

People and their relatives have regular house meetings to give their views on the running of the home. The home welcomes visitors in line with current guidance and the providers risk assessments. People and their loved ones we spoke to were very complimentary about the home and care staff. One person told us "I love it here. The staff are all very kind and considerate. There is always enough staff around and they are very good too. I like the food very much and I always clean my plate, there is a really good variety of meals on offer. The kitchen will always cook whatever I want if I don't fancy anything on the menu." A family member told us about their loved one "Their improvements have been tremendous since coming here. The care is professional and more than care, they are excellent. I get immediate answers whenever I ask how they are doing either when visiting or on the phone. The staff I see are the same faces every time which is reassuring. The staff seem very experienced and knowledgeable."

People receive the support they need to maintain their health and well-being. The service completes a range of risk assessments and personal plans, which identify each person's care and support needs and how these can best be met.

People have their own rooms, which all have spacious, well maintained en-suite shower facilities and are personalised to their individual tastes. The memory lane communities have tasteful boxes outside each room which contain a familiar picture or reminder of that person's fond memories.

The service helps to protect people from abuse and neglect. Care workers complete training in relation to the safeguarding of adults at risk and understand their role in protecting people. The service has a safeguarding policy, which reflects the current guidance and is kept under regular review.

Care and Support

People receive outstanding care and support as and when they require it. We observed care workers to be attentive and supportive to people. The care needs and preferences of each person are clearly documented, and care staff access this information to inform their daily routines. Plans contain a detailed social history of each person so care staff can get to know them and their lives before coming to the home. Plans are regularly reviewed with people and their loved ones to ensure they are up to date and reflect people's current needs and aspirations. Accurate and detailed records are kept by care staff to evidence people are supported as described in their personal plans.

Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP). Records are kept of all appointments and outcomes for review as required within the daily notes. People are supported to maintain a healthy weight and diets are reviewed when required. Drinks are readily available for people throughout the day.

Activity co-ordinators arrange activities for people and encourage people to take part if they choose to do so. We saw people enjoy engaging in a range of activities during our inspection, including skittles and balloon tennis. Some people preferred not to join in but told us they enjoyed watching others. We saw evidence of less able people having regular one-to-one support to engage in activities of their choice, this includes reflexology, hand massages, and beauty treatments. The service follows the 'Namaste' model of care for people living with advanced dementia, this focusses on the person rather than a process and is considered best practice.

People thoroughly enjoy their meal experience which is a pleasant, relaxed and social time of the day. We were told the quality and choice of meals is excellent; people are encouraged to be as independent as possible and supported when required.

Systems are in place for the safe management of medication within the service. Care staff provide support to people with their medication, which helps to maintain their health. Records we checked are mainly completed accurately, the manager assured us some gaps in temperature recording would be addressed.

Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance. Regular COVID-19 testing of staff is carried out. We were asked for evidence of a negative lateral flow test

result and had our temperature taken before entering the home.

Environment

The home has been purpose built and is maintained to an excellent standard. The environment is light, bright and homely throughout. The home benefits from a large welcoming entrance area and has wide corridors which are air conditioned, it is clean, tidy and well organised. People's bedrooms are personalised to their own tastes, individuals have photos of loved ones, pictures, flowers, and ornaments which helps to provide a familiar and homely room. Bedrooms all have en-suite shower facilities. The communal bathrooms are spacious, and each contain a jacuzzi bath and separate shower.

The 'memory lane' communities have 'way finding' corridors which provides a separate theme for each corridor, one with a garden theme and the other animals. This highly creative environment helps people living with dementia to familiarise themselves with different areas of their surroundings.

The outdoor is pleasantly laid to level paving which provides a walk around the gardens lawned areas. The ground floor bedrooms each open out onto their own small garden area which leads to the communal garden with mature trees and raised beds. The first floor has spacious balcony areas which contain potted plants and outdoor seating. We saw the outdoor furniture was sturdy but somewhat worn. The manager assured us this was all repainted following our inspection.

People benefit from a secure environment; the front door is kept locked. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms take place at the home and staff are trained in fire safety. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency. The home has a five-star rating from the food standards agency which means that hygiene standards are very good.

Leadership and Management

People benefit from highly effective leadership and management. The organisation of records throughout the home is exceptional. We saw the manager and deputy manager interacting warmly with people throughout our inspection visits. Care workers told us the management team are very approachable and supportive. Staff also appreciate the encouragement they are given to learn and develop in their careers.

The statement of purpose accurately reflects the service provided. There are a sufficient number of care workers on duty to support people in a relaxed and unrushed manner. We viewed five weeks of staff rota's which reflects sufficient staff numbers are consistently deployed.

Care workers receive regular supervision with their line manager. This one-to-one support provides opportunity for staff members to discuss any concerns or training needs they may have and for their line manager to provide feedback on their work performance. Communication between the team is good and care workers enjoy their jobs. We observed a highly effective daily head of departments meeting where key issues are discussed between the management team and actions agreed to take back to the relevant areas.

Care staff are confident and skilled in their roles. They complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm.

Care workers personnel files are well organised, but do not all contain all of the required information. We saw some records are waiting to be returned from archiving so not available at the service as they should be, birth certificates are not available for all staff, some employment history gaps have not been fully recorded and verification of why people had left previous care roles is not always evidenced. This is an area for improvement, and while no immediate action is required, we expect the provider to take action and will follow this up at our next inspection.

The RI has undertaken regular quality assurance checks by visiting the home to talk to individuals and care staff and review documents. The RI completes detailed, thorough, and comprehensive audits of the quality of the support provided as well as the wider running of the home. The reports highlight where the home is performing well as well as areas for improvement.

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	

35	Staff personnel records do not all include all of the	New
	required information	

Date Published 21/09/2022