



Inspection Report on

Bryntirion Resource Centre

**Bryntirion Home & Day Centre
Pontrhydfendigaid Road
Tregaron
SY25 6JE**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

16/05/2023

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About Bryntirion Resource Centre

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ceredigion County Council Adults and Children's Services
Registered places	15
Language of the service	Both
Previous Care Inspectorate Wales inspection	
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

People are very positive about the care they receive. They are supported by an experienced and understanding team of care workers, who encourage people to be as fully involved in their care as possible. The interim manager has been in post since March 2023 and is supportive of the people who live and work in the service.

The environment was identified as an area for improvement in the last full inspection but the décor remains in a poor state of repair. We have issued a Priority Action Notice because of the impact on people's well-being.

The provider is compliant with regulatory visits to the service and uses information from audits to inform their six-monthly quality of care review.

Well-being

People receive person centered support. The manager involves health and social care professionals to help people remain as healthy as possible. People are involved in developing and reviewing their personal plans, which focus on things that matter. When discussing the care workers an individual told us *“The staff here are fantastic”*. Individuals are respected, and interactions with each other and the staff team are friendly and supportive, a person told us *“I can do what I like”, the staff encourage me to do activities but I’m very happy in my own company and they respect that and leave me be”*.

Representatives are positive about the service; one said, *“The home is brilliant, the staff are fantastic and always ready to help”*. People live in a service that offers an 'Active Offer' of the Welsh language and can communicate in Welsh or English as they choose.

People are protected from harm because recruitment processes and training ensure they get the right care and support. Care workers receive induction and ongoing development and register with Social Care Wales. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People and their representatives know how to make a complaint if needed.

The grounds and gardens are well used by people to help them stay as healthy and active as possible. The internal environment still fails to support people to achieve outcomes. The dated décor, mismatching furniture and damaged carpets need refurbishment to better support people’s well-being. This was previously identified as an Area for Improvement and has now been escalated to a Priority Action Notice.

People have a voice because they and/or their representatives are involved in quarterly Regulation 73 visits. This information is recorded in a report with a clear action plan and used to inform the six-monthly Quality of Care Review.

Care and Support

People are very happy with the care and support they receive. Care workers are sensitive to people's needs and respect their choices. We saw many positive and friendly interactions between people who live and those who work at the home. An individual told us: *"The staff are so relaxed and friendly and always make time to come and chat with me"*. Staff are positive about the people they support and take time to get to know them, a care worker told us *"It's a smaller home and we can spend quality 1:1 time with the residents"*. Representatives are also very positive about the care and support and one told us *"Staff are fantastic, so caring and really helpful, when I visit or on the phone"*.

People are involved in developing their personal plans. The manager also involves individual's representatives, care workers and external professionals to ensure information is accurate and up-to-date. Senior staff regularly review plans with people and/or their representatives so they remain relevant. Care workers meet with people on an individual basis to find out what is working and what areas of the service they would like to see improved. There is good evidence of health and social care professionals being involved in plans, people told us about the support they receive to work towards this advice. Daily notes are informative and record the care and support completed and an account of the day from the perspective of the person.

People enjoy a variety of activities in the home. Individuals enjoy walking in the grounds, growing vegetables, take part in religious services and interacting with each other. Visiting is unrestricted and people are positive about meeting their friends and family in the home, one said *"Its great now that my family can visit whenever they want"*.

Staff are responsive to people and we observed many unrushed and positive interactions during the inspection. Many of the care workers are local to the area and can communicate with people in Welsh or English as they choose. A representative told us *"The Staff are great and it's very beneficial that they are mostly local and talk Welsh"*.

Environment

We identified the environment as an Area for Improvement in the last full inspection and the provider had an upgrade plan in place to address these issues. However, the décor remains unchanged, we saw dated wallpaper, damaged paintwork and worn flooring throughout the service. Care workers we spoke with told us the only thing they would like to improve about the service is the environment, one said *“The building needs work and some upgrades but we still make sure it is still homely”*. Representatives of people who live at the service told us the only part of the service they would improve would be the decor.

The lack of upgrading to the decor impacts people’s well-being and we have issued a Priority Action Notice (PAN). The provider must take immediate action to resolve these matters.

People can personalise their rooms with their own pictures and furniture. The grounds are accessible and people enjoy using them for exercise, to grow vegetables and to socialise with their friends and family, when they visit.

Regular Health and Safety audits of the property are completed. Testing of fire safety equipment is up-to-date and the provider is completing actions following a fire safety audit to achieve compliance with the fire regulations. Personal Evacuation Plans are individualised and available in emergencies.

Leadership and Management

The provider has effective arrangements in place for monitoring, reviewing and improving the quality of the service. Regulation 73 visits are completed every three months, the subsequent visit report evidences people, their representatives and staff are consulted with. The six-monthly Quality of Care Review uses information from audits and clearly identifies actions needed to improve the service.

The deputy is currently the interim manager, while the provider recruits a new permanent manager for the service. People know the interim manager well and we observed many positive and open interactions between them. Staff are positive about their leadership and support during this transition period and a care worker told us *“[Interim Manager] is easy to talk to and you can go and talk to her, she stops what she’s doing and takes the time to listen to you”*. Representatives are also positive about the leadership at the service and one said *“[Interim Manager] is very easy to talk to, listens and takes actions”*.

Care workers told us they receive regular supervision but told us they can discuss anything with their line managers whenever they want. Discussions with staff, demonstrate a sound understanding around safeguarding. Procedures are in place to support good practice and staff have a sufficient understanding of key policies.

Pre-employment checks take place before new employees start work. These include reference, right to work and Disclosure and Barring (DBS) checks. New staff receive a comprehensive induction and ongoing mandatory and person specific training to meet people’s needs. Care workers spoke positively about the training they receive and the benefit it has to their practice and the impact on people’s lives. The induction programme links to individual learning outcomes and the ‘All Wales Induction Framework for Health and Social Care’.

Adequate numbers of staff meet people’s needs. Many care workers have been at the service for years. They have built up good relationships with people and understand their circumstances and individual needs.

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
44	The provider has not completed any work to address the issues identified as an area for improvement with the environment in the last full inspection.	Not Achieved

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 11/07/2023