



Inspection Report on

86 Bryncelyn

Treharris

Date Inspection Completed

25/04/2023

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About 86 Bryncelyn

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Planned Residential Support Services Limited
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

86 Bryncelyn provides care and support for up to three adults. People living at the home are cared for with kindness and respect. Feedback from family and social care professionals was overall very positive. Care staff know people well and support them to lead happy and meaningful lives.

Personal plans are clearly written to inform care staff how best to support each person. These plans begin with a detailed social history of the person, their likes and dislikes. The plans are kept under regular review to ensure any changes are documented.

Care staff are safely recruited, records contain all required information. Care staff are well trained and have the opportunity for supervision.

The environment is homely, clean, warm and welcoming. However, some practices impact on the safety and security of the home, which are identified in the environment theme of this report. People choose the décor for their own rooms and are involved in choices of the communal décor. The home is overall well maintained, and all safety checks are carried out as required. Works are planned to tidy up the garden area.

The home benefits from effective leadership and management, an experienced manager runs this home along with another small home on a day-to-day basis. The responsible individual (RI) has good oversight of the management of the service.

Well-being

People have control over their day-to-day lives as much as possible. People's relatives and social care professionals told us how they are supported to be independent as they can be, to make their own choices and spend their time doing the things they want to do. Care staff work with people to arrange day-to-day activities, such as bowling, train spotting, shopping trips, and meals out. Visitors and positive relationships with loved ones are encouraged and supported.

The home is well equipped to support people to achieve their wellbeing. We saw a bedroom had recently been redecorated, had new flooring laid and furniture provided, which was chosen by the person living in that room. Another person is interested in collecting model vehicles. They have been supported to have display shelving fitted in their room for these.

People are protected from the risk of harm and abuse. Care workers spoke about the people living in the home and have a good understanding of the person, their needs and how these should be met. Communication with social care professionals when people first move in is described as being "excellent". Care workers interact and support people in a caring and thoughtful manner. 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.

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 be best met.

Care and Support

People receive care and support as and when required. We observed care workers to be attentive, kind, and encouraging to people. People are communicated to in the best way for them individually and staff receive specialist training in this regard. People are relaxed and comfortable around care staff.

The care needs and preferences of each person are clearly documented, and care staff access this information to inform their daily routines. The level of detail in the plans is good; there is a positive focus on what people can do for themselves, as well as how to support them. Plans are kept under regular review, however there is no evidence of people, or their representatives being involved in these reviews. The manager assured us they would address this.

Care records are accurately completed, which provides evidence people are being supported as described in their personal plans. The home does not ask staff to complete daily narrative notes, we discussed this with the manager and RI, who assured us record keeping practices are under constant review. Referrals are made to health and social care professionals as and when required. People are registered with a local general practitioner (GP). All appointment records and outcomes for review are kept within the daily notes. People are encouraged to maintain a healthy weight as part of a healthy lifestyle.

Systems are in place for the safe management of medication within the service. Care staff support people with their medication, which helps to maintain their health. Medication records are completed accurately. Infection prevention and control procedures are good. Care workers wear appropriate personal protective equipment (PPE) in line with current guidance.

Environment

The home is maintained to a good standard, well organised, and kept clean and tidy. The environment is light and homely throughout. People's bedrooms are personalised to their own taste, people have family pictures, posters, and ornaments in their rooms.

The home is well equipped, and spacious. Furniture and fittings are all in good condition. A large conservatory is used as a second living room as well as having space to store mobility equipment, such as wheelchairs. A fitted kitchen is in good condition, all food items opened in the fridge had date labels. The utility room has laundry facilities. The communal bathrooms are well-equipped and kept clean and tidy.

We found the garden area was in need of attention, with overgrown lawn and some brambles. Some of the coping stones have come loose on the raised beds, which are a risk to people's health and safety. The manager assured us they were awaiting quotes for the works which are planned to be carried out. The medication room was unlocked and unattended when we arrived, and cleaning products were left out in the communal bathrooms. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

The front door is kept locked and our ID was checked on entry. We viewed the maintenance file and saw all serviceable equipment had been checked to ensure its safety. Regular checks of the fire alarms are completed, 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 them to leave the premises safely in the case of an emergency. The home has a four-star rating from the food standards agency which means that food hygiene standards are good.

Leadership and Management

The manager oversees the day-to-day running of the home, supported by the RI. The management team all know the people living at the home well and are supportive of care staff. There are effective governance arrangements in place. The RI visits the home frequently and completes quality reports that clearly evidence where the service is doing well and which areas they are working to improve.

The statement of purpose for the service accurately describes how the service is delivered. We identified the statement of purpose had not been reviewed for just over a year, the RI addressed this promptly when we brought it to their attention and uploaded a new version.

Sufficient staffing levels are in place to meet the care needs of people living at the service. Care staff told us they have enough time to support people appropriately. Staff respond to requests from people in a timely manner and interactions are friendly, respectful and unrushed. People are supported by staff who are knowledgeable, competent and fit to care for people living in the service. Staff told us they enjoy their jobs, feel valued and well supported by the management team.

Care staff are safely recruited. The staff files are well organised, and contain all of the required information, including Disclosure and Barring Service checks and professional registration with Social Care Wales, the workforce regulator. Care staff complete a range of training courses, including regular refresher courses in mandatory areas such as safeguarding people at risk of harm. Some refresher courses are overdue, the manager assured us this was being addressed.

We discussed the supervision and appraisal process with the manager and RI who told us some staff prefer not to have supervisions. We saw evidence all staff had received annual appraisals and had been offered supervision, with brief notes taken. We sent the RI a supervision guidance document from Social Care Wales, the RI and manager assured us they would consider this guidance. One to one, formal supervisions provide the opportunity for staff to discuss any concerns or training needs they may have and allow their line manager to provide feedback on their work performance.

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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44	The home does not ensure the environment is safe and free from hazards as much as possible. Cleaning products which should be locked away are kept out in communal bathrooms. The medication room and locker are not kept locked at all times when not in use. Hazards identified in the garden area, such as overgrown brambles and loose coping stones require work to make them safe.	New
35	Staff records are not available for inspection at the service. Ensure that staff records are available for inspection at the service so that evidence of safe recruitment and management of staff can be tested	Achieved
7	The Statement of purpose for the service contains some inaccurate information. Ensure that the Statement of Purpose is updated to reflect practices that comply with current requirements	Achieved
80	The Quality of Care report is not specific to the service and does not contain sufficient information or analysis to meet requirements. Ensure the Quality of Care report is detailed, service specific and contains sufficient information and analysis.	Achieved
36	Care staff do not receive regular one to one supervision. Ensure that all staff receive supervision at least every 3 months	Achieved

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