

Inspection Report on

Bryn Awel

Llangefni

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

14/12/2023



About Bryn Awel

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Raji Hughes
Registered places	3
Language of the service	Both
Previous Care Inspectorate Wales inspection	21 September 2022
Does this service promote Welsh language and culture?	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 supported by conscientious care staff who are encouraging and supportive. People have their own individual daily routines and are supported to participate in recreational and work activities. Their family and friends are welcomed into the service which feels very much a family home.

The service provider is also the responsible individual, manager, and the only permanent care staff. People's needs are central to the care provided and this is pivotal to achieving their well-being outcomes.

The service provides the 'Active Offer' of the Welsh language. We saw there are bilingual signs throughout the service. The provider can provide prompts in Welsh to the Welsh speaking residents. We observed people responding positively to them.

The service is homely and welcoming and has been organised around the individual needs of the people who live there. There are consistent and effective governance arrangements in place. The service provided is consistent and in line with the statement of purpose. Care is monitored, consistent and regular.

Well-being

People have control over their day-to-day lives. They enjoy a consistent routine, which means they are content and know their own individual routines. Care staff encourage and support people to participate and take the lead in planning their daily/ weekly routine. The provider and care staff have built positive and effective relationships with the people who live at the service. The provider promotes regular communication between people, their family and friends, and this is evidenced within the personal plans. This communication is key to people being able to choose how they lead their lives and participate in activities of interest. The provider and various professionals have linked with local centres, where people can attend a working environment, which provides structure within a variety of interests, including gardening and various crafts.

Physical and emotional health are promoted. People were observed as being content and 'at home' within the service environment. Care staff support people to undertake and get involved in a range of chosen activities, and these include recreational activities. Care staff have a friendly, respectful, and kind rapport with individuals. They focus on individual need and the days are planned to accommodate individual preference. The provider makes appropriate links with various professionals to ensure people's well-being is maintained. Steps are taken to promote and ensure people's overall well-being.

People are protected from the risk of harm. Individual risk assessments are in place where appropriate, which highlight areas of risk. These are recorded within individual care files. Care staff and the provider review, monitor and update care records and risk assessments as and when required. Care staff know what to do and how to report incidents if they become concerned about someone. The provider ensures they and care staff receive updates in relevant training in areas which keep people safe. This includes safeguarding, medication, health and safety and first aid training. The provider regularly and effectively communicates with professionals, family, and friends, if any issues or concerns arise. The environment is planned, maintained, and monitored to ensure people's safety within the service.

People living at the service feel part of the family and are encouraged and included in celebrating special occasions, like birthdays and Christmas, together. Care staff and the provider feel people are their extended family. We observed visitors with people enjoying quality time, reminiscing, and having fun in one of the lounges, which is cosy and homely. The provider showed us the environment which is maintained to a high standard and is comfortable, warm, and clean.

Care and Support

The provider considers a wide range of information about individual's care and support needs; these considerations are to ensure their needs can be met by the service. We saw evidence within personal plans of information gathered from a variety of professionals, including health professionals. We saw information recorded about people's preferences, routines, and hobbies, which are reflective of their current routines. We observed people within the service, who told us they enjoy their daily routines and are very happy with the care and support they receive.

The provider ensures the pre-admission information gathered informs the individual personal plans. Personal plans are detailed and up to date. These records set out how people's routines, preferences and support needs should be provided. The provider knows people well and regularly advocates and links with relevant professionals, family and friend. We evidenced personal plans are reviewed within timescale and/or when care needs change. The provider consults with people, their families and friends and professionals to ensure adequate and appropriate adjustments are made and that people are happy with this.

People can access health care professionals, such as dentists, and general practitioners (G.P.) for regular appointments or when required. Records show appropriate and timely links are made with health professionals. People are provided with regular meals which are healthy and planned around individual need and preference. We saw menus produced by the provider following consultation with people and in line with any dietary requirements. The provider plans and cooks all meals which means there is consistency and choice given by someone who knows people's likes and dislikes. People told us they enjoy the food and mealtimes. They are given the choice as to what times they eat and whether they eat together or not. The administration of medication is dealt with safely and methodically. We reviewed people's medication administration records (M.A.R.) which are clear, accurate and up to date. Records show that staff have received training in medication management. We reviewed the service medication policy, which is up to date and available for care staff at the service.

Environment

The service is centrally located to the nearby town. This means people can be as independent as possible and access shops, workplaces, and recreational activities. The service is planned and equipped around individual need and preference. The provider is supportive and encourages people who live in the service to be active and have a positive daily routine. The service is homely with a welcoming atmosphere. People are seen to be comfortable in their surroundings. There are two living areas, which means people can choose how and where they spend their time. Their bedrooms are spacious and personalised to individual choice and contain people's personal items including pictures, ornaments and bedding of choice. Confidential information is stored safely.

The home is in good repair and regular maintenance checks and monitoring is undertaken in line with regulation. These include, fire safety, electrical and maintenance checks, safe storage of food and chemicals, legionella, and boiler checks. There are individual personal evacuation plans in place (PEEP's) which are up to date and accessible on entrance to the service. There is a food hygiene score of five, the highest which can be achieved.

Leadership and Management

The provider has governance arrangements in place to support the smooth operation of the service. This ensures there is a sound basis for providing high quality care and support for individuals using the service to enable them to achieve their personal outcomes. The provider and care staff attend regular training which helps them maintain their knowledge around their caring role. The care staff files we viewed contained certification, which demonstrates the variety of training attended. We also viewed records of meetings held between people, and care staff. The provider ensures regular annual appraisals take place in line with regulation. There is regular communication with care staff and the provider has a plan in place for regular recorded supervision.

The provider ensures there are ongoing systems in place to monitor the quality of care and support provided. Regular consultation with people, family, friends, and visiting professionals, means the provider has a range of views. This means they can implement any improvement or build on the quality of care by considering the views and preferences shared via consultation. We viewed a sample of feedback records which are positive. This information gathered is fed into the quality-of-care review report, which outlines the service performance. We viewed the most recent quality of care report. The provider successfully fulfils their roles as manager and responsible individual of the service. Their approach to their role is sensitive and kind and people who live in the service respond well to this approach, as do visiting professionals, family, and friends.

We viewed the statement of purpose (SOP) which is an accurate reflection of the service. This document has been dated and signed and an up-to-date version is available at the service. This is accessible for those who use the service, placing authority, any person who requests it. No changes have been made in recent months.

Care staff are safely recruited to the service. We viewed appropriate checks within care staff files. We found care staff are sufficiently trained and supported to undertake their role. Again, these are evident in staff care files. Care staff told us they are happy in their role and feel adequately supported by the provider to undertake their role successfully. People told us they know care staff well. The same relief member of staff provides consistency for those living at the service and gives the service provider some respite from the day-to-day operations.

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	

N/A	No non-compliance of this type was identified at this inspection	N/A
14	The service provider had failed to fully asses whether the service would be able to fully meet individual needs prior to agreeing to provide a service.	Achieved
80	The service provider had failed to complete a quality of care review in line with regulations.	Achieved

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Date Published 07/03/2024