



Inspection Report on

Celynbrook Care Home

Barry

Date Inspection Completed

04/04/2023

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About Celynbrook Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Valebrook Care Homes Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	5 December 2019
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

People appear happy with the care and support they receive from kind and dedicated care staff. The environment meets people's needs and enables people to enjoy activities inside and outside of the home. People have opportunities to take part in hobbies that are of interest to them. Care staff are knowledgeable and compassionate. We saw positive interactions between care staff and people, who are spoken to with dignity and respect. The responsible individual (RI) and management team are consistently available to people, staff, and visitors. There are systems in place to monitor the quality of the service. We saw daily records are well maintained and keep staff informed of the care and support people need. Good levels of training and supervision ensures care staff know how to keep people safe and protect them from harm. The provider values feedback from people who use the service.

Well-being

People appear settled and comfortable. We saw people enjoying each other's company and taking part in activities together. The provider arranges twice weekly social gatherings at a day service. During the inspection we saw people taking part in fun and stimulating activities. People told us they look forward to the group sessions and they like meeting their friends.

The service provides people with support to make decisions that are in their best interest relating to their day-to-day care and support. We found appropriate procedures and documentation in place for people who require additional measures to keep them safe. There is opportunity for relatives to provide formal feedback to the service and to attend important meetings to review the care and support of people. Engagement with people who use the service is positive and frequent meetings take place to enable them to have their say.

Well informed and trained care staff protect people from abuse and neglect. Care staff know how to recognise signs of abuse and know how to raise a concern should a person's well-being be compromised. People and their representatives are provided with ample information about the service that includes how to raise a concern or complaint. Systems are in place to appropriately manage personal monies. Risk assessments and documentation is in place to protect people and are kept up to date.

The accommodation is adapted to support people to achieve their outcomes and promote safe movement around the home. Furniture and prescribed equipment is in place for those who require it.

Care and Support

Care and support is provided to a high standard and people can expect continuity of care from an established staff team. Care staff know people very well and have an excellent understanding of individual preferences. We found staff to be respectful of people's individuality in how they receive their care and support. The provider completes a detailed personal plan which informs staff of essential and important information to ensure that people achieve their personal outcomes. The provider invites people and their representatives to jointly review the personal plan every three months.

People are communicated to in ways that best suit their needs when they are receiving care and support. Care is provided with dignity and respect. The provider completes thorough assessments for new people choosing to live in the home to ensure their needs can be met. The assessment includes listening to the views of others living there and makes sure people get along with each other.

Care staff respond promptly to changes in people's needs and complete necessary documentation to inform others of the changes. Staff complete daily records to monitor and assess people's health and well-being. Care staff follow personal plan routines and people are well groomed. Care staff are kind, sensitive and show genuine affection to people. People have access to home cooked meals; fresh food is purchased frequently, and meal choices are given daily. The service offers drinks and snacks throughout the day.

There are good systems in place relating to infection control which protects people from harm. Care staff use personal protective equipment appropriately when providing care and support.

Medication is stored, administered, and recorded safely. There are thorough procedures relating to medication management to ensure people receive the right medication at the right time. People have regular access to health care services and the provider completes referrals to other health professionals as and when required. We found accurate daily records relating to the care and support people receive. Communication within the staff team is good and essential information is shared.

Environment

The home is an accessible bungalow as described in the Statement of Purpose. The environment meets the needs of the people living there. The home is clean, warm, and uncluttered. Furnishings are in good order. People have their own bedrooms that are personalised. Most bedrooms are maintained to a good standard, but we found one bedroom with some wear and tear to the flooring. The provider is quick to respond to maintenance needs of the home and completes environmental inspections every three months.

We found good cleaning regimes in place and care staff complete paperwork to document the facilities being checked, such as water systems and fridge temperatures. The kitchen is well stocked with fresh food. Some areas in the home are restricted to keep people safe. Systems are in place to ensure the security of the home and the safety of people living there. There are areas in the home where people can receive visitors.

Equipment in the home is well maintained and service records are kept in order. External grounds are accessible, with pots for flowers, and parking for personal vehicles. People share mealtimes together in the kitchen diner. There are sufficient washroom and bathing facilities for people with suitable equipment. People's bedding is clean, and the routine for washing people's clothing is good. There is a locked staff room which contains people's medication and personal files are stored securely.

We found individual Personal Emergency Evacuation Plans and a fire risk assessment which is up to date. Care staff told us they receive training to safely evacuate people in the event of an emergency and all have completed fire safety training. Documentation relating to fire drills is inadequate, the provider is taking immediate steps to improve the recordings.

Leadership and Management

The provider produces a Statement of Purpose and a service user guide that accurately describes the service. The RI and management team are consistently available to care staff, people, and their representatives. Care staff are kept well informed and attend regular staff meetings, they receive timely supervision and practical competencies are assessed annually. We saw policies and procedures in place that are kept up to date.

The provider follows safe recruitment processes and staff complete a thorough induction. All staff are up to date with core training, and specialist training is available to meet specific needs. Most staff have achieved relevant qualifications in Health and Social Care and are registered with Social Care Wales, the workforce regulator. Promoting staff development is a strength of the service. Care staff consistently told us they feel supported by the provider, they feel listened to and respected. Staff told us they have complete confidence the provider will act promptly to concerns that may impact on people's well-being. We found a nurturing and caring culture across the staff team which positively impacts people's well-being and personal outcomes.

People's views and opinions are captured by the provider in a suitable format and people are encouraged to have their say. People have access to family or representatives to advocate on their behalf. The complaints procedure is available and there is a process in place to record concerns, complaints, and compliments. The RI visits the home formally every three months to speak with people. In addition, people attend house meetings to discuss things that matter to them and to provide feedback on the service they receive. The provider invites feedback from visiting professionals to the service through engagement questionnaires.

The RI visits the home to seek the views of care staff. The feedback from staff informs the quality assurance process. The quality care review is detailed and highlights the service is performing well, with clear action plans and outcomes being recorded.

Governance and oversight of the service is good, and the RI informs the provider on how the service is performing on a regular basis. Promoting positive outcomes and delivering high standards of care for people is at the heart of the service.

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

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