



Inspection Report on

Cartref Ael Y Bryn

**Cartref Ael Y Bryn
Penybanc Road
Ammanford
SA18 3HS**

Date Inspection Completed

16/01/2024

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About Cartref Ael Y Bryn

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Barleybind Ltd
Registered places	49
Language of the service	English
Previous Care Inspectorate Wales inspection	12 July 2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are cared for in a relaxed and comfortable environment. Care staff are patient and respectful and provide support in an unrushed manner. People have choice over their day to day lives and how they spend their day. Personal plans are up to date and are reviewed monthly by the manager. Whilst representatives are kept up to date of any changes in care and support needs they have not been involved in quarterly reviews. This is an area for improvement to be followed up at the next inspection.

Safe recruitment processes ensure that care staff have the necessary qualifications, experience and character to undertake their role. Staff receive ongoing training and value the support from the manager.

The Responsible Individual (RI) undertakes quarterly visits and takes time to consult with staff and people receiving support. There are systems in place to monitor and review the quality of care and support that is being delivered.

Well-being

People are supported to make choices on how they spend their day to day lives. We saw some people happy to be sitting on their own whilst others prefer to have company and like to sit in the communal areas. Those who are more independent enjoy spending time in the local community, either on their own or with family members. The service has a minibus and people enjoy trips out together in the summer months. Care staff are not rushed and take their time with people when providing their care and support. We saw caring and kind interactions between people and staff and one person told us, "*They (staff) show respect*". We saw people enjoying simple activities of their choice with staff in a relaxed atmosphere. People we spoke with are happy with the care and support they receive. One person told us, "*I'm happy, it's lively, we laugh a lot*".

Representatives and family members involvement in people's care and support plans is welcomed. The manager recognises the valuable contribution that family members make to the initial assessment and depth of the personal plan. Friends and family are encouraged to visit during quieter times of the day.

People's physical and mental well-being is promoted and they are supported to remain as healthy as possible. Care staff notice changes in their presentation and support needs and timely referrals are made to health and social care professionals. Personal plans are reviewed regularly to ensure they remain relevant. People told us they are not invited to be part of the review process. These matters were discussed at the last inspection. Whilst there is no immediate impact upon people this matter is an area for improvement and will be followed up at the next inspection.

Meals provided are of good quality, prepared with fresh ingredients. People can request food that is not on the menu and efforts will be made to meet their request. One person told us, "*The food is delicious. Anything I fancy to eat, they will get it for me*". The kitchen has a level 5 rating which means that hygiene standards are very good.

The service keeps people safe and protected from harm and abuse. Staff spoken with understand their safeguarding duties and responsibilities if they have any concerns and know the procedures to follow. They have confidence that managers will take the necessary action as and when required and in line with statutory duties. There are robust recruitment systems in place to ensure staff have the necessary skills, knowledge and suitable character to undertake their role. The building is secure and any visitors are required to ring the bell to be let in by a member of staff.

Care and Support

An initial assessment is undertaken by the manager prior to admission to ensure that the needs of the individual can be met and the environment is suitable for them. The assessment is undertaken in collaboration with family members, when appropriate, and any health and social care professionals that may be involved in their care and support plans.

Personal care records provide up to date information on individual's care needs and how these will be met. Daily records are kept up to date but are brief and provide only a limited account of an individual's day or the activities they have been involved in. The manager has addressed this and assures us that more detail is recorded daily. A document to record people's interests, likes, dislikes and significant dates is being developed. This will ensure people can do what matters to them and achieve good outcomes. During the inspection we saw staff providing care and support in a relaxed manner with people involved in different activities such as knitting, watching television, doing crosswords and jigsaws. One person told us, "*The girls are friendly, we have a laugh and a joke*".

Care staff know people well and notice any changes in their health and well-being. People's physical and mental health is promoted and records show that timely referrals are made to health and social care professionals, when required. Personal care and support plans are reviewed routinely in line with requirements and when individual's needs change. Relatives we spoke with told us they are kept up to date with any such changes. However, records did not always evidence the involvement of people, or their representative in the review process. These matters were discussed at the last inspection. Whilst there is no immediate impact upon people this matter is an area for improvement and will be followed up at the next inspection.

Medication is stored and administered safely by trained and experienced staff. Medication Administration records looked at were mostly correct. The manager has assured us that regular reviews will be undertaken to ensure medication records are up to date and hold the correct information.

Environment

The environment is clean, warm and welcoming. During the inspection we saw domestic staff undertaking cleaning of the home. There are several communal areas provided, including an outside area for use in warmer weather. People can choose to sit in the dining area or the lounge to eat their meals. The corridors are painted in different colours to assist those with memory issues to navigate around the home and to help them find their bedroom. Handrails are in place on the walls to assist individuals with mobility issues and a lift is available to reach the bedrooms upstairs. Window restrictors are in place to ensure safety of individuals.

Bedrooms are decorated to people's own taste and preference and we saw personal items of choice on display. Several individuals enjoy fresh fruit and have a fruit bowl in their room. Many also have their own television so that they can choose to watch tv on their own or in the communal areas. Some bedrooms are en-suite and there are sufficient communal bathrooms for people to use.

There is a hairdressing salon in the home and a hairdresser visits twice a week. A treatment room provides a safe and private environment for visiting health professionals to attend to people's health needs. Two separate rooms are available for visitors to meet with people to offer privacy.

An ongoing redecorating plan is in place and when a bedroom becomes vacant it is redecorated prior to anybody moving in. Health and safety audits are undertaken routinely to ensure any concerns are identified and addressed in a timely manner. The maintenance person attends to any repairs as and when required, as identified by staff members. Fire safety equipment is also checked routinely.

There are detailed policies and procedures to manage the risk of infection and good hygiene practices throughout the home. Care workers complete infection control training and can access infection management policies whenever necessary.

Leadership and Management

Care staff told us they value the support they receive from the manager who is very visible in the service. There is a strong management team and an emphasis on ensuring that staff have support with work and home life issues. The manager is described by staff as *“helpful”* and *“supportive”* and one staff member said *“They always ask us how we are, we can talk to them whenever we want”*. Staff value the nurturing leadership style and this is evidenced by good staff morale within the team and the long standing employment of some staff members.

A safe recruitment process is in place and staff undergo several checks prior to commencing employment to ensure they have the skills, qualifications and suitable character to undertake the role. These include Identification (ID), Disclosure and Barring service (DBS) checks and references are obtained from previous employers. Staff receive mandatory training and records show that staff are up to date with their training. One to one supervision is provided to all staff on a quarterly basis and provides an opportunity to reflect on practice and identify any areas for further training or development. Staff told us they can speak with the manager at any time and *“can tell them anything”*.

The RI has good oversight of the service and reports evidence that they seek the views of staff and individuals at the service. A quality of care review occurs every six months and the reports demonstrates there are effective measures in place to assess, monitor and review the care provided. Most key policies we looked at were accurate with others requiring minor amendments to ensure the correct information is available to staff, people and their representatives.

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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16	The provider has not been involving the individual and/or their representative in the reviews of personal plans. Two representatives spoken with told us they were not aware of the reviews and had not been involved.	New
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