

Inspection Report on

Brooklands Rest Home Ltd

Brooklands Nursing Home Narberth Road Saundersfoot SA69 9DS

Date Inspection Completed

31/05/2022



About Brooklands Rest Home Ltd

Type of care provided	Care Home Service
	Adults With Nursing
Registered Provider	Brooklands Rest Home Ltd
Registered places	40
Language of the service	English
Previous Care Inspectorate Wales	This was the service's first inspection since re-
inspection	registering under the Regulation and Inspection of
	Social Care (Wales) Act 2016.
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

People are cared for in a relaxed and happy environment by care staff that are trained and experienced. People are encouraged to remain as independent as possible whilst risks are reviewed and managed on a regular basis.

People and their representatives are happy with the care provided and are kept informed of any changes to their care needs. However, it is not evidenced that people are involved in reviewing care plans on a regular basis.

The Responsible Individual (RI) is actively involved and has good oversight of the service. The quarterly report would benefit from being more detailed to reflect this involvement.

Care staff feel supported by management and the RI and staff are happy and confident to approach them with any concerns.

Well-being

People speak positively about the care they receive and care staff demonstrate genuine affection and care towards them. One family member told us "In the words of Tina Turner, they are simply the best! I have nothing but admiration for them, they are kind, thoughtful and considerate". We saw people being reassured with gentle gestures and words.

We saw people participating in a singing and dancing activity. The entertainer enabled everyone present to decide if they wanted to join in and acknowledged individual differences. People's reactions clearly showed they were having fun and enjoying themselves.

People are respected and given choice about how they spend their day. Care staff allow people to take the time they need to undertake any activity in a relaxed atmosphere. A relative told us "They (care staff) are so patient". Another relative said "I am always hyper critical but I honestly can't fault it (care received)."

Risk assessments are kept up to date to minimise risk whilst also promoting independence. Care staff are aware of the importance of keeping people safe from harm and neglect and of their responsibility to report any concerns through the correct procedures. There are also designated whistle blowers whom staff can approach and care staff feel confident that managers are approachable and supportive.

Care and Support

People are cared for in a relaxed and pleasant atmosphere. We witnessed kind and caring interactions between staff and people. One staff member said "I miss them when I'm not here, they melt my heart". One person told us "There's never a cross word, I've not been to a place like it, everyone is lovely". A visiting relative said "The care is first class, nothing is too much trouble and everyone is treated the same".

Prior to accepting a person a thorough assessment is undertaken and information received from the person, their family and health and social care professionals to ensure that the service can meet their needs. Care is provided by knowledgeable and trained staff through person centred care plans. Pen pictures are kept in people's rooms to ensure staff are aware of individuals' likes and dislikes and have information on their previous life history. A computerised system 'Nourish' is used to record information on people receiving care including care plans and daily care records. Records looked at are up to date and contain all relevant information. Reviews are undertaken to ensure information remains relevant; peoples' representatives tell us they are consulted generally on a day to day basis however are not involved in reviewing care plans. One relative told us "They phone me for everything, even a change of tablet".

A monthly falls index is kept and people are referred to the Frailty and Dementia Care teams for further assessment and support if required. 'I stumble' app is also used and nurses will monitor people following a fall to prevent hospital admission where possible and avoid further distress. Nursing staff work collaboratively with GPs and other health and social care professionals to promote people's health and well being.

Some staff members feel that they do not always have enough time to spend on a one to one basis with people however evidence shows that people's needs are being met and people and their relatives are happy with the care and support that is being provided.

Environment

People are cared for in an environment that is clean and comfortable. Individual rooms have different coloured doors to help people recognise their own rooms. Bedrooms are personalised with people's own photos, pictures and ornaments.

Some of the paintwork on walls and doors would benefit from redecorating. There is new flooring in one of the communal areas. People are able to choose to spend time alone in their rooms or in the communal areas both inside and outside when the weather allows. There is a sensory room for people to relax and enjoy some quiet time. There is also a large interactive table that can be used individually according to people's interests.

The outside area is inviting and easy for people to access with artificial grass and a greenhouse. There is a covered area with a heater for visitors to sit with their relatives. The outside area is used for lots of activities such as summer fetes and themed events. Parts of the outside would benefit from a general tidy up.

The service has a mini bus and has also purchased two beach friendly wheelchairs to enable people to visit the seaside.

Additional COVID-19 measures are in place. There are sanitation stations throughout the service and a strict testing procedure for all visitors.

Maintenance issues are resolved promptly and regular Health and Safety audits of the property are completed to ensure the safety of people living, working and visiting the service. The service is compliant with Fire Regulations and testing of fire safety equipment is up to date.

Leadership and Management

The RI has good oversight and plays an active part in the service. Staff spoken with feel supported by the managers and the RI, and describe it as a family run service with shared principles of person centred care. Care staff told us "They (RI and wife) are very understanding and will do anything for you, he (RI) comes in for breakfast and will help us if we're short staffed". "Management get stuck in and get involved".

The RI, manager and deputy manager work collaboratively and continually review procedures and processes to ensure the well-being of people using and working at the service is promoted. The views of staff, people and their representatives is important to the RI and this is collated through questionnaires and meetings to produce the six monthly Quality of Care report. Issues raised are addressed and used to improve and develop the service.

The RI undertakes regular quarterly visits however the reports would benefit from more detail and do not evidence that people working and using the service are consulted during the visits.

There is a robust recruitment system in place and prior to commencement of employment appropriate references and checks are undertaken including Disclosure and Barring (DBS). Effective induction and ongoing training ensure staff have the right skills and knowledge to meet people's needs and staff feel equipped to undertake their roles. One staff member told us "I had no previous experience and I did a shadow shift which was really helpful." Another staff member said "The manager explains things and doesn't judge like in other places".

The manager is aware that the last two years has been difficult for the staff and is focusing on supporting their mental well being. Not all staff have been having regular supervision sessions. The manager assures us that this is currently being addressed and will ensure that staff are supervised on a quarterly basis going forward. This will be checked at the next inspection and we would expect to see all staff having regular, one to one supervision sessions with their line manager. However staff spoken with say they do feel supported by management and are able to approach managers at any time. One staff member told us "She (team leader) is like my work mum, they're solid here." Another staff member said "Any problems are sorted out by the manager straight away, we keep professional".

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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