



## Inspection Report on

**Tan y Bryn Care Home**

**Tan Y Bryn Residential Home  
20 Tan Y Bryn Road  
Llandudno  
LL30 1UU**

## **Date Inspection Completed**

24/07/2023

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## About Tan y Bryn Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Eterna Care Ltd
Registered places	20
Language of the service	English
Previous Care Inspectorate Wales inspection	16/02/2022
Does this service promote Welsh language and culture?	This service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service.

### Summary

People are happy with the care and support they receive and enjoy the home they live in. People are consulted about their views through meetings and quality surveys. The manager has good oversight of the service, carrying out regular audits to monitor the quality and effectiveness. Care staff are safely recruited and appropriately trained and supervised. People are happy and complimentary of the care staff who support them.

The manager is committed to ensuring people live in a home which is safe and well maintained. Appropriate maintenance checks and works are carried out. There has been investment in the renovation of the property which has resulted in additional communal areas and a safe outdoor space.

The responsible individual (RI) who oversees the service visits on a regular basis, talking to people who live, and staff who work at the service. Reports produced following these visits show areas which have been looked at, and any action to be taken. Policies in place require development to ensure they contain all the required information.

## Well-being

People have choice and control about their daily lives. They can choose how and where to spend their time and enjoy doing the things they like. People told us they have quizzes and do puzzles, and like the visits from animals and entertainers. People get their nails done and enjoy visits from the hairdresser. One person told us *"I'm happy here, the food is nice, staff are lovely, and I can have visitors whenever I want."* Another person told us they didn't know what to expect when they moved in, but said it was *"heaven sent, staff are very kind and help me choose what to eat."* Personal plans document people's needs and wishes and are reviewed regularly with the person and/or their representative.

Care staff promote people's health and wellbeing. People can access medical advice and specialist services as required. Care staff deliver care as specified by external professionals which has resulted in positive outcomes for people. Where needed, people have equipment in place which supports their independence. We saw medication is managed safely within the home. People enjoy a range of activities. The manager told us care staff enjoy doing activities with people.

People are protected from abuse and neglect. Staff receive appropriate training including safeguarding and have the appropriate professional registration with Social Care Wales. The manager has good oversight of incident and accidents, submits notifications to the Regulator and makes appropriate referrals to the relevant agencies when required. The provider has policies in place but needs to ensure these contain up to date information about current legislation and external contacts. This is so people have the correct information of who to speak to if they have a concern.

People live in an environment which is safe, promotes independence and supports wellbeing. People have bedrooms which are decorated to personal taste. Dementia friendly and bilingual signage around the home helps people to identify different areas. There are a number of communal areas throughout the home for people to enjoy. We saw people having visits with family members during the day. Renovation work has been completed to a high standard and people told us they enjoy the new outdoor patio area where they can look out over the bay.

## Care and Support

Individuals receive person centred care and support, reflective of care records which consider peoples care needs and personal wishes. Care records show a clear process of ongoing assessment and review where people and/or their representatives are involved. Personal plans are different for each person based on their identified needs and specify what the person can do, what they would like support with and how care staff can deliver this support. Plans include information about peoples interests, likes, and dislikes and how they like to spend their time. Additional records such as monitoring forms and specific risk assessments ensure all aspects of people's health and wellbeing are considered and supported.

People are supported to access health care and other services related to their wellbeing when needed. We saw records which showed people access GP services, occupational therapists, dieticians and speech and language therapists. We saw evidence of medication reviews and the manager told us there is weekly contact with the GP. We received positive feedback about the home from visiting health care professionals.

People are consulted in the running of the home through resident's meetings and feedback surveys. People discuss the care they receive, activities they would like to do and the food they would like to eat. The home has had renovation works carried out and people were involved in this process, being asked about decoration and what they would like in the home. In response to people's suggestions, a new outdoor patio area has been created which people told us they like to access when the weather is nice.

## Environment

People live in an environment which meets their needs and ensures their health and safety. We found the home to be very clean and free from any odours. There is a housekeeping team in place who work hard to ensure people live in a pleasant environment. The provider has robust measures in place to audit the environment, ensuring any areas which require addressing are done so quickly. A maintenance person is employed, and external contractors are sought to ensure regular servicing of the lift and manual handling equipment. The manager has records to show equipment such as beds, wheelchairs and mobility equipment is checked regularly. Maintenance records show areas of health and safety are inspected as required, with certificates retained to evidence compliance. The manager told us the responsible individual (RI) is responsive where works are required.

Fire safety is managed appropriately. Regular checks are carried out within the home and recorded in fire safety records. We saw the most recent fire safety inspection report which confirmed good fire safety within the home. Where recommendations had been made, these had been addressed quickly. People have up to date and detailed personal emergency evacuation plans (PEEPS) in place. These specify the support required in the event of an evacuation and fire plans showing where their room is located. We saw records of regular fire evacuation drills.

The home has had a significant amount of renovation work carried out including extensions to the building. External areas are accessible, safe, and pleasant for people to enjoy. Communal areas allow ease of access and offer a variety of seating to suit people's needs. The provider has invested in new furniture in all bedrooms which are decorated to a high standard with the majority offering ensuite facilities. People have the choice to access showers and specialist baths and we saw bathing equipment to be modern and clean. The home is completing the final stages of the works with decoration planned for the main lounge and downstairs bathroom.

## Leadership and Management

Good systems in place for auditing areas of service provision mean people receive a service which is appropriately monitored. We saw regular audits of areas including the environment, care records and incidents and accidents. The manager told us the RI visits on a regular basis. This was evidenced in reports completed by the RI. These recorded conversations with residents and staff and areas which had been looked at during the visit. The quality of care reports show the RI has identified what the home is doing well and where they would like to develop. Reports summarise feedback from people using the service and their families through quality surveys and include data from the most recent care file audit. The statement of purpose and guide to the service provide good information to people who may be considering coming to live at Tan Y Bryn. The provider has policies in place. These need to be reviewed to ensure they contain information which is reflective of current Welsh legislation. They should also contain contact details of external agencies, so people know who to speak to if they wish to raise a concern. While no immediate action is required, this is an area for improvement, and we expect the provider to take action.

People are supported by care staff who are appropriately trained and supported. Training records show staff complete regular training which is kept up to date. The manager is proactive in seeking and booking further training for staff. Records seen show staff receive an appropriate induction and probationary meetings followed by regular one to one supervision and an annual appraisal. This ensures staff have the opportunity to share any concerns and discuss their professional development. We saw team meetings take place. Minutes of these meetings show discussions around service delivery, the wellbeing of residents and reflective practice. Recruitment processes ensure people only begin working at the service once all the required checks have been completed. These include disclosure and barring checks (DBS), and appropriate references. This means people who work at the service are suitable and safe to work with adults at risk.

The provider invests in the service to ensure people are safe and live in a home which promotes their wellbeing and personal outcomes. There has been lots of investment in the building and we saw food to be of a good quality, home cooked with lots of fresh vegetables. Snacks and drinks are available to people throughout the day. The manager told us the RI provides whatever they need.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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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79	The provider has not ensured that policies are up to date, are reflective of current Welsh legislation and contain appropriate details of who people can contact both internally and external agencies.	New
73	The Responsible Individual has not evidenced that he visits the service at least every three months, meets with staff and individuals and logs and documents those visits.	Achieved
80	The Responsible Individual has not put suitable arrangements in place to establish and maintain a system for monitoring, reviewing and improving the quality of care and support provided by the service.	Achieved

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