



Inspection Report on

Blaenmarlais Care Home

**Blaenmarlais Cottage
Redstone Road
Narberth
SA67 7ES**

Date Inspection Completed

28/02/2023

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About Blaenmarlais Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Blaenmarlais Care Ltd
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	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

The service is managed and run by an experienced and skilled management team which consist of the former manager, the recently appointed manager and a deputy. The Responsible Individual (RI) maintains a regular presence in the service and has good oversight of it.

Satisfaction levels are high, with people commenting favourably on the quality of care, levels of engagement and the environment.

People are cared for in a person-centred way and these values are embedded in practice with staff showing a level of professionalism and friendliness.

Well-being

People are safe because staff know they have a responsibility to report any safeguarding concerns they have. They are confident the management team would take the appropriate action to make sure people are safeguarded. Visitors to the service are required to sign into the visitors' book so staff know who is in the service at all times.

People's well-being is enhanced because all staff know people very well. This is evident from the way people and their relatives engage with staff. Interactions are friendly and relaxed with some good humoured banter.

Standards of care are good, with people saying their decision to make Blaenmarlais their home has been a good one. Relatives are equally positive, with one saying "*X couldn't be anywhere better*" and another said they are "*very happy with the level of care*".

The physical environment contributes to people's well-being. The home is light, well maintained and calm. Some repairs were being carried out during the inspection and there is good attention to detail.

People have control over their daily lives. Care workers understand they are working in people's home and people choose when to go to bed; get up and where to eat their meals. There is a choice of menu as well as where people spend their time within the service.

Care and Support

People's physical health care needs are met. The service has a good relationship with the local district nursing team and people's physical health care needs are met by either the team or visiting professionals. People value the service provided by a podiatrist and a hairdresser offers appointments also.

Care workers know how to recognise signs of pressure damage and have enough pressure relieving equipment.

There is an understanding of the importance of good nutrition. The menu is varied and contains a choice. Meals are fortified using high calorie products. Most food is prepared using fresh ingredients and there is little reliance on processed foods. Fresh water is available in each bedroom. Special events are celebrated. People's views of the food are mixed, with one person saying "*no comment*" when asked about the food but another said "*I enjoy the food. There is a nice choice*". The food being prepared appeared appetising. Mealtimes are sociable occasions, with most using the dining room for lunch and dinner, with some people preferring to have their breakfast in their rooms. Tables are nicely laid to enhance people's dining experience. The catering monitor the meals, and also spend time with people, to make sure the food offered is what people want.

Care records are detailed and informative. There is a helpful personal profile at the start of each person's notes which sets out what, and who is important to the person. Care plans are detailed, and comprehensive and care staff have time to read and record in the notes. Some entries are not always reflective of person-centred care and the manager and deputy has already identified this and has plans in place to offer further training to staff. People and their relatives consider staff know them and know what matters to them, and this is evident from the interactions we observed which are friendly and relaxed.

People are able to do things they enjoy, and which matter to them. The activities worker spends time reading to people if they are no longer able to do this independently. Other activities include board games; bingo; quizzes and walks. The maintenance worker has made a large connect 4 game which people enjoy. The importance of exercise is understood with some armchair exercise equipment available and used.

Environment

People live in a service which is suitable for their needs. Accommodation is provided over three floors and there is a lift for people whose mobility is reduced.

Bedrooms are light and airy, with most having good views over fields and the grounds. They have some ensuite facilities and many have been personalised with pieces of furniture as well as photographs and other ornaments.

There is good attention to detail throughout the service, with good quality and well-hung curtains, and carpets which are in good condition.

The standard of décor throughout is good with evidence of general maintenance and repair. The maintenance worker takes pride in their work and during the inspection was carrying out some work which had been requested by a person to make their room more comfortable and personalised.

Everyone we spoke with is wholly satisfied with standards of cleanliness throughout the service, describing it as “*spotless*”, “*perfect*” and “*very clean*”. One person said, “*I like my room very much*”.

As well as bedrooms, people can spend time in one of the lounges; TV room; dining room or small sitting area on the first floor. Corridors and hallways are free of any trip hazards.

The kitchen has been awarded the maximum score of five by the Food Standards Agency. The food cupboards are well stocked, and the kitchen appears well equipped.

There are plans to appoint a replacement gardener, but staff have worked to keep the gardens in good condition. People enjoy spending time outside and watching the birds, so the maintenance worker made a bird table in response to this.

Leadership and Management

There is good oversight of the service. The RI, current manager and their replacement are in the service daily and have a very good knowledge of people and those important to them. The reports completed by the RI demonstrate the views of people are considered as well as monitoring the physical environment. The reports written by the manager contain some qualitative information, but do not contain all of the information required. We saw the views of relatives have been sought and these are wholly positive, with the majority of responses being “good” and “very good” on the rating scale. These should be used to inform the full report as set out as a requirement in the Regulations.

There are processes in place to make sure services and equipment are in safe and good working order. Fire safety checks are carried out and fire exits are free of any obstructions. Equipment is visibly checked by the maintenance worker and serviced in line with the manufacturer’s recommendations.

The training matrix shows most staff are up to date with training which is provided as both face to face and on-line sessions. Staff say they have the training they need to safely and effectively carry out their duties. Moving & Handling and Fire Safety training were taking place during the inspection.

Supervision is carried out and staff get feedback on their work. Most staff feel valued in their work and are able to talk to their managers about any ideas or concerns they have and are confident of getting a timely and helpful response.

Recruitment files are easy to navigate and contain most of the information needed to demonstrate workers are safely recruited. This includes photographic identification and the relevant DBS checks. Most files have the right number of references, but one file we looked at had only one reference returned. Files contain evidence of sickness management and induction.

The management of the service is changing, with the appointment of a new manager who has had a period of training and induction for their role from the current manager who has a wealth of knowledge and commitment to 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
80	The responsible individual does not have a suitable arrangement in place to monitor, review and improve the quality of care and support provided by the service. A report written every six months is not available.	Achieved
73	There is no evidence the RI meets with staff and individuals at least every three months as set out as a requirement of Regulation 73.	Achieved

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