



Inspection Report on

Blaenmarlais Care Home

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

Date Inspection Completed

31/01/2024

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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 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

Blaenmarlais provides a very good standard of care for people. This is delivered by a staff team who are committed to maintaining the high standards set by the previous leadership team and continue to be developed by the new manager; their deputy and the rest of the team.

People who have made Blaenmarlais their home are cared for in an environment which is clean and well maintained, and by a team of staff who are suitably trained, supported and effectively led by an experienced manager.

The team understand the importance of dignity and respect and understand they are working in people's home. There are opportunities for people to exercise choice and to do things that are important to them. People, and their relatives, have a high level of confidence in the service and consider they made a good decision to make it their home.

Well-being

People are safe and protected from abuse, harm and neglect. Care workers know their responsibilities in relation to safeguarding and have confidence their manager would deal with any concerns raised and take the actions needed. Care workers have completed training in safeguarding.

There are opportunities for people to talk to care workers in Welsh if they wish to do so as a number of staff are Welsh speaking. The provider is going to remind people of this to make sure they know this is an option for them. Some written information is available in Welsh.

The relationships people have with staff is very good. This includes care workers; managers; maintenance and other ancillary staff. Throughout the inspection, we observed some friendly interactions and one person said how they *“enjoy a joke”* with the staff. Staff are described as *“friendly”* and *“always very kind”*. This is supported by a member of the housekeeping team sitting with a person and reading with them. Care workers know people very well and both individuals and their relatives are confident they made a good decision by choosing Blaenmarlais. One relative said they are now *“not as stressed”* since the person moved into the service, describing them as *“very calm and settled”*.

People are encouraged and supported to maintain contact with those important to them and the local community. Visitors are welcome and entertainment is regularly provided by people in the local area.

The physical environment contributes to people’s wellbeing. It is clean, well maintained and comfortable. The outside space enhances people’s well-being further.

Care and Support

Care records are informative and comprehensive. There is a helpful personal profile which sets out what and who is important to the person. Care plans are written for a range of needs including mobility, personal care, nutrition and communication. Individual care plans set out clearly how and when care and support is to be offered. The records are reviewed regularly, and care workers have time to read them.

People can do the things they enjoy and which are important to them. Some people spend time away from the service with their families and friends. Some prefer to spend time in their rooms and others like to spend some or most of their time in the communal areas. There is a programme of activities over six days a week, and people speak highly of the activities worker. For those people receiving care in bed, the activities worker spends some time with them in their room, and for others, group activities are offered including walks, music, exercise quizzes and games. Records are made of people's participation but the outcomes for people are not always recorded. A hairdresser visits the service regularly.

People's physical health needs are met. Care workers are not rushed in their work and say care "*takes as long as necessary*". A relative expressed their appreciation of the care, saying "*X couldn't be looked after any better*". However, one relative said there sometimes seems to be a lack of staff. We discussed this with the manager and the care workers who are confident that, whilst at times the care workers are very busy, over all there are enough staff, with the manager and deputy working alongside the care workers whenever needed. People receiving care in bed appear well cared for, with clean bed linen, appearing comfortable and with evidence of regular reposition to reduce the risk of pressure damage. All care workers we spoke with know how to recognise the signs of pressure damage. They have the equipment needed to reduce the risk, and also know who to report any concerns they have.

The service has signed up to the Gwen am Byth national programme for improving oral hygiene and each person has a specific oral health care plan.

There is an understanding of the importance of good nutrition. Most meals are made using fresh ingredients and there is little reliance on the use of processed food. There is a choice of meal and alternatives are available if requested. Special diets are catered for. People are encouraged to use the dining room, where one person helps to lay the tables. Food is available outside of mealtimes and special events are celebrated. People's weight is monitored regularly. Most people are complimentary about the food, with some saying it is improving. One person said "*I am quite content with it*" and another described it as "*very good*". Another person said they have successfully lost weight which they are happy about.

Environment

People live in a service which is suitable for their needs. There is a lift and accommodation is over three floors.

All parts of the service are light, bright and airy. Standards of cleanliness are excellent and the housekeeping team take pride in their work, recognising their important contribution to people's care and support. People and their relatives appreciate the high standards of cleanliness, describing the service as "*spotless*" and "*immaculate*". One person said of the service "*it's beautifully clean. There is a general impression of cleanliness*".

In addition to the main lounge and dining room, there is a small sitting area which is being made into a reading and music space.

There is very good attention to detail throughout. The décor, furniture and fittings are in good order and visitors to the service comment favourably about the décor and standards of maintenance throughout, as well as the willingness of the maintenance worker to respond to requests promptly. Additional bathrooms and toilets mean people have easy access to these facilities.

Bedrooms are personalised with items of furniture, photographs and ornaments. They all have some ensuite facilities and have views over the gardens and surrounding fields.

The kitchen has been awarded the maximum score of five by the Food Standards Agency. It has all the equipment the catering team need.

An extensive range of checks are carried out to make sure equipment and services are suitably maintained. These include weekly and monthly checks on fire safety; water temperatures; emergency lighting and moving & handling equipment. In addition, there is evidence that gas and electricity safety assessments have been completed as well as legionella and also inspections on the trees in the grounds.

The outside areas are large and well maintained. When the weather allows, people enjoy spending time in the gardens and there is adequate and safe parking space for visitors.

Leadership and Management

There are some extremely effective and robust governance arrangements in place to monitor quality. The manager completes an extensive range of quality audits, which include care plans, medication and staff files. These feed into an annual quality audit. The manager and responsible individual (RI) work very closely together and the RI has good oversight of the service. They are extremely visible within the service and records their findings as required by Regulation.

The training matrix shows staff are generally up to date with training. Additional training is provided as the need arises. Care workers are trained in a range of areas including dementia care, moving & handling, nutrition and food safety. This is made up of both elearning and face to face. Competency assessments and practice observations are carried out to make sure care workers have the skills and training needed to carry out their duties safely and effectively. People, and their relatives consider workers to be skilled and well trained.

Care workers are supervised. They get feedback on their work and have the opportunity to review any issues from the last meeting, talk about their well-being, training & development as well as their understanding of policies and procedures. The manager and their deputy are available for staff at other times on a more informal basis to discuss any ideas or concerns they have.

There is a safe recruitment process and staff files contain the information needed including the required Disclosure and Barring Service (DBS) checks, references and proof of identity. Files are well organised and easy to navigate but they do contain a lot of old and out of date information.

The provider is very responsive. Residents meetings take place and requests made are acted upon. During the inspection, the manager and her team responded promptly to a suggestion made demonstrating their commitment to safety and person centred care and support.

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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