



Inspection Report on

Blaendyffryn Hall Nursing Home

**Blaendyffryn Hall Nursing Home
Horeb
Llandysul
SA44 4JA**

Date Inspection Completed

09/06/2022

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About Blaendyffryn Hall Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Wellcome Care Homes Ltd
Registered places	30
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People are happy with the care and support they receive. Care workers are guided by accurate and up-to-date plans that are reviewed regularly. Health and social care professionals are consulted as and when required to ensure people's health is promoted. Interactions are positive and sensitive to individual need.

Improvements to the internal and external environment are ongoing. The provider has oversight of the service and visits regularly.

The manager acknowledges that communication between staff and people's representatives is not always as good as it should be and aims to make improvements.

Well-being

People receive person centered support. Senior staff involve health and social care professionals to help people remain as healthy as possible.

Nursing staff maintain personal plans that focus on things that matter but do not always evidence people's involvement.

Individuals are respected, and interactions with the staff team are positive and friendly. People enjoy and gain comfort from pets at the home, there are cats and one staff member frequently brings in her dog. The dog recently had puppies and once they were at an appropriate age they were brought in to visit everyone. The people living at the service looked forward to and enjoyed this event as they had been missing the dog.

People live in a service that is working towards an 'Active Offer' of the Welsh language and are able to choose to communicate in Welsh or English.

The environment is being refurbished to be more inviting and brighter, while keeping the character of the building. The new lift supports people to move around the home to empower people to be as independent as possible. Individual rooms are personalised and there are different communal areas for people to use to do things that make them feel happy. People are able to choose where they spend their time and some prefer to stay in bed or a chair in their room for most of the day whilst others enjoy the communal areas.

Areas of the grounds have been reclaimed and the gardens are now accessible for people to do things they enjoy, and helping them remain healthy.

Care and Support

People are happy with the care and support they receive. We witnessed genuine and warm interactions. People communicate with each other and the staff team in both Welsh and English.

The manager assesses a range of information from the person, their representatives, and external professionals. The provider has up-to-date plans for how it provides care to individuals. Nurses regularly review plans so they remain relevant.

We saw evidence in care files that conditions such as Diabetes are well managed. The files we looked at showed blood sugar readings are checked at least twice a day and more often when felt necessary. The GP and/or District nurses is contacted for advice if blood sugar levels are of concern and medication altered as advised by health professionals.

There are clear end of life pathways in consultation with health care professionals to ensure a dignified and comfortable end of life.

We saw good documented evidence of health and social care professionals being involved with people. We saw one person's falls significantly reduced as a result of liaising with health professionals and having their medication altered.

People who are bed bound are repositioned regularly according to their care plan and the files we looked at evidenced that their skin integrity is checked according to their needs. A turning and pressure chart is kept in the person's file in their room.

Sufficient staffing levels are in place to meet the needs of people living at the service. Staff have enough time to spend with people and have a good understanding of individual needs and preferences.

COVID-19 and restrictions have been a challenge however restrictions allow for more visiting now that cases have fallen. Visits take place inside the home, a visiting pod is also available and people enjoy meeting their friends and family in the gardens.

The provider has policies and procedures to manage the risk of infection. There are good hygiene practices throughout, we observed staff wearing the correct PPE and following Public Health Wales guidance

Environment

The provider continues to focus on improving the environment. Extensive work to the grounds has improved the appearance of the gardens and made more space available for people to use. A polytunnel has been purchased and is being used for people to grow their own vegetables. The exterior of the building is clean and will be painted in due course. Decoration of the internal aspects of the building continues, the entrance hallway has been completed and is lovely, bright and welcoming. There is a clear plan for the rest of the service to be decorated. The RI has already purchased paint, furniture and flooring.

Following some issues with the new lift it is now working again and has an alarm that will go off if anyone is in the lift and it stops moving. The lift is accessible and supports people to move around the home. Communal areas are considered and encourage interactions and small kitchens enable people to make drinks and snacks themselves. The maintenance coordinator resolves issues promptly and the domestic team are committed to keeping the building clean. The cats have their food bowl, toys and scratching post in the living room, this area was clean and tidy.

The kitchen has recently been inspected by Environmental Health (EH) and maintained a food hygiene rating of five. The EH officer recommends adding a sink to the dishwasher area. People are able to make daily choices from the menu and alternatives are available.

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

Leadership and Management

This area was not inspected fully as it was a focused inspection however it is evidenced that both the manager and the RI have good oversight of the home and has arrangements

in place for monitoring, reviewing and improving the quality of the service. The RI has acted on the advice provided at the previous inspection and now keeps detailed records of his visits and conversations with people and will include this in his next Regulation 73 visit report.

Individual care files are kept in a lockable room in the nurse's station however this room is not always locked as staff are frequently in and out. We recommend that a lockable cupboard is purchased for the care files to ensure that information is kept confidential and stored securely.

We have also advised that the manager creates a General Data Protection policy in line with government legislation to ensure people and their representatives are clear on the rules for sharing confidential information.

The manager acknowledges that communication between staff and people's representatives is not always as good as it should be and aims to make improvements. This will be looked at during the next inspection.

The RI has recently purchased a massage chair for staff to use during their breaks as he recognises the impact their role has on their physical well-being.

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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