



Inspection Report on

Bryn Siriol Respite Service

Aberystwyth

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

20/12/2022

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About Bryn Siriol Respite Service

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Royal Mencap Society
Registered places	3
Language of the service	Both
Previous Care Inspectorate Wales inspection	8 October 2021
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

People are positive about the respite service they receive. A representative of someone who uses the service said *“it’s absolutely wonderful, they are so caring and they support him to just slot in when he visits”*. Experienced and passionate support workers are guided by person centred plans. Individualised communication is a key focus at the service.

The environment is well maintained and accessible with adaptations that enables people to maintain their independence. Following the lifting of the restrictions the service is developing more social spaces for people to meet up.

The manager of the service is accessible and well respected by all involved. The provider has good oversight of the service and focuses on continual improvement.

Well-being

People and their representatives are positive about the person centered support they receive. People are involved in all decisions about their care and support. Senior staff communicate well with people and family members before and after each visit. People remain as healthy as possible because they are supported to work effectively with health and social care professionals. People and/or their representatives contribute to decisions that affect them. Key workers maintain detailed and informative personal plans that focus on things that matter.

Well trained and experienced support workers have built up longstanding relationships with people who use the service. A worker told us *“I enjoy the interactions and seeing people smile. I love the individuality and treating people as individuals”*. Activities have restarted following the pandemic and people enjoy doing things that matter to them. When discussing activities a support worker said *“we get people involved as much as possible and they get so much out of achieving things”*.

People live in a service that is working towards an 'Active Offer' of the Welsh language. Many of the staff are Welsh speakers, which means people can communicate in Welsh or English as they choose.

Recruitment and training ensures people get the right care and support, from skilled and knowledgeable workers. Staff protect people from abuse and neglect and are fully aware of their responsibilities to raise concerns. People and their representatives know how to make a complaint if needed and have full confidence in the manager.

The building is bright and fresh, the layout and adaptations enable people to be as independent as possible. There are different communal areas for people to use that support them to achieve their outcomes; for example planning a meal and cooking themselves. Well maintained gardens are accessible, with a sensory room, and people can do things that matter to them.

People have a voice and input into the running of the service because the Responsible Individual (RI) involves them in quality assurance. Governance processes are comprehensive and focus on developing the service by using information from surveys and audits. The Quality of Care Review identifies areas to improve following consultation with people who live and work at the service.

Care and Support

People and their representatives are very happy with the service they receive. A family member told us *“she’s so excited to go there and that lets me know she’s happy”*. People stay at the service for short periods but staff take their time to get to know them and focus on their individual communication preferences. A support worker told us *“I enjoy all aspects of the job and the new faces at the service makes it more interesting and varied”*.

The provider has an electronic care planning system. Plans are accurate and up-to-date with lots of positive information about the individual and how best to support them. The manager considers a range of information from the person, their representatives, workers and external professionals. Risk assessments help to maintain people’s safety and independence, without being overly restrictive. Risk assessment have the following opening statement *“There are lots of things people like to do in life that involves risk. This plan is about doing things as safely and sensibly as we can, rather than saying we are only doing things that are totally safe”*. Key workers regularly review plans with individuals and their representatives so they remain relevant. Key worker contact people and their relatives by telephone after each stay to check how it went and if any changes are needed for the next visit. Daily notes are detailed and evidence the support people receive in line with their likes and dislikes. We saw good evidence of health and social care professionals being involved in plans documented.

People enjoy a variety of activities that meet their individual needs, these range from shopping, cooking, meals out and enjoying the local community. A representative told us *“she likes to do her own thing and they (staff) respect that and support her to do what she likes”*. The manager is also setting up more activities in the service for people to socialise and interact together. The provider is investigating different funding options for a replacement vehicle to further improve activities.

Staffing numbers are monitored by the manager and change in line with the needs of each person during their stay. The service also provides a small outreach support programme to support people who live locally.

Environment

The manager of the service ensures the environment supports people to achieve their well-being outcomes. The layout and design of the building along with equipment and adaptations promote people's independence. People bring personal items to decorate their rooms during stays and the provider is working on new ways of making the service more homely for people. Well maintained grounds are accessible and a sensory room is available for people to enjoy.

There is a big focus on inclusive communication at the service and there are symbols and photographs throughout. The provider is in the process of translating key policies into Welsh and the majority of support workers are able to talk to people in Welsh or English, as they choose.

Regular Health and Safety audits of the property are completed. Testing of fire safety equipment is up-to-date and actions from the last internal fire audit have been completed. Personal Evacuation Plans are individualised and available in emergencies.

The kitchen has a five star food hygiene certificate. Support workers promote independence and support people to buy and prepare their own meals. Adjustable worktops enable people to be fully involved in the process.

Leadership and Management

The provider has effective arrangements in place for monitoring, reviewing and improving the quality of the service. The Responsible Individual's (RI) statutory quarterly visits are comprehensive and involve people and/or their representatives and staff. A support worker told us *"I've seen him (RI) a lot and he understands our role and the challenges we face. He asks us what we think and he does things that benefits the service"*. Information from internal quality assurance systems informs the action plan that focuses on improving the service. The six monthly Quality of Care Review; evidenced positive feedback from people, their representatives and professionals involved in the service. This review also identifies areas of the service the provider wishes to improve, such as developing the Welsh language and enhancing the gardens.

There is an open and supportive culture in the service. The manager is accessible and helpful. A family member said *"[Manager] is absolutely wonderful and would help out whenever we need anything, is easy to talk to and tells us "if you need us just phone"*. A support worker told us *"[Manager] is very good, she keeps us informed of things we need to know and always thinks ahead. I can talk to her about anything and she is definitely approachable. I can't praise her enough"*. Supervision records show staff receive regular one to one supervision and staff told us the manager is always available if they need help. The manager is re-starting the appraisal process and we will check this in the next inspection. Support workers have a good understanding around safeguarding. Policies and procedures are in place to support good practice and staff have a sufficient understanding of key policies.

Pre-employment checks take place before new employees start work. These include reference checks, right to work and Disclosure and Barring (DBS) checks. Support workers receive mandatory, person specific and developmental training to meet people's needs and enable outcomes.

The provider has transferred care planning information for people and personnel files to an electronic system. This has improved recording of key information and the managers oversight. For example, alerts when plans are due to be reviewed, if medication has not been administered on time or if staff information needs to be updated.

Adequate numbers of staff meet people's individualised needs. A key worker system ensure people get continuity of care with support to build relationships with staff.

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
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