



Inspection Report on

Brookfield

Bangor

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

01/02/2024

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About Brookfield

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Cartrefi Cymru Co-operative Ltd
Registered places	3
Language of the service	Both
Previous Care Inspectorate Wales inspection	28 October 2022
Does this service promote Welsh language and culture?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People benefit from respite stays that are tailored to meet individual needs. People and their families value the service. People form meaningful relationships with those they live with and the care staff caring for them.

There has been a significant improvement in quality of the information recorded on individual personal plans. The service has implemented effective systems to update and review personal plans alongside an effective matching system.

Care is provided by a consistent and dedicated care staff team. They regularly go above and beyond to ensure the service meets the needs of people in line with the statement of purpose.

The environment is comfortable and homely with suitable equipment, and furnishings available.

Leadership at the service is strong and consistent and action is taken promptly to implement improvements.

Well-being

People and their families benefit from their short break stays at the service. They are planned well in advance meaning everyone knows what to expect and arrangements can accommodate individual circumstances. Where possible the service will provide additional services to further support families. Short breaks are planned in line with what is important to people and how their time at the service can best benefit them. During short break stays, people continue to engage in their daily routine and activities. For example, they partake in work placements, day centres and college courses.

Weekends are an opportunity to relax, and people are encouraged to spend time doing the things that make them happy. Careful matching means those with similar interest will often be staying at the house at the same time, and they are supported to engage in activities together. If an agreement is not reached, care staff will strive to accommodate individual likes and dislikes. Care staff will often arrive early to complete preparations for a change in short time stays.

The short breaks provided is a valuable resource to people and their families. The experiences provided mean people benefit from rest and a break from the stresses of day-to-day life. When required the service monitors individual health needs and shares information with families and relevant agencies.

Those using the service are safe and protected from abuse. Care staff are in regular contact with families, and professionals responsible for their care. Personal well-being is monitored. Before a respite period, care staff will consult with families and gather up to date information about individual needs and check if there are any changes. At the end of the respite period a detailed feedback form is completed and shared.

The accommodation is homely with all the comforts expected in a family home. Care staff know which bedroom the people like to stay in, and their needs are accommodated. Meals can be enjoyed in the kitchen or in the separate dining room, and they can watch television and socialise in the main living room. There is one adapted bedroom on the ground floor, and this supports people with additional physical needs.

Care and Support

The local authority commissions the service through a service level agreement, and placements are considered and discussed as part of the local authority resource panel. Prior to offering a package of respite care, and agreeing suitable dates, the service provider considers how they will meet an individual's identified care and support needs. Care staff and managers have extensive knowledge of individual care and support needs and can ensure different stays do not impact on one another. Improvements have been implemented to the matching system; information is now logged meaning in the absence of specific care staff it would be possible for matching to continue successfully.

The service receives information regarding people's care and support needs. This information is used to formulate a personal plan. Leaders at the service have recently been contacting the placing authority to request updated information. Family members are also contacted prior to a short stay and gather additional information. Any changes are immediately shared with care staff via the services electronic recording system and significant information is added to the personal plan. There may be occasion when information changes several times when planning a short break and we saw the documents were always updated along with the provider assessment, to ensure the service remains suitable.

Care staff work hard to support people, they are caring, and their approach is in line with the service's statement of purpose. They recognise what is needed by people and their families, and they respond positively and make a difference. The consistent staff team know the service well. Since the last inspection there have been no staffing changes, all are experienced and have worked at the service for several years. This provides stability and consistency for families. Those wanting to receive a service in Welsh would be able to do so, because several of the care staff are Welsh first language.

Care staff's rota and working pattern reflects the importance of valuing individual preferences, and their dignity and privacy. Care staff's focus is to provide care and support in line with individual's preferences, needs and wants. They regularly advocate on their behalf to make sure they have access to any additional resources they may need. If required meetings with external agencies are arranged and further assessments of need completed to assess whether specialist equipment can be provided.

Environment

The location and design of the premises are suitable for the service. Its location means there is easy access to public transport and local amenities such as shops and places of interest. They also have access to two company vehicles. The service provider works closely with families to arrange transport when needed.

There is an individual bedroom for each person, and they have use of a shared bathroom upstairs, and an en-suite bathroom in the downstairs bedroom. The nature of the service makes it difficult to personalise bedrooms. However, where possible the service provider makes sure those using the service are allocated the bedroom of their choice. They usually return to the same bedroom they will have been allocated on their first stay. Care staff have their own bedroom upstairs. To allow for a quiet space for care staff to complete paperwork there is a computer and a desk in the staff bedroom. However, it remains a comfortable space to rest. People living at the service can keep their personal belongings safe and secure in an appropriate location and there is a process for the safe storage of medication,

There is access to specialist equipment, such as hoists and grab rails. The service provider makes sure the environment is homely, and suits the needs and lifestyles of those staying. Individuals can choose to socialise in the communal areas, or they can choose to spend time on their own. If needed there is access to the service provider's main office in the nearby town, this provides a space for confidential meetings without impacting on the routines and privacy of those using the service.

There is a service level agreement with the building owner and any work needing to be done is reported promptly and is addressed in a suitable time frame. The building has recently been painted. Care staff are responsible for the cleaning, and as in a family home they are helped by people who are there.

Risks to the health and safety of the individual are as far as possible identified and reduced. The service provider checks food and fridge temperatures, but we found food in the fridge had not been labelled to record when they had been opened. The fire alarms are tested weekly, and fire drills take place.

Leadership and Management

The service is delivered with sufficient care and competence. The service provider maintains oversight of the service. The aim of the service is clear in the statement of purpose and people are at the centre of the service. The statement of purpose is kept under review and updated as and when required.

Consistent staffing arrangements ensure those using the service are cared for by staff that know them well and are familiar with their needs. This familiarity enables care staff to identify changes in needs. The appointed responsible individual (RI) has implemented positive changes and has a clear oversight of the service. All leaders work in partnership and strive to continue to deliver quality care.

The service provider ensures appropriate staffing levels. All are experienced and familiar with their roles. Care staff are confident in their abilities and work well together as a team. Since the last inspection, we found team meetings are happening consistently, thus providing care staff with an opportunity for discussion and reflection. Since the last inspection the service has further developed the use of an electronic system. Handover information can now be accessed electronically, and all care staff have access to their own mobile phone for work purposes. Detailed handover books enable easy access to the information care staff need to be aware of at the start of each shift.

There has been no change in staffing since the last inspection. Care staff are provided with regular meaningful supervision and annual appraisals are being completed on a 12-month rolling programme. Care staff are provided with regular training relating to their role, and feedback has been positive.

The deputy manager is currently fulfilling the role of manager and is supported by the area manager and the previous registered manager. The service provider has structures in place which provides a suitable and effective deputising system when the manager is not available or absent for a period. Arrangements for dealing with any absences and emergencies is robust.

The RI visits the service regular and reports on their findings, detailing positives, and areas for improvement. This informs the quality-of-care report.

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
36	Care staff are not receiving regular one to one supervision with their line manager. Supervision is required to help them reflect on their practice and to make sure their professional competence is maintained. The lack of supervision means they do not have an opportunity to receive feedback about their performance. Care staff have not had an annual appraisal to provide feedback on their performance and identify areas for training and development to support them in their role.	Achieved
16	Personal plan's are not being reviewed at least every three months, or sooner if there is a change in an individual's circumstances. The plan's do not take in to reflect if there have been any changes to how the service supports an individual to achieve postive well-being outcomes.	Achieved
14	The service provider fails to evidence how they have assessed how they will meet the needs of the individual using the service. There is no evidence to show how they have assessed the impact and suitability of individuals using the service at the same time will have on well-being and achieving positive well being outcomes. Discussion with care staff and area manager evidenced that care staff are aware of the impact, however a formal process is not followed, and the matching of individuals is completely dependant on the information and knowledge that specific care staff about those people who use the service.	Achieved
18	The service provider has failed to complete provider assessments, as required by regulations for those people who are being provided with a service.	Achieved
73	The RI has not completed visits to the service in line with regulations.	Achieved

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