



## Inspection Report on

**Brynderwen Catre**

**Ammanford**

**Mae'r adroddiad hwn hefyd ar gael yn Gymraeg**

**This report is also available in Welsh**

## **Date Inspection Completed**

04/07/2023

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## About Brynderwen Catre

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Catre Ltd
Registered places	6
Language of the service	Both
Previous Care Inspectorate Wales inspection	<a href="#">2 May 2023</a>
Does this service provide the Welsh Language active offer?	This service provides an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

### Summary

Brynderwen endeavours to support people as they wish to be supported. The manager and Responsible Individual (RI) monitor all aspects of people's daily care and support, although changes are needed to improve the efficacy of this oversight. This is because there are failings with the home's current medication management and potential hazards in the environment. But people in the home say they are happy. Senior staff members make prompt referrals to healthcare professionals where necessary. Care workers want to make a positive difference to people's lives. All employees attend training relevant to their roles and say it helps them to support people appropriately.

### Well-being

Overall, people at Brynderwen are as independent as they wish to be and have as much control over their lives as possible. Each person knows and understands what support and opportunities are available to them. Care workers are aware of the importance of people's well-being and regularly ask for their opinions and feedback on the care and support they receive on a daily basis. Personal plans describe all support requirements and there are one-page profiles that describe each person in clear terms and people have access to advocacy services where they want independent support in issues which affect them.

People are relaxed, do things that make them happy and are as busy as they wish to be. Care workers encourage people to make choices and decisions about how they spend their time. The home has a range of communal areas for people to meet up in with friends or families, or to be alone if they wish. People also go out shopping, volunteering in local shops, go swimming and visit the cinema.

Each person's voice is heard and listened to. Care workers know the people they support, and work with people to ensure they receive the support and information they need. The service provides the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. While no one currently in the home is a Welsh-speaker, some staff members speak Welsh and there is bilingual signage around the premises. The manager ensures people know how to make a complaint if they need to: people say they are confident the manager would listen to them if they did. However, people's health and well-being are at risk due to potential hazards in the environment, together with medication management within the home.

## Care and Support

Care plans describe each person's support needs in detail. The manager considers a range of information to ensure they can meet people's needs before admission to the home. This includes careful assessments on the compatibility with others currently in the home, together with obtaining information from relatives and external healthcare professionals such as social workers. Risk assessments help to ensure people retain their independence as much as possible. From this, senior staff develop care records that describe people's support arrangements and requirements. The staff team hold regular discussions with people, their representatives and healthcare professionals involved in their care and the manager makes prompt referrals to healthcare professionals when necessary. It is also evident that people can follow their own routines as they wish and are happy with how the staff team support them.

Care workers treat people with respect. When people first come to the home, they have a service user guide which describes what they can expect from the home as well as details of the complaints process should they need to use it. Care workers have regular safeguarding training updates and are aware of current best practice.

People told us they feel safe. However, medication is not being safely managed throughout the home. We were told of medicines being shared and untrained employees handling medication. We also have concerns over how medicines are being stored throughout the premises. This is potentially placing people's health and well-being at risk and we have therefore issued a priority action notice. The provider must take immediate action to address the issue.

The provider has clear policies and procedures to manage the risk of infection. There are good hygiene practices throughout the home and care workers may refer to infection management policies when necessary.

## Environment

People say they feel comfortable in the home, but the environment is potentially unsafe. For example, there are building materials scattered around the garden, including ladders and large paint pots. In addition, people are asked to smoke in an adjacent overgrown garden that belongs to the provider, but this area has caused injury to people using it due to hazards on the ground. We have seen evidence of mushrooms growing inside the building and there is anecdotal evidence of malodours arising from a stagnant old swimming pool underneath the annexe to the side of the property. Overall, the home is shabby and in need of decoration throughout. An employee told us, *“Nothing is ever done”* and *“Leaks in toilets and showers take ages to be fixed, there is filler throughout the building and it seems it is in a constant state of disrepair.”* These concerns are potentially placing people’s health and well-being at risk and we have therefore issued a priority action notice. The provider must take immediate action to address these issues.

Bedrooms are spacious and personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture. People can choose where to spend their time, be it in their own rooms or with others in communal areas or the garden. We saw that people tend to gather around the central large kitchen area.

Fire exits are free of obstructions. All COSHH (Control of Substances Hazardous to Health) materials are stored correctly, in line with the COSHH Regulations 2002 and there are clear instructions displayed in the home on what to do in the event of a fire.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry and record their visits in the visitor’s book when entering and leaving. Care records are kept securely and only available to authorised care workers. Employee personnel records and Deprivation of Liberty Safeguards (DoLS) records are securely stored in a locked office.

## Leadership and Management

Overall, the provider has a vision of the support it wants to provide, and a positive regard to each person receiving support. The RI is in regular contact with the home and provides consistent support to the manager.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Senior staff ensure all care records clearly state any risks to people's well-being and detailed risk management plans help to keep people safe and as independent as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach the manager but would contact external agencies such as the local safeguarding office if they thought they needed to.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before any new employee starts work: these include reference checks and Disclosure and Barring Service (DBS) checks. Care workers undertake training relevant to the people they support - they say this provides them with a good understanding of their roles and responsibilities and the best ways to support people. In addition, employees may discuss any issues they wish to raise in three-monthly supervision meetings.

Regular staff meetings give care workers the opportunity to discuss their work and to keep up to date with developments in the service. All audit findings are summarised in six-monthly quality of care reports, which identify actions and planned improvements for the service. However, the issues identified around medication management and the environmental hazards demonstrate some shortcomings that need to be addressed in the RI's oversight of the service. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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
58	At the time of inspection, medication management was chaotic and was not being stored securely. There has also been sharing of medication. Untrained staff have given medication. Mushrooms have appeared on floor of toilet next to one of the meds rooms on occasion. We heard anecdotal evidence of mushrooms growing in medication room from anonymous complainant. The provider must rectify all the above to ensure people's medication is managed safely.	New
44	The service provider does not ensure the environment is kept free from potential hazards. There is no safe smoking place for people and staff and a staff member recently stepped on nail. There are building items and materials scattered throughout the garden, evidence of mushrooms on toilet floor and odours from stagnant water in swimming pool under	New

	<p>the new annexe to the side of the main building. Overall, the building is shabby. This means the environment is potentially unsafe and does not enable care workers to keep people they support safe at all times.</p>	
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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.

<b>Area(s) for Improvement</b>		
<b>Regulation</b>	<b>Summary</b>	<b>Status</b>
66	RI's oversight arrangements did not pick up on unsafe meds practices and environmental hazards:	New



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**Date Published** 02/08/2023