

Inspection Report on

Bryn Edwin Hall Residential Home

Bryn Edwin Hall Residential Home Northop Road Flint Mountain Flint CH6 5QG

Date Inspection Completed

11/07/2024



About Bryn Edwin Hall Residential Home

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Amber Care Ltd
Registered places	35
Language of the service	English
Previous Care Inspectorate Wales inspection	9 November 2022
Does this service promote Welsh language and culture?	The 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 experience an outstanding service and receive exceptional personalised care and support which they have control of. There is a strong ethos within the home of treating people as individuals and with respect. Bryn Edwin Hall has recently been awarded 'Number Two' in the top five care homes in Flintshire and have received comments such as 'full of warmth and charm'. They have also recently been awarded a certificate of accreditation at 'silver level' in delivering personalised support for older people living in care homes in Flintshire. A relaxed atmosphere throughout the home helps people and visitors feel at ease. Activities are planned and spontaneous and staff work closely with people to establish their individual and unique preferences. There is also an array of interesting inhouse Bryn clubs for people to attend.

The development of technology within the home ensures people are safe from the risk of falls and allows relatives to access care records and be involved in their relative's care. There is a consistent presence of staff to meet people's needs in a timely and responsive manner which ensures people are always safe and their needs are met. The provider invests in the home and the staff team, it is clean, homely, and welcoming.

The service has robust internal quality assurance procedures and processes to ensure the service provided is of a very high standard and is safe. The manager is highly respected and dedicated and is extremely regarded by the entire staff team, residents, and visitors. Management work with organisations and professionals to ensure people's care and support is in line with best practise guidance. Staff are trained, supervised and preemployment checks are robust.

Well-being

The atmosphere in the home is very warm and friendly. Staff are passionate about providing the best and respectful care to people and demonstrate that all people who live at the home matter and are important. We saw staff are highly motivated offering care and support that is exceptionally caring and gentle. There is a positive culture because staff have built trusting and positive relationships with people they care for and have taken steps to understand people's backgrounds and personal histories and what matters to them. There is robust infection control procedures to minimise any risk of cross infection.

People's physical and mental health and emotional wellbeing is promoted by an enthusiastic staff team to ensure they have a sense of purpose and involvement. People's health is monitored effectively and referrals to outside health professionals is prompt when needed. Personal plans are comprehensive and focus on what matters to the individual and how they want their needs to be met. We saw people participating in organised activities of their choice such as a quiz, where there was lots of laughter, the questions were well timed and led to wider discussions about the answers given. People enjoy and attend an array of 'Bryn Clubs' which include bakers club, armchair travel, fitness club, Zumba, mindfulness, garden club, Bryn's choir and a book club. People enjoy and look forward to seeing the home's pet therapy dog 'Billy' and we saw many instances when people came looking for him. A couple of residents are enjoying refurbishing a table to add to their living room. People are supported to eat and drink healthily and are provided with a choice of meals according to their preferences and needs.

People have a choice. People and staff are at the heart of running and developing the service as people, families and staff attend a range of planned meetings, feedback surveys take place regularly and a comments/suggestion box is available. People have chosen their bedroom layout and the colour schemes in the living areas. Management team are proactive in seeking people's views regarding the quality of meals and there is a variety of meals offered and choice. For people who are at risk of losing weight, fortified foods are provided, and their weight is monitored with referrals to specialists when needed. There is a pictorial menu on display in the main areas.

People are protected from harm and neglect. Care staff and managers understand their safeguarding responsibilities and are aware of how to raise concerns should they need to. Staff are up to date in safeguarding training and the provider has policies and procedures in place to ensure the safe running of the service. Staff receive a good range of training to ensure they can carry out their work roles effectively and to a high standard. All staff receive regular, planned supervision and appraisals. There is an excellent system in place to keep people safe in the service, including thumb print operating doors, secure outdoor areas and signing in and out processes.

Care and Support

Preadmission assessments are completed before people are admitted to the service and personal plans are developed in consultation with the person and relative. People have the

opportunity to visit the service as a day service before moving to see if they like it. Each person has a pen picture to record what is important to them. Personal plans described how they want to be supported and contain detailed person-centred risk assessments and management plans to help staff keep people safe. These plans cover every aspect of people's lives including mobility and falls risks, nutrition, and skin integrity. Keyworkers ensure people and their relatives are invited to contribute to their care planning review process. Risk assessments and personal plans are regularly reviewed and updated as people's needs and the risks they faced changed. There is a secure electronic system where authorised relatives can access the 'relatives gateway' which is live and can see general updates about their loved one's care as it happens. This system provides them with reassurance and peace of mind and the ability to feel involved in their relative's care needs.

Staff have a good understanding of identifying risks people might face and the action they need to take to prevent or safely manage those risks. The provider has ensured people can safely move independently around the home and has demonstrated a pro-active and strong commitment in driving up improvements regarding falls management. The provider has invested in a state-of-the-art Artificial Intelligence system in managing and preventing falls in the home. The manager stated this has proven very successful and falls have greatly reduced since its inception. Staff follow current best practise guidelines regarding the prevention and control of infection, and they receive up-to-date infection control and food hygiene training. The electronic care system flags up how much people have eaten, drunk and their skin integrity needs. The manager is alerted to any deficits and action is quickly taken.

People receive support and treatment from health professionals when needed and have good relationships with professionals. Electronic medicine system ensures medicine records are kept up to date. The system automatically flags up when any errors occur and help reduce the risk of medicine errors occurring. The last medication audit identified there were no errors. Staff receive safe management of medicines training and competency checks are carried out to ensure staff are practicing safely.

Environment

The service is provided in an environment with facilities and equipment that promote the achievement of people's personal outcomes. Bryn Edwin Hall has a sense of grandeur which gives a sense of an environment that is special. The home is situated in extensive,

woodland, well-maintained gardens, and interesting historical grounds for people to enjoy and relax in. There is ample safe spaces internally and externally for people to walk around with no restrictions. There is a kitchenette in the 'Hamlet' unit where people can make their own drinks and snacks with assistance from staff. The home is undergoing refurbishment which recently included a new bathroom with a spa bath which people thoroughly enjoy. The residents chose the décor and furnishings in the lounge in the main house and the dining room has recently been renovated to a high standard. People's bedrooms have brightly coloured doors with door knockers which reflect a front door. Bedrooms are spacious, well decorated and personalised to reflect personal tastes, hobbies, and interests, with items such as ornaments, soft furnishings, photos, and items of furniture. The communal bathroom/toilet room in the main house is currently undergoing refurbishment and work has commenced on a new extension.

The service provider identifies and mitigates risks to health and safety. Risk assessments are in place which include personal emergency evacuation plans. Safety certificates for gas installations, lift operation, fire alarms, hoists and slings, portable appliance tests (PAT) are in place. We saw a detailed comprehensive audits and management reports containing oversight of all maintenance, accidents, infection control, fire procedures and health & safety in the home. The service was last inspected by Environmental Health in September 2023 and scored a 5, which is the highest food rating awarded.

Leadership and Management

The provider has a very clear vision and ethos of how the care is provided and is proactive and monitors the quality of care provided to ensure care is of a high quality. Quality assurance and auditing systems are completed regularly and allows management and seniors to monitor people's care effectively. New technology has been embraced and utilised to keep people safe. A detailed quality of care review document includes feedback

from people, their relatives and care staff, an overview of the service and an action plan is produced. The manager is highly visible and approachable and empowers staff to deliver high quality care and to seek advice from them if needed. The manager has excellent knowledge of the home and the people living there in order to ensure people have their preferences met. Extensive and comprehensive audits such as infection control and medication are completed and look at all aspects of people's support, any issues that arise are immediately resolved.

Communication across the service is excellent as there is a monthly resident newsletter, daily handovers meetings and regular planned staff and resident meetings. The provider advocates for the people they support, particularly in relation to external agencies and obtaining additional support where necessary. The manager told us they feel very well supported in their role, receive regular supervision, and always have access to support. Monthly management meetings take place, and the RI has an open line of communication with the manager so any issues can be discussed as they arise.

Staff receive support, induction, and a variety of training relevant to their roles and are encouraged to develop their skills. The manager is supported by a team of passionate and committed staff who want to achieve the best care for people which enables them to provide strong leadership, facilitate staff development and provide exceptional support to the people they provide a service for. There is a staff induction program that is linked to individual learning outcomes. Staff are complimentary regarding the quality of training and said they receive ongoing training and support. Staff achievements are celebrated, there is an employee of the month. Staff are encouraged to develop their skills with a clear career progression plan/goal in place.

Recruitment systems are safe and there is enough staff to meet people's needs. We saw staff were visibly present providing people with the appropriate care and support they needed for example staff were available to spend quality and relax time with people. Staff were not task orientated and we observed numerous times through our visit they had time to interact with people. People and staff told us the home had enough staff to meet their care and support needs. Manager told us they are overstaffed and did not have any staff vacancies. Pre employment checks are carried out to ensure the suitability of staff for their role.

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	N/A
	inspection	

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