



## Inspection Report on

**Bistre Nursing Home**

**Bistre Nursing Home  
Mold Road  
Buckley  
CH7 2NH**

## **Date Inspection Completed**

20/05/2024

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## About Bistre Nursing Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Bistre Care Homes Limited
Registered places	32
Language of the service	English
Previous Care Inspectorate Wales inspection	7 June 2022
Does this service promote Welsh language and culture?	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

The manager is committed in endorsing a positive culture in the home and promoting people's independence, keeping people physically and mentally active and giving people choice and control. A choice of interesting and exciting daily activities is available for people to enjoy. People's care and support is individually tailored to each person's own individual needs.

There is a positive culture in the home and staff are very proud to work for the provider. Staffing levels are sufficient to meet people's needs safely and ensure people receive consistent support. Staff are recruited safely, and the management team ensure staff are suitably skilled and trained to carry out their role and meet people's complex and diverse needs. Staff feel supported and receive regular individual supervision to discuss their work.

People are supported to have maximum choice and control of their lives and staff support them in the least restrictive way possible and in their best interests; the policies and systems in the service support this practise. The environment is clean, interesting, well maintained, and welcoming. The atmosphere is exceptionally welcoming, friendly, and people feel at home. Systems are in place to measure the quality of the service.

## Well-being

People have control over their day-to-day lives. Views and preferences are sought and documented during the initial pre-admission assessment. Care records are written in a way that clearly identifies people's likes and dislikes and, in a way, and time that they preferred to have their care provided. We saw staff encourage people to make choices and gave them support in making those choices when necessary. Kitchen staff have a good understanding of people's likes, dislikes and dietary requirements and there is choice of meals. Staff told us they strive to make every day different for people. There is plenty of exciting opportunities to take part in a wide range of activities which contribute positively to people's well-being.

People are treated with dignity and respect and know what opportunities are available to them. Some of the staff members have worked at the service for many years and we saw good relationships have developed between care staff and people. The warmth between staff and people using the service is clear to see and discussions with staff show they know the needs of people they support very well. We heard staff having natural conversations with people. Staff were observed to be attentive, and their attention was focused on ensuring people's needs were being met.

Systems are in place to keep the home clean, and the environment is maintained as part of a rolling programme which helps people to feel valued. The environment is dementia friendly with many interesting areas to stimulate people. Maintenance checks are in place to ensure the service is safe such as fire safety checks and all equipment is regularly serviced and maintained to ensure safety. The environment is homely, welcoming, and clean and the atmosphere within the service is calm and relaxed.

People are safe and protected from harm. Staff receive training in safeguarding and have access to the safeguarding policy. There is an open and transparent culture which encourages people to raise any safeguarding concerns if they had any, but all staff said they did not. The Older Peoples Commissioner for Wales 'Know your rights-living in care home in Wales' is on display and accessible in the main corridor. People who have been assessed as vulnerable have restrictions placed on them for their protection and in their best interest.

## Care and Support

People's needs and choices are thoroughly assessed before they move into the service and there is an accurate up-to-date plan of how their care and support will be provided.

Assessments of people's needs are detailed, person centred, and the process is streamlined from the first contact through to admission and beyond. Person centred plans involve the person, and their relative and regular reviews are completed to ensure plans are up to date and accurate. Risks to people are regularly assessed and there are detailed plans in place to help mitigate risks, this included risk associated with people's mobility, falls, nutrition, skin integrity and the management of other specific health conditions.

People are supported with their physical health needs. Staff receive training in pressure area care, medication and nutrition and diet. Personal plans contain information regarding assessments and monitoring of skin integrity, weight, and falls. Professional involvement from the GP, District Nurses, Social Workers, and chiropodists is in place. Medication is securely stored, and audits are carried out to make sure people's medication is administered safely.

Staff have an excellent understanding of the importance of respecting people's privacy and dignity, and it is clear this is an embedded culture across the service. We observed many positive interactions showing respect for people's privacy and dignity is at the heart of the services values. Staff place 'Do not disturb' signs on doors when attending to people's needs. There is a large board with 'What Dignity Means to us' in the main corridor. Residents, staff, and visitors have all contributed their thoughts on what dignity means to them and people. There are Dignity champions in the home.

People live a fulfilled life because the activities person, management and staff work particularly hard to get to know people. A variety of planned activities take into consideration people's needs which ensure people do things that matter to them, whether planned or spontaneous. Attention is paid to including every person in activities. A small example includes: - table games, giant snakes and ladders, pirate games, knitting, poetry, places of interest and arts and crafts. There is a 'Memory Lane' board on display where people have provided memories from when they were younger, these included playing a game 'X shines a light in the window' and what happened when they were caught, personal experiences of the war and there are many photos and copies of their memorabilia on display which gives an interesting read.

## Environment

People live in an interesting and suitable environment which promotes independence. Great efforts have been made to help people with orientation; the ground floor has wide corridors which have been named by the local people. The corridors reflect the town of Buckley namely Brick and Daisy Lane with appealing points of interest. A visiting booth used during the pandemic has been re-designed into a sweet shop where people can help themselves to pick and mix. Staff told us this is popular, and people thoroughly enjoy this. There is a bar in the conservatory, a hairdresser and nail bar where people enjoy visiting once a week when the local hairdresser visits. Careful thought has been given in selecting suitable soothing decor which has a warm and calming effect. There is evidence of a general refurbishment programme in place such as replacing the flooring in the kitchen and laundry room. People can arrange their rooms to their liking and have personalised their rooms to varying degrees with their own pictures, ornaments and memorabilia which helps people with their sense of orientation and belonging. There is a pleasant, enclosed garden with seating people can use. Communal areas are hazard free to ensure people's safety.

The service provider identifies and mitigates risks to health and safety. The building is secure, visitors are required to sign in and out and there are keypad door locks in areas where people are particularly vulnerable. Records show safety checks are routinely carried. There are regular fire drills and staff have received fire safety training. Each person has a personal emergency evacuation plan. The home had been awarded a score of 5 (very good) for safe food handling in 2022. The rare incidents of falls and other accidents are recorded, monitored, and evaluated to identify themes and manage risk effectively. All areas of the home are immaculately clean, tidy, and fresh. We observed daily cleaning being undertaken and domestic staff take great pride in their work in ensuring the home is hygienic and care staff can refer to infection management policies when necessary.

## Leadership and Management

Effective and robust governance systems support the provision of high-quality person-centred care. Government systems reflect best practise and are extremely proactive in identifying any potential shortfalls or areas of concern. The Responsible Individual produces reports about the home's performance following their three-monthly formal visits. Staff are motivated and proud to work in the service. All staff we spoke with told us the management team actively listens to them and involve them in making decisions in the home. The management team are clear of their roles and responsibilities and lead the service to have a person-centred ethos promoting positive outcomes for people. Systems to monitor and review the quality of the service provided includes asking people who receive support, their representatives and care staff for their views but a quality of care report is yet to be produced. The provider has invested in champion roles within the service who actively support staff, champions complete training to ensure better knowledge in areas such as tissue viability, oral health, and information and updates are shared with staff.

People are cared for by staff who are appreciated and supported in their individual roles. We found staff are committed and passionate in providing effective care and support and making a positive difference to people's lives. Staff told us they receive regular supervision and are able to express their views through meetings and a meaningful review of their performance every three months. Staff recruitment is robust as pre-employment checks include references and disclosure, and barring service (DBS) checks are completed before employment commences. The home has systems in place to ensure that DBS certificates are renewed every three years. There is a hand painted tree in the main entrance showing all the staff members which informing visitors and residents of their positions with a short statement about them.

Staff are motivated by the opportunities they have been given to develop their potential, they feel happy, with some staff having worked in the home for many years. On commencement of employment, new staff complete a comprehensive induction programme followed by a two-week shadowing period and competency checks are undertaken. We saw training certificates within staff files, which showed staff have completed mandatory and specialist training, such as safeguarding vulnerable adults, managing challenging behaviour, dementia.

### 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
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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