



Inspection Report on

Brightside Manor

**Brightside Manor
637 Newport Road
Rumney
Cardiff
CF3 4FB**

Date Inspection Completed

06/06/2024

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About Brightside Manor

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Avan Limited
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	02 nd May 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

People and their relatives are pleased with the standard of care provided at Brightside Manor. Care and support is person centred and delivered in a dignified, respectful way. There is a stable team of care workers who understand people's needs and routines. People's personal plans contain up to date information, highlighting people's outcomes and practical guidance regarding the delivery of care and support. Risks to people's health and safety are assessed and managed. People have good access to health and social care professionals to help maintain their overall well-being. Activities on offer promote social interaction and engagement with others.

Care workers are trained to meet the needs of people living in the home and are supported by the management. Care workers say they are happy working at the service and feel valued. There are systems in place to monitor the quality of care provided. The Responsible Individual (RI) visits regularly to maintain effective oversight of service provision. The environment is clean and comfortable. There is an on-going programme of maintenance and repair aimed to ensure the environment remains well-maintained and safe.

Well-being

People are supported to maintain their health and well-being. Care workers have positive relationships with people living at the service and have a good understanding of people's care and support needs. Care workers can recognise changes in people's presentation and take appropriate action. The service liaises with health professionals to report any concerns and follows any guidance given. Personal plans detail any interventions needed. Medication is administered in line with the prescriber's recommendations.

People are encouraged to have control over their day to day lives and are offered daily choices. Resident meetings and satisfaction surveys give people the opportunity to share their views on the service they receive. There is a range of activities available which people can choose to participate in. People can decide what time they get up in the morning and when they retire at night. People are offered a choice of nutritious food and there are a number of communal areas giving people options on where they spend their time.

There are measures helping to protect people from harm and abuse. Care workers receive safeguarding training and are familiar with the process for raising concerns. Policies and procedures support safe practice. Incidents and accidents are logged and reported to the relevant agencies when needed. Personal plans are kept up to date and detail safe ways of supporting people.

The environment is suited to people's needs and helps support their well-being. The home is well presented, clean and comfortable. Communal areas are welcoming and homely. We saw people in communal areas, they looked relaxed and comfortable. People told us they like living at the service. People's rooms are personalised with their own possessions. Bathroom and toilet facilities are equipped with specialist equipment. There is a dedicated maintenance person who is responsible for the day-to-day upkeep of the home. They perform regular environmental checks to ensure the home, its facilities and equipment are safe to use.

Care and Support

On the day of our inspection, we saw care workers interacting well with people, engaging them in meaningful conversations and providing appropriate care and support. It was clear care workers know the people they support well and are familiar with their needs, preferences, and routines. People we spoke to provided positive feedback regarding care workers. One person said, *"They are really lovely, I have no complaints. They cheer me up on a daily basis"*. Another person we spoke to told us, *"The carers are very good, I get on with all of them"*. We also received complimentary feedback from relatives of people living at the home. One commented, *"Mum has flourished since moving into Brightside, they look after her very well. There is a high level of lovely care provided"*. Other relatives we spoke to used words like *"very accommodating"*, *"really nice"* and *"fabulous"* to describe care workers and the service provided.

People's care and support needs are set out in their personal plans. Personal plans are created in conjunction with people and their representatives. This ensures people receive care and support specifically tailored to them. Personal plans contain practical information guiding care workers on the best ways of providing care and support. They also contain risk assessments which help mitigate risks to people's health and safety. Care workers complete daily recordings documenting care and support provided as well as other information such as people's presentation. Personal plans are reviewed on a monthly basis to ensure information recorded remains relevant. Three monthly reviews are also held where people and their representatives are consulted on the overall service provision and the care and support they receive.

People are supported to maintain their health and well-being. A pre-admission assessment is completed by the manager before people are admitted to the home. This assessment considers people's medical conditions. Plans detailing how medical conditions are managed are then developed. Records show people have good access to health and social care professionals when needed. People's medical correspondence is kept on file and there are written notes detailing appointments and advice given by medical professionals. Support is available for people with medication needs. People have plans detailing their medication regimes. We looked at the services electronic medication administration recording system and found people receive their medication as prescribed. Activities are on offer to keep people engaged. On the day of our inspection we saw a group of people participating in a quiz. Food choices are varied and people with special dietary requirements are catered for. People commented positively regarding food choices, one person said, *"The food is excellent, there's plenty of choice and it's really tasty"*.

Environment

The environment is homely, clean and comfortable. We saw there is on-going investment in the fabric of the home to ensure it provides a comfortable living space people can enjoy. There are a number of communal areas including a main lounge / diner, a dedicated activity's room and a number of smaller rooms with things such as entertainment equipment available. People can choose to access communal areas to spend time in the company of others or remain in their own room should they wish to have some privacy. People can personalise their room to their preference with their own belongings, which helps people to feel at home. There is a garden people can access if they choose which has a summer house and seating available. Bathrooms and toilet facilities are equipped with specialist equipment for those who require it and there is a lift providing access to all floors for people with mobility problems. The kitchen has been awarded a score of five by the Food Standards Agency which is the highest possible score and suggests standards of cleanliness and hygiene are very good. Domestic workers follow cleaning schedules to ensure the home is kept clean and tidy. Laundry facilities are suitable for the size of the home and there are systems in place to reduce the risks of cross contamination.

Routine testing and servicing of equipment, utilities and facilities ensures the environment is safe. Maintenance records confirm utilities such as gas, electricity and water are regularly tested. Specialist equipment such as hoists are serviced in line with the manufacturer's recommendations. Fire safety features are regularly inspected by qualified trade's people. A fire risk assessment was recently completed, and we saw there was an action plan in place to resolve areas of concern highlighted in the risk assessment. All people living at the home have a personal emergency evacuation plan (PEEP) in place which provides information on the best ways of supporting people during an emergency where they need to exit the building. Substances hazardous to health are safely stored. We did not identify any obvious hazards when we completed a visual inspection of the premises. The home is secure from unauthorised access, all visitors have to sign in on arrival and sign out when they leave.

Leadership and Management

Care workers are recruited in line with regulation to ensure they are suitable to work with vulnerable people. Checks including Disclosure and Barring Service (DBS), previous employment and reference checks are completed. New employees complete an induction on commencement of employment and get to shadow experienced members of the team. Following this care workers register with Social Care Wales (the workforce regulator). This is done to ensure care workers possess the skills and qualifications required for working in the care sector.

Care workers feel supported in their roles and are trained to meet the needs of the people they support. Care workers we spoke to used words like *“supportive”*, *“very good”* and *“approachable”* to describe the manager. They said, *“morale is good, everyone gets along”*, and *“we are like a family, we all work together”*. We looked at records relating to formal support and found care workers receive supervision every three months along with an annual appraisal. This is important as it gives care workers the opportunity to discuss their development and work-related matters with the manager. The service provides care workers with a rolling programme of training and development. All care workers complete the service’s core training which is relevant to the needs of people living at the home. Specialist training is also provided when needed. We looked at records relating to staff development and found care workers are up to date with the services training requirements.

The manager oversees the day to day running of the home and is supported by a deputy manager. A range of governance and quality assurance measures help the service operate smoothly. Staffing levels are determined by people’s needs. The manager uses a dependency tool to identify staffing requirements. Care workers we spoke to said staffing levels are sufficient. We looked at the rota and found target staffing levels are being met. The RI visits the service regularly and has clear oversight of service provision. Every six months a quality-of-care review is conducted. Following this a report is published which evaluates the services performance and provides analysis of matters such as complaints and incidents and accidents. Policies and procedures help underpin safe practice. We looked at a cross section of the services policies and procedures and found they are kept under review and updated when necessary. They provide staff with useful information, for example, on how to raise a safeguarding concern. We spoke to the management team about making some minor adjustments to the medication policy in order for it to be more aligned with best practice guidance. They assured us this would be done. Other written information we looked at included the statement of purpose and user guide which provide accurate information in relation to the service provided.

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
8	To ensure regular auditing of information to assess the quality of care and identify any patterns/trends to act accordingly	Achieved
57	The current window restrictors to be replaced in accordance with the current Health and Safety Guidance	Achieved

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