



Inspection Report on

Breaksea Care Home

**Breaksea Residential Home
The Square
Porthcawl
CF36 3BW**

Date Inspection Completed

27/06/2024

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About Breaksea Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	breaksea residential homes ltd
Registered places	32
Language of the service	English
Previous Care Inspectorate Wales inspection	08 August 2023
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 receive good care and support from a small and consistent staff team who know them very well. Personal plans and risk assessments are completed and reviewed monthly, and updated when people's needs change. People have warm and friendly interactions with care staff, and their visitors are welcomed into the home. Improvements have been made to the environment and general engagement of people in activities and games. Meals are varied, appetising and kitchen staff respond to people's dietary needs and preferences. Staff report feeling happy and well supported in their roles. Mandatory training is kept up to date both online and face to face. Domestic and laundry schedules maintain hygiene and infection control. The RI visits the home often and has oversight of the day to day events. The information they gather should be used as part of the required biannual quality of care reports.

Well-being

People are treated with dignity and respect by a warm and friendly team of care staff. We saw positive interactions between people and care staff during our visit. People's relatives and visitors were made welcome. Kitchen staff are knowledgeable about people's dietary requirements, offer a choice of meals, and the service has a food hygiene rating of five, which is 'very good'. One person told us they had "*lovely food, as always*". Equipment is in place to aid people in getting help quickly if they need it, such as sensor mats and call bells in people's bedrooms.

People can choose where and how to spend their day. People have access to two communal lounge areas as well as the privacy of their own bedrooms. Specialist equipment and mobility aids are available for those who require them. We observed people in communal areas, they appeared relaxed and comfortable which suggests they are happy with their surroundings. A new activities co-ordinator has been employed and works daily at the service doing gardening, craft and group activities with people who wish to participate. They are inclusive and encouraging, and we saw people responding positively to the interaction and engagement with others. Arrangements are in place to ensure the environment is clean and well maintained. We found communal areas are always supervised by care staff.

People are protected from harm and neglect. Care staff have undertaken safeguarding training and there is a policy detailing relevant safeguarding guidance and procedures. Care staff are aware of the process for raising concerns. Concerns and safeguarding matters are dealt with by the manager. Care staff are subject to a thorough recruitment process to ensure they are suitable to work with vulnerable people. Staff receive regular supervision to support good practice.

Care and Support

People receive a good standard of care and support at Breaksea Care Home. There is a small staff team, who work well together and have good knowledge of the people they support, their needs and their preferences. People and their relatives gave us good feedback about the home: *“I’m always thankful for them [care staff] helping me”, “it’s a lovely place here”, “any questions we have we go to [manager], they always sort them out for us”*.

Care plans, risk assessments, and other relevant documents contain all the information required for staff to ensure each person gets the right care at the right time. Plans are reviewed regularly, however could give more detail on relevant events that may have occurred in between reviews. Updated plans are written whenever there is a change in care needs. Risk assessments identify people’s vulnerabilities and the intervention required by care staff to minimise risk. Supplementary charts and daily records are completed throughout the day to monitor aspects of people’s daily care. Handover books and appointment diaries are used along with verbal handovers to ensure all care staff are up to date and able to continue with certain tasks over subsequent shifts.

People have access to the necessary health and social care services to maintain their health and wellbeing. Care staff know the people they support well. They can recognise changes in people’s presentation and report to the relevant professional for advice or support. Personal plans contain documented evidence of appointments with professionals such as GPs and district nurses, as well as specialist consultation such as dietician or speech and language therapist. Medication is stored securely and appropriately and is administered safely as prescribed. Senior care staff are in charge of medication practice, have training refreshers and routine competency observations.

Environment

The environment supports people to achieve their personal outcomes. The accommodation appears homely, comfortable and benefits from recent changes to the décor and a new jacuzzi bath. Items which were being stored inappropriately at the last inspection have been removed and reorganised. The hairdresser continues to work from one end of the lounge for socialisation for residents, but care staff advise they use a different entrance with people to have easier access to the room. The new activities coordinator is working on the garden, encouraging residents to spend more time outside. People's rooms are personalised and contain their belongings.

There is an ongoing programme of maintenance, repair and checks in place to ensure the environment is safe. Was saw up to date safety certification for fire safety features and utilities such as gas and electricity. People have personal emergency evacuation plans in place. Substances hazardous to health are securely stored. Areas that contain hazards or confidential information are locked to prevent unauthorised access. Visitors are greeted at the door and signed in and out.

Leadership and Management

People are supported by care staff who receive appropriate training and support to meet people's needs. The service is compliant with its training requirements. New care workers receive an induction and shadow shifts before starting in their role. Care staff we spoke to are very positive about the leadership shown by the management team and the support they receive from them. They told us: *"the staffing levels are good here at the moment, we all get on well, everyone is supportive of each other", "[manager] is very caring, she takes all our questions and makes us feel like we're being listened to", "we have lots of training, and we can do our QCF (vocational qualification) to move up in our job"*. Supervisions are held regularly, and the manager operates an open door policy in between formal meetings with staff. There are up to date policies and procedures in safeguarding, whistleblowing, infection control and medication, should staff need additional guidance.

Staff are safely recruited and vetted, working with required security (DBS) checks and registration with the workforce regulator (Social Care Wales). The home is well managed, by an experienced manager and deputy. The manager appropriately notifies relevant regulatory bodies and statutory agencies, when there are concerns and significant events, which might affect the well-being of individual's receiving care. We found the communication is effective, open and transparent. The Responsible Individual (RI) visits the home frequently and communication between them and the manager is good. Recordings are kept of formal quarterly monitoring visits, but these should be used to inform the biannual 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
44	Some environmental hazards created from inappropriate storage of items and use of communal space.	Achieved

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