



## Inspection Report on

**Bryn Eithin Residential Care Ltd**

**30 Llanrwst Road  
Colwyn Bay  
LL29 7YU**

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

**This report is also available in Welsh**

**Date Inspection Completed**

**9 April 2024.**

09/04/2024

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## About Bryn Eithin Residential Care Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Bryn Eithin Residential Care Ltd
Registered places	25
Language of the service	Both
Previous Care Inspectorate Wales inspection	10/02/2022
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 warm and compassionate care and support from a committed staff team. They receive planned care in a timely way to remain as healthy as possible. The home presents as warm, clean, and tidy and has a pleasant atmosphere. The home is well maintained, and people benefit from an ongoing improvement schedule. The manager is visible, and staff feel well supported and listened to. The responsible individual (RI) meets regulatory requirements by visiting the home on a regular basis, measuring the quality of care given to people and ensuring the environment encourages positive outcomes for them.

## Well-being

People's rights are protected in the home as they have a voice and daily choices. Care staff are updated about safeguarding and Deprivation of Liberty Safeguards (DoLS), training to ensure people are cared for safely. We saw people have choices regarding meals and what they want to do with their day. A person told us they can have conversations in their first language, Welsh, as there are care staff on the team who are able to converse with them. The manager told us the service actively tries to recruit Welsh speaking staff. We witnessed staff speaking with people in a friendly, respectful manner. We saw examples of good rapport between people and staff and heard laughter and music playing in the home. Communication between the staff is good and people's personal choices as recorded in their plan of care, are respected. There are quiet areas for people to reflect, as well as areas for people to socialise if they wish to. We noticed a person reading a book in a quiet area of the home, and another enjoying doing a jigsaw. People told us they enjoy organised entertainment in the home and appreciate the hairdressing offered once a week. People told us they are very happy living in the home and are well cared for. We read several thank-you cards from families on notice boards dotted throughout the home thanking staff for their considerate care.

People have a choice of meals and where they would like to eat them. The dining room has a light aspect and view, tables are nicely set with cloths, flowers, and cutlery. People told us they enjoy the food and can choose an alternative if they do not like the meal on offer. Menus are varied and are changed seasonally. People can access snacks and drinks as they need them. We noted the cook has won an award for vegetarian meals and special diets can be catered for. We saw fresh ingredients are delivered to the home regularly and that they are carefully stored.

## Care and Support

People receive good care and support from a motivated staff team. People are assessed prior to moving into the home to ensure the service can meet their needs. We saw an example of a person obtaining an advocate to maintain their rights. Care staff and the manager are aware of safeguarding requirements and local protocols to ensure safe care for people. People's needs are central to their plan of care. The "This is Me" document is used to good effect to record people's preferences and routines. The manager and care staff demonstrated they know people in their care, and their families well and have good, open communication with them. Health care visits and appointments are carefully managed, and outcomes and instructions are documented. People can access health care advice in a timely manner. People can access GP reviews, dental services, ophthalmology, chiropody, and other professional reviews to support them to be as healthy as possible. Falls and accidents are reported appropriately, and risk assessments are put in place to try and mitigate further risks. We saw personal care plans and risk assessments are reviewed regularly and as people's condition changes. Information is held securely in a locked cupboard to ensure confidentiality is maintained.

We observed medication administration and storage are good in the home. There were no signature gaps seen on people's medication administration records (MAR). The manager conducts a monthly audit of the MAR charts and reviews storage and ordering practices. Results are shared with care staff in the monthly staff meeting to encourage good practice. Medications are kept securely, and unused medications are disposed of appropriately. A good audit trail is kept of medicines going in and out of the home. Care staff receive medication training and updates, and their competency is assessed. The manager said they have good support and training from the local chemist, and they can obtain prescriptions for people in a timely manner.

## Environment

People are cared for in a well maintained, pleasant environment. Rooms are cleaned and redecorated prior to a new person moving into the home. People can personalise their rooms with objects of importance helping them feel at home. The rooms are airy and spacious and are clean and tidy. Bathrooms and toilets are hygienic and modern, we saw a new bath with temperature controls and a hoist have been fitted in one bathroom. The facilities are as described in the Statement of Purpose (SoP) document for the home and are compliant to the Regulations. The kitchen has a hygiene rating of 5 which is the highest rate possible. There are large gardens for people to walk around and sit out in. The garden paths and seated areas are wheel-chair friendly. The gardens are well maintained and a new sun-house with decking is being constructed for people to enjoy.

People can access equipment needed for their care which is well maintained and serviced. Health and safety assessments and records for the home are frequently assessed and updated for people's safe care and environment. Utility checks such as water, gas and electricity are frequently reviewed and safety certificates were presented at our request. Fire checks are regularly performed and recorded, recommendations from the fire service are acted upon in a timely way. Indemnity insurance for the service is within date. The hygiene and infection control practices are good, and staff have access to personal protective equipment (PPE).

## Leadership and Management

The SoP adequately describes the service people receive. Care staff can access policies and procedures, which are updated and give guidance to the staff in their role. The RI visits the home regularly speaking to people and staff whilst also monitoring the environment to ensure there are no issues and standards are maintained. A quality report is produced documenting the findings as per the regulatory requirements. The manager told us they are well supported by the RI and can access training to support them in their role. There is a complaints policy and procedure in place should people need them. Staff have access to a whistleblowing policy if required. We observed continuing investment is made to the environment and staffing to ensure good living and care standards for people.

Care staff told us the manager is very supportive and approachable. Members of staff spoken with said they love working in the home and receive good supervision and training. Staff told us standards of care are very good and they would be happy for a family member to be cared for in Bryn Eithin. The ongoing training programme ensures staff have updated skills needed for their role. Staff supervision is also ongoing to support staff and ensure they have good practice. Staff records demonstrate good recruitment practices with relevant employment checks in place to ensure staff are appropriate to care for vulnerable adults.

### 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
N/A	No non-compliance of this type was identified at this inspection	N/A
58	Care staff must receive an annual competency assessment of their knowledge, skills and competencies relating to managing and administering medicines.	Achieved
36	All staff must have an annual appraisal which provides feedback on their performance and identifies areas for training and development in order to support them in their role.	Achieved

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