

## **Care and Social Services Inspectorate Wales**

Care Standards Act 2000

# **Inspection Report**

**Bryn y Wawr Care Home** 

6 New Road Llandeilo Carmarthen SA19 6DB

Type of Inspection – Baseline
Date(s) of inspection – Friday, 17 June 2016
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### **Summary**

#### About the service

Bryn Y Wawr Care Home is registered with Care and Social Services Inspectorate Wales (CSSIW) to provide personal care and accommodation for up to ten younger persons (aged18-64) with learning disabilities. CSSIW recently agreed to a variation in the conditions of registration, to enable one person over the age of 65 years with a learning disability to be accommodated (within the 10 places). There were ten people living in the home at the time of the inspection. CSSIW registration certificates dated 18<sup>th</sup> June 2015, were displayed in the entrance hall in the home.

The home is situated in a residential area within walking distance of the town centre of Llandeilo, with all its amenities.

The registered provider is Oakview Care (Llandeilo) Ltd. The registered manager for the home is Isobel Roberts, who has day to day responsibility for the management of the home.

### What type of inspection was carried out?

We (CSSIW) carried out a scheduled unannounced baseline inspection to determine if the service is acceptable and whether the conditions of registration are appropriate.

The following methodologies were used:

- Examination of Information relating to the home held by CSSIW
- One inspection visit
- Discussion with and observation of people living in the home and staff present during the inspection
- A tour of the home to look at the quality of the environment
- Examination of the records of two people living in the home
- Examination of the recruitment files of two members of staff
- Examination of documents relevant to the inspection.

#### What does the service do well?

The service provides person centred care in a relaxed, homely environment, by staff who are enthusiastic and motivated in supporting people to make the most of their lives.

#### What has improved since the last inspection?

We were informed by the registered manager that the good practice recommendations identified during the previous inspection had been addressed. This was evidenced in the records examined.

#### What needs to be done to improve the service?

There were no non-compliance issues identified during this inspection.

# **Quality Of Life**

Overall people benefit from a service which supports people to live their lives to the full, supported by an enthusiastic, well-motivated staff team.

People living in the home, relatives/representatives can be confident that the service is able to meet their needs as people have a pre-admission assessment and ongoing review, to ensure that their short and long term needs can continue to be met by staff and the facilities in the home.

People can be confident that they are supported to exercise their rights, are regarded as individuals and are treated with dignity and respect by staff, which was evidenced throughout our inspection. We met with all the people living in the home; all are female and supported by an all-female staff team, with the only male employee being the person who undertakes the maintenance of the home. We were introduced to him as he was painting the entrance hall when we arrived. Observation of people living in the home identified that they had a good relationship with him as there was much good humour between them. We were introduced to most of the people living in the home, with several people spending time sitting and talking to us as we toured the building. Several people spoken with said that they had lived in the home for a considerable number of years and looked on it as their home for life. People commented positively on the support they receive from staff to maintain their life skills. Some people access the community independently, with others needing the support of staff.

People were seen to have choice in how they spend their time. People moved freely around the main building and 'cottage', (an annexe to the main building). We spoke with one person sitting in one of the lounges who was using their smart phone to listen to music, with the television on quietly in the background. We met with another person who was washing dishes and preparing the kitchen for lunch. They showed us the kitchen rota which identified which person was responsible for the kitchen on a daily basis, and the weekly menu planner, which identified what people, would be having to eat that day. We observed good interactions between people and staff present during the inspection. There was much warmth and good humour between staff and people living in the home. Through observation and discussion, it was obvious that staff know the people they support well, understood their likes and dislikes, and are able to anticipate their needs. Discussion with people living in the home and staff, identified that people are encouraged and well supported to maintain active independent lives within the community, such as voluntary work, day trips, holidays. We saw a notice of forthcoming events provided by 'People First', an organisation which supports people with a learning disability to' live the life they choose'.

People can be confident that their health and well-being is considered, as discussion with the registered manager and evidence seen, confirmed that people are supported to maintain good health through routine health screening/appointments. We examined the records of two people living in the home. There were detailed person centred care plans and risk assessments, which were reviewed six monthly or as change occurred. We saw evidence of the involvement of people in their care planning and reviews. Daily records/reports were informative. There was evidence of annual reviews by the responsible commissioning authority.

# **Quality Of Staffing**

Overall people living in the home can feel confident about the care they receive, as discussion with the registered manager and staff present during the inspection, identified that there is a stable staff team who are knowledgeable and confident in their roles.

There were sufficient staff in the home during the inspection to meet the needs of the people present that day. We were informed that agency staff, were no longer used as there are sufficient staff employed to cover all shifts. Where staff shortages occur they are covered by the staff team, which allows for continuity of care. We were escorted on a tour of the home by one of the support workers, who was very knowledgeable about the people living in the home and the organisation. Staff, spoken with were relaxed in our presence and were confident in their manner. There was a good rapport between the registered manager, deputy manager and staff present during the inspection. Staff, were seen interacting confidently and positively with people living in the home.

People can be assured that their wellbeing is promoted and protected as the registered persons ensure that all staff receive mandatory training (essential training such as health and safety, fire safety, food hygiene etc.) and updating to enable them to provide safe and effective care. We saw the training matrix/plan for 2015/2016 which was up to date and identified dates for future training, such as positive behavioural management (PBM). Specific training for staff to understand and manage conditions such as epilepsy, diabetes, autism and Asperger's' syndrome had been undertaken. The majority of staff had achieved a qualification in care, recognised by the Community Care Council for Wales.

We were informed by the registered manager that staff, have supervision every two months. We saw evidence of this in the records of the two people whose recruitment files we examined. The supervision records were detailed and informative and identified training needs and how those needs were to be met, issues and how they were to be addressed. We saw evidence of regular staff meetings where staff, were able to discuss any issues.

People living in the home are protected by the homes recruitment policies. This was demonstrated in the two staff records/files examined. The records/files contained all but one of the documents required to ensure that a robust recruitment process is in place. Copies of birth certificates were not on the files. The registered manager said that she would address this immediately, as it was a misunderstanding on her part of the requirements of Regulation 19, (Fitness of Workers) and 17(Records) and the related Schedule 2 & 4, of the Care Homes (Wales) Regulations 2002, which she would address immediately by auditing all staff files to ensure that copies of birth certificates are on all files.

# **Quality Of Leadership and Management**

People living in the home, their relatives/representatives and staff can be confident about what the service provides, as there was a statement of purpose and information guide for people living in the home. We saw the Annual Quality of Care Report dated June 2015, which we were informed was in the process of being completed for 2016 and would be available for people living in the home, their representatives and other interested parties to view, within the next few weeks.

We were able to discuss any findings during the inspection with the registered manager as they were present throughout the inspection. The deputy manager spent some time speaking with us during the inspection. They spoke highly of the support provided by the registered manager.

People can be assured that the registered persons make every effort to improve the service offered, through quality assurance processes such as the Regulation 27 visits, (the registered provider or their representative, must visit the home at least once every three months to undertake discussions with people, their representatives and staff, inspect the premises and compile a report, which must be available in the home for interested parties to view). We saw reports of the visits. The last visit had taken place in April 2016. The report was detailed and provided information about people living in the home, staff spoken with, the environment, documentation etc. There was an action plan to address issues identified.

People can be confident that they are safe because the company ensures that the environment is continuously maintained and refurbished, and that the heating system, electrics, appliances, water testing, fire safety system, are regularly serviced. We saw evidence of this. The public liability insurance certificate was displayed and is current until June 2017.

CSSIW registration certificates dated 18<sup>th</sup> June 2015, were displayed in the entrance hall in the home. CSSIW had issued a Notice of Decision (dated 23<sup>rd</sup> May 2016) to grant an application to vary the conditions of registration to allow one person (up to I place within the 10), with a learning disability, over the age of sixty five to be accommodated in the home.

We were informed by the registered manager that there were no complaints recorded since the previous inspection. We did not examine the complaints record during this inspection as CSSIW had not been contacted regarding any concerns.

# **Quality Of The Environment**

People can be assured that the registered persons make every effort to ensure that they live in a comfortable, homely environment. All areas of the home visited were comfortably and appropriately furnished and decorated, warm, clean, light and airy. We were informed that there was a continuous programme of refurbishment and redecoration.

The home, a large detached house, sits in extensive grounds, with two outbuildings, one used for arts and crafts and one as a gymnasium. The home is subdivided into the main house with seven single bedrooms, three with en-suite facilities, and three bedrooms in the 'cottage', which is linked to the main house. Within the 'cottage' there is a one bedroom flat with en suite facilities, which enables the occupant to have a more independent living arrangement. There are sufficient communal bathrooms/shower rooms/toilets throughout the home, and spacious lounge and dining facilities.

We visited several bedrooms either accompanied by the occupant or with permission from others. We visited the 'flat' with the occupant, who was very proud of their home. They had direct access from their flat to the gardens where they informed us they grow salads and vegetables. Bedrooms seen were individually decorated and furnished to meet the needs and personality of the occupant.

We visited the laundry which was cluttered. The laundry provided adequate facilities to manage soiled laundry, with colour coded bags/baskets for each person to ensure that personal laundry is separately washed and dried. There were hand washing facilities, disposable towels, gloves and aprons for staff to use. The COSHH( Control of Substances Hazardous to Health) cupboard was situated in the laundry. The doors were secured with a lock, however the doors required a more robust mechanism to ensure the doors were fixed closed, and then locked. This was immediately attended to by the maintenance person. The registered manager said that they would ensure that the laundry is free from clutter.

The large kitchen was clean and well ordered. The Environmental Health Agency visited the home in December 2015. The home achieved a food hygiene rating of 5 following the environmental health inspection. The highest rating awarded for kitchen and hygiene practices.

People can be assured that their safety is considered as anyone entering or leaving the home can be observed, as the registered manager's office and communal areas are close to the main entrance. The home has an open door policy with doors locked at dusk. The visitor's book is situated at the main entrance and all visitors are asked to sign in and out of the home.

### How we inspect and report on services

We conduct two types of inspection; baseline and focused. Both consider the experience of people using services.

Baseline inspections assess whether the registration of a service is justified and
whether the conditions of registration are appropriate. For most services, we carry out
these inspections every three years. Exceptions are registered child minders, out of
school care, sessional care, crèches and open access provision, which are every four
years.

At these inspections we check whether the service has a clear, effective Statement of Purpose and whether the service delivers on the commitments set out in its Statement of Purpose. In assessing whether registration is justified inspectors check that the service can demonstrate a history of compliance with regulations.

Focused inspections consider the experience of people using services and we will look
at compliance with regulations when poor outcomes for people using services are
identified. We carry out these inspections in between baseline inspections. Focused
inspections will always consider the quality of life of people using services and may look
at other areas.

Baseline and focused inspections may be scheduled or carried out in response to concerns.

Inspectors use a variety of methods to gather information during inspections. These may include;

- Talking with people who use services and their representatives
- Talking to staff and the manager
- Looking at documentation
- Observation of staff interactions with people and of the environment
- Comments made within questionnaires returned from people who use services, staff and health and social care professionals

We inspect and report our findings under 'Quality Themes'. Those relevant to each type of service are referred to within our inspection reports.

Further information about what we do can be found in our leaflet 'Improving Care and Social Services in Wales'. You can download this from our website, <a href="Improving Care and Social Services in Wales">Improving Care and Social Services in Wales</a> or ask us to send you a copy by telephoning your local CSSIW regional office.