



Inspection Report on

Bryn Celyn Care Home

**Maesteg Park
Maesteg
Cardiff
CF34 9LR**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

09/06/2023

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About Bryn Celyn Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Amaya Care Homes (Maesteg) Limited
Registered places	56
Language of the service	English
Previous Care Inspectorate Wales inspection	15.12.2021
Does this service provide the Welsh Language active offer?	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

People lead happy, healthy, and fulfilling lives at Bryn Celyn. A calm atmosphere throughout the home helps people and visitors feel at ease. The enthusiastic and professional staff team make a positive difference to people's lives: nurses and care workers demonstrate a thorough knowledge of the people they support. People are supported to make daily choices and participate in a variety of activities they enjoy. They are also very happy with the meals served at the home. People benefit from detailed and current personal plans, which are reviewed regularly. Nurses and care workers provide care and support in a dignified and respectful manner. There are adequate numbers of staff to ensure people receive care and support when they need it. The service is exceptionally well-run and well-managed. There is a strong sense of teamwork amongst staff, who are led by a pro-active, well-respected manager. The manager has excellent oversight goes the extra mile to support people using the service. Policies and procedures are in place to help protect people from harm or abuse. There is highly effective governance in place and an enthusiasm from the team to provide a good service. All staff are recruited following robust recruitment checks, receive regular supervision and training, and feel happy and supported in their work.

Well-being

People can contribute to and enjoy, safe and healthy relationships. Interactions between staff and people are warm, friendly and familiar. It is clear that people feel safe and happy at Bryn Celyn and feedback is positive. People can easily maintain contact with loved ones who can visit when they wish. Staff consider people's communication and language needs, and the service is working towards the Welsh Active Offer.

Care documentation within the service is informative, effective and up to date. Care plans are person centred, consistently detailed and clear to follow. Audits undertaken by management support close oversight of documentation. Care workers have a good knowledge of people and are therefore able to notice any changes quickly and respond promptly. People remain as healthy as they can be due to timely referrals to healthcare professionals and effective administration of medication. Healthy and nutritious meals consider people's dietary needs. People living in the home and their relatives tell us they are very happy with the care provided at Bryn Celyn.

There are measures in place to keep people safe. Nurses and care workers are aware of their safeguarding responsibilities and are trained to keep people safe. Care workers are recruited in line with regulation and are subject to pre-employment checks to ensure their suitability for the role. Policies and procedures promote safe practice. Recruitment is robust, and regular supervision supports continued development. Incidents and accidents are logged, and appropriate actions taken by the service. Ongoing quality assurance audits ensure systems remain effective and improvements are identified and addressed.

There is a clear management structure for the service. We received positive feedback from the staff we spoke with, who told us they feel valued and extremely well supported by the innovative manager. There are highly effective systems for monitoring and auditing standards of support and the environment. There is a statement of purpose, a document which sets out information about the service provided. It describes the home's vision, values and ethos.

People live in accommodation which supports and encourages their well-being. Their rooms contain personalised items of their choice, suitable furnishings, and enables them to have private time if they wish. There are plans in place for ongoing refurbishment work and relevant health and safety checks are completed.

Care and Support

People benefit from a good standard of care and support. A person-centred approach to care planning ensures people are central to the care and support they receive. Personal plans are developed in conjunction with individuals or their representative. They identify people's care and support needs and provide care workers with clear instructions regarding care delivery. Robust risk assessments and management plans identify people's vulnerabilities and give care workers guidance on interventions that will keep people safe. A visiting health professional told us they have no concerns, referrals are timely, and any advice given is followed. They also told us "*They are compassionate about providing the best care for their residents*".

An experienced team of care workers deliver care and support. There are consistent and appropriate staffing levels in place to meet the care and support needs of people living at the service. Staff turnover at the service is low which provides good continuity of care. We observed positive interactions between nurses, care workers and people living at the service. We saw people being treated with warmth and kindness. People are supported to do the things that are important to them. Individuals living in the home told us "*This is the best place to go*", "*Staff are lovely, they do whatever you want*" and "*Coming here is the best thing I did*". Relatives told us "*She seems as happy as she can be*" and "*She gets on well with the girls*".

The service takes all reasonable steps to identify and prevent the possibility of abuse. Staff recognise their personal responsibilities in keeping people safe and told us they would report any issues of concern. They are aware of the whistleblowing procedure, and say they feel confident approaching management if they needed to. Care workers also tell us they have undertaken training in safeguarding and there is a current safeguarding policy for all staff to access and follow. The people we spoke with told us they feel safe living at the Bryn Celyn.

There are systems in place for the management of medication. Medication is stored securely and can only be accessed by authorised care and nursing staff. Records show staff administer medication in line with the prescriber's directions and are free from gaps or errors. Nursing and care staff receive training in how to manage and administer medication. The home has an up-to-date medication policy in place. Medication is audited regularly, with additional external auditing also carried out by a local pharmacy.

Environment

The environment supports people to achieve their well-being. The service is set over two floors. The upper floor houses the nursing community with people who require residential care occupying the ground floor. In total the home can provide accommodation for up to 56 people. We saw people's bedrooms are personalised with items of personal choice. People we spoke with told us they are very happy with their rooms. One person told us "*Fair play, they clean it every day*". All bedrooms have en-suite bathroom facilities, with toilets and sinks. There are also several communal bath and shower rooms throughout the home which are equipped with specialist equipment for those who need it. The layout of the home promotes accessibility and independence; people can move freely within the area they live. There are a number of communal areas which are clean, appropriately furnished and decorated.

We saw evidence of an extensive rolling programme of maintenance, checks and servicing in place to ensure the home, its facilities, and equipment are safe. We saw appropriate checks and safety certification in place for utilities, equipment, and fire safety features. Each individual living at the service has a personal emergency evacuation plan (PEEP) in place. This document ensures care staff understand the level of support people require in the event of an emergency. The laundry facilities are suitable to meet the needs of people living in the home. Substances hazardous to health are stored safely and communal areas are uncluttered and free from hazards. The kitchen is inspected by the Food Standards Agency and currently holds a rating of 5 (very good).

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front doorbell before gaining entry and record their visits in the visitor's book when entering and leaving. People's personal care records are stored securely and only available to appropriate staff and healthcare professionals authorised to view them.

Leadership and Management

The service has a very strong vision and ethos which is driven by the management team. Its aims, values, and delivery of support are set out in the Statement of Purpose in a transparent way. A written guide is available for people in the service, containing practical information about the home, and the support provided. The service also offers an excellent variety of formal and informal opportunities for people and their representatives, to ask questions and give feedback.

Nurses and care workers feel happy in their role. They told us *“I love it”, “I like working here”* and *“I love it, it’s homely”*. Turnover of staff is low, with some having worked for the service for many years, thus providing continuity of care for people. Care staff have regular supervision and yearly appraisals which effectively reflect on their performance, identify support they might require, and discuss any issues. The rota showed identified staffing levels are achieved and was reflective of staffing on the day. Staff say they feel valued, supported and that teamwork at the home is outstanding. They also told us that they can talk to management, who are all extremely approachable. The manager has an extremely visible presence and involves herself in hands on care. Speaking about the manager, one staff member told us *“She’s been great, really approachable”*.

People are supported by a dedicated nursing and care team who are recruited safely and trained to undertake their roles. The records we examined show that the provider carries out the necessary checks when recruiting staff. Enhanced staff recruitment checks are up to date. Staff receive training relevant to their roles and this includes infection control and safeguarding training. We saw that there are robust company policies and procedures for staff to follow. Thorough policies and procedures, such as for complaints, infection control, medication, and safeguarding, are in place which give guidance to care staff, for example telling them what to do if they thought someone was at risk of harm. Nurse pins are valid which evidences their suitability for practice and care workers are registered with Social Care Wales. All staff have a valid disclosure and barring service check (DBS).

The service is exceptionally well-run and well-managed. Robust governance, auditing and quality assurance arrangements are in place to support the efficient running of the service. These valuable systems help the service self-evaluate and identify where improvements are required. We saw evidence of the service taking robust action to address any issues. We saw evidence of the RI undertaking the legally required three-monthly service visits and six-monthly quality of care reviews.

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
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