



Inspection Report on

Ael-y-Bryn

**Ael Y Bryn
160 Llanllienwen Road Cwmrhydyceirw
Swansea
SA6 6LT**

Date Inspection Completed

30/08/2023

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About Ael-y-Bryn

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Ael-y-Bryn Ltd
Registered places	30
Language of the service	English
Previous Care Inspectorate Wales inspection	16th June 2022
Does this service promote Welsh language and culture?	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 living in Ael y Bryn Residential Care Home are well supported and cared for, happy and settled. People spoken with gave positive feedback about the care and support provided. A relative we spoke with praised the care and support provided. Care staff told us they receive a good level of consistent formal and informal support from the manager and the responsible individual (RI). Care and support planning processes are detailed but risk plans would benefit from more specific information regarding actual care provided and needed. Also, personal reviews need strengthening to ensure people's views regarding their care are captured, in addition to any contributions from appropriate others. Since the last inspection the provider has invested in extensive updates to the external and internal environment. The service is safe, clean, well maintained and presented throughout. There are robust and thorough staff recruitment and employment checks. There is good oversight of quality by the RI and manager of the service. Policies and procedures including the Statement of Purpose (SoP) are detailed, thorough, and regularly reviewed.

Well-being

People are treated with dignity, respect and receive a good standard of care and support at Ael y Bryn Residential Care Home. We observed care workers supporting people in a friendly manner with positive, caring, and supportive interactions. Care workers told us they receive a good level of formal and informal support from managers. Support files seen, indicate people's needs are considered including their wishes, choices, and preferences. We found personal support plans are detailed and thorough. There are personal plan review processes in place, these would benefit from being strengthened to fully capture people's involvement in their care and the contribution from appropriate others. Risk assessments are in place to ensure people are supported safely. Although these were found to be detailed they would benefit from additional information regarding the actual care provided and needed. People and relatives we spoke with confirm the care and support provided is of a good standard. The manager and RI are committed and motivated to ensure positive outcomes and a good standard of care and support is provided and maintained. The catering staff have good knowledge of the dietary needs of people with swallowing difficulties and alternative diets. People spoke highly of the standard of meals and choice provided. We viewed menu planners and meals provided which were well presented and nutritious. People, care staff and managers told us staffing levels are good with no recruitment or retention issues at the current time. A new full time activities coordinator has recently been recruited.

The accommodation is safe, secure, comfortable, clean and bedrooms are personalised. Since the last inspection the provider has invested in extensive updates to internal and external areas of the home. There are further plans for future updates. All entrances and exits to the service are safe and secure. The provider is ensuring the building is fully compliant with fire safety regulations. We saw people relaxing and enjoying communal areas in the service.

There are effective oversight and governance arrangements within the service. The manager and RI are present, supportive and take an active role in the running of the service. Care workers told us they feel well supported by the manager and receive a good range of mainly online training. There are robust quality assurance processes including scrutiny by the RI who visits the service regularly. There are planned staff and resident meetings taking place along with planned handover of care arrangements. There are robust and thorough policies and procedures to guide staff in the service. The SoP is reflective of the service provided.

Care and Support

People receive a good standard of care and support at Ael y Bryn Residential Care Home. We spoke in detail to two people using the service and a relative during the inspection. A person told us; *"I am happy living here. I have no complaints or worries about anything. I receive regular visits from my family. The food is very nice here and we have choice. All of the staff are really nice and friendly. People are well looked after here"*. A relative stated; *"Really good there and staff are incredible...excellent activities, they always have something going on like a singer visiting the home. New activities coordinator will be really positive. Positive changes and updates in relation to the environment both in the garden (new furniture) and home itself. The manager is lovely and all the staff are wonderful"*.

Positive, relaxed and respectful interactions were observed between care workers and people throughout the inspection. We received many positive comments about the standard of food provided and choice. The kitchen staff are trained and knowledgeable about food preparation in relation to people with swallowing difficulties. The service has recently recruited a new full time activities coordinator who has many ideas about enhancing the wellbeing of individuals through future purposeful planned activities.

Senior staff consider a range of information when assessing whether the service can meet people's needs. Personal plans provide a good overall picture of people's care needs and preferences. People told us they feel well looked after; a view shared by a relative. Care workers have a good understanding of who people are and how they like to be supported. Risk assessments and personal plans are regularly reviewed to ensure they remain appropriate. The manager is working with staff to improve the quality of information they record in risk assessments and reviews of personal plans. This is to ensure records accurately reflect the care people have received, their views, goals and contribution, including from appropriate others. The work will also include reviewing and removing non-essential paperwork and transferring information to a new online support planning system.

People are protected from abuse and neglect as managers and care workers understand their safeguarding responsibilities and are aware of how to raise concerns should they need to. CIW are notified as required by legislation of any concerns or incidents in the service. All care workers we spoke to showed good knowledge and awareness of safeguarding procedures. There are good infection control procedures in place to ensure people are as safe as possible. We saw appropriate medication processes in the service and trained competent staff administer with records kept. The home has a clear, up-to-date policy to support the safe handling of medicines. Medicine storage temperatures are monitored and recorded daily so any issues can be addressed immediately. Medicines are stored securely within a designated medication room.

Environment

Since the last inspection the provider has invested extensively in both the internal and external environment. This includes new floor coverings, updating and redecoration in some communal spaces, new garden furniture, new laundry equipment and flooring. Also, the complete refurbishment of three bedrooms. There are future plans to further update a level access shower room on the first floor. People like living in the home and referred positively to their bedrooms. We saw external exit and entry doors to the home are safe and secure. There are large ground floor communal areas including a dining area and large lounge where we saw people relaxing and talking to staff and other people. The service is clean and odour free throughout and we saw a domestic worker cleaning bedrooms and communal areas. People have easy access to a secure rear garden that is nicely presented with a circular path and garden furniture. There is a separate locked office area with secure storage for record keeping.

The environment is safe and there are processes in place to ensure checks are completed and documented. Safety certificates for gas installations, lift operation, stair lift, fire alarms, hoists and slings, portable appliance tests (PAT) are in place. We saw a file containing oversight of all maintenance, accidents, infection control and health & safety in the home. The service has access to a maintenance team. We saw cleaning products are stored safely, appropriately, and according to control of substances harmful to health regulations (CoSHH). Personal Emergency Evacuation Plans (PEEPS) are in place. There is a dedicated laundry room and soiled items are separated from clean observing good infection control. Fire alarm checks are completed regularly and documented accordingly. An external fire risk assessment recently completed includes a list of recommendations. We spoke to the maintenance manager who showed us a clear action plan to address these, many of which have already been completed. There are detailed cleaning and infection control procedures in the service. There is a food hygiene rating of five in the service this means the hygiene standards are very good and fully comply with the law.

Leadership and Management

There is good oversight and governance of the service by the management team. The RI ensures there are regular management meetings and visits completed to the service. The registered manager told us he is in the process of recruiting a new deputy manager. We spoke to care workers who were complimentary about the support they receive from managers. A care worker told us; *“well supported, great managers. Offer us lots of support. Really understanding and supportive”*. Another care worker stated; *“very well supported. Everyone is willing to help, open door policy”*. Policies and procedures are detailed and cover areas such as safeguarding and complaints. All policies viewed are thorough and reviewed regularly. The manager and senior management team are active and visible in the service. The current SoP accurately describes the service provided. There are regular planned resident and staff meetings taking place in addition to daily handover meetings. We saw many positive interactions between managers and staff and with people living at the home. We read reports such as quality of care reviews that cover areas such as consultation with people, staff, quality improvement, safeguarding and accommodation with clear related actions.

People are cared for and supported by well trained and managed staff. We saw a staff supervision log that showed nearly all care workers are receiving regular structured supervision and an annual appraisal. Care workers have either completed or are working towards a Qualification and Credit Framework (QCF) in care at the appropriate level. We saw a staff training log detailing a wide range of training provided including manual handling, first aid, oral hygiene, safeguarding, dementia etc. The manager told us all care workers are registered with Social Care Wales (SCW – the social care force regulator in Wales). Staff told us they have time to give people the physical and emotional support they need. We completed an audit of three care staff files. Records indicate that new care staff receive a thorough induction. The RI told us this is currently being reviewed to ensure it fully meets the requirements of SCW in relation to the registration of new care workers. A new care worker told us they had received a thorough induction and shadowed experienced staff for a period. Staff files contain the appropriate recruitment information and evidence of checks including references, proof of identification and Disclosure and Barring Service (DBS) regular checks.

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	A full inspection took place on 16th June 2022. Inspectors found the property to be in poor repair in some areas.	Achieved
16	A full CIW inspection took place on 16th June 2022. A file audit of support files was completed as part of this. There was insufficient evidence of support plan reviews including achievement of outcomes and involving individuals' and others as appropriate.	Achieved

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