

Inspection Report on

Options Pen-Y-Bryn

Bryn Celyn Holywell CH8 7QF

Date Inspection Completed

04/11/2021



About Options Pen-Y-Bryn

Type of care provided	Care Home Service
	Adults Without Nursing
Registered Provider	Options Autism (4) Ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	27 th August 2019
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language, and demonstrates an effort to promote the use of the Welsh language and culture.

Summary

The care and support provided at Pen-y-Bryn is consistently person centred. The culture within the service is inclusive and people are encouraged to be involved and make decisions about all aspects of their care and support. People have access to a range of meaningful activities, based on their preferences, which enhances their well-being and quality of life. People are respected and valued as individuals and are empowered by a dedicated management and staff team, who demonstrate a positive and caring work ethos.

Care staff support people to be independent, active and to achieve their individual goals and outcomes. Personal plans are clear, personalised to individual need and reviewed regularly. The manager takes action to make sure care is suitable and promotes their well-being. People are settled and comfortable with care staff, who know them well and give consistent and respectful care.

People are cared for in safe, secure and well-maintained surroundings. They can choose the décor of the bedrooms, and the provider has invested in adaptations to the environment to make people feel more at home. People feel comfortable, because they are cared for in a pleasant, homely and clean environment.

There are very thorough quality assurance systems in operation, the management and leadership are strong and are effective in delivering a service that keeps people safe and makes a positive difference to their lives.

Well-being

People express their views and they are able to influence their care and their environment. Care staff use a range of communication skills to ensure they listen to people and speak in a way they understand. A wide range of consultation processes ensures people make choices about their day-to-day care, activities and their environment. They are involved in their person centred planning processes and they help to identify their goals. They choose the décor and furnishings in their flats to suit their tastes and requirements. Care staff show respect and sensitivity towards people and their care and support needs.

Care staff work with people to support their emotional and physical health. They have contact with health professionals and monitor people's health. Care staff encourage people to be active and eat healthily. A clinical team meets regularly to discuss individuals' progress or any issues, and they provide specialist advice and guidance for the care team. This ensures people get the right care and support as early as possible.

People have access to and participate in community-based activities of their choice when they are available. They complete a weekly activity planner with their keyworker. The support provided by care staff encourages people to increase their independent living skills and to make healthy lifestyle choices based upon identified outcomes.

The manager and care staff protect people from abuse and neglect. Care staff complete safeguarding training and are aware of how to keep people safe, and how to take action if they are concerned for their well-being. Care staff read and follow the risk management plans. There are systems in place to make sure the environment is safe. The provider completes suitable recruitment checks before staff start work.

People are happy in their home environment. Care staff support people to undertake activities safely in and away from the home. Management has effective oversight of the maintenance and health and safety of the service. People live in a home, which best supports individuals to achieve their well-being.

Care and Support

The service obtains detailed information about a person before agreeing to provide a placement. The manager and clinical team review the information gathered to assess whether the home can meet the person's needs. They also check that any new people will be compatible with those already living in the home. The manager and care staff visit the person's current placement to meet with them and speak with staff. If the placement is suitable, a transition plan is followed to enable a smooth move to the home.

People and their families take part in person centred planning processes, which feed into personal plans. People complete personal plans with their key worker. The plans include what matters to them and their wishes and goals. Care staff follow positive behaviour support plans, in order to support people with individual approaches to addressing specific behaviours, and they review them regularly. Care staff listen to people and respond to them in a caring and supportive way. The management and care staff recognise people's uniqueness and work together to promote their confidence and self-esteem. Family members provided written and verbal feedback for this inspection. They confirm they are happy with the care the home provides. A parent described the care as 'outstanding' and the facilities as 'excellent'.

The multi-disciplinary team meet regularly to discuss people's progress or any issues that are preventing progress. The team explore how they can further improve people's experiences, and the reasons behind any negative behaviours. The manager communicates any decisions made in the meetings to the care staff in team meetings, and the care staff we spoke with said that this is effective.

The provider has arrangements in place to make sure risks to people's health and safety are minimised as far as possible. Personal files contain information to safeguard people from deprivation of their liberties. Staff know whom to contact and what to do if they thought a person was at risk of abuse. The measures in place to reduce the risk of people and care staff contracting Covid-19 are consistent with current Welsh Government and Public Health Wales guidance. There are suitable systems in place to ensure the oversight and audit of medicines management.

Environment

Pen-y-Bryn is a large detached property located off a quiet semi-rural lane on the outskirts of the town of Holywell, in North Wales. It is set within its own secure grounds and is next door to another Options adults' service with a large shared car park. There are two comfortably furnished lounges and a kitchen/dining room. The en suite bedrooms are of a suitable size, and people choose the furniture and personal possessions. The provider invests in the property to make sure people's environment is suitable for them. Pen-y-Bryn has use of the sensory room at the service next door.

There are contracts in place for the regular servicing of the heating, electrical installation and fire safety equipment. The home identifies risks for the environment and activities and puts measures in place to reduce them. There is a fire risk assessment and care staff organise fire drills and regular testing of fire safety equipment and smoke detectors. Personal Emergency Evacuation Plans (PEEPs) are in place and written according to individual need. The management and care staff report maintenance issues to the provider and they respond promptly. The home is well maintained, safe and secure to help people achieve their personal outcomes.

Leadership and Management

The statement of purpose accurately describes the current service arrangements it has in place regarding people's care and accommodation. The provider updates the statement of purpose when they make changes. People living at the home have a guide to the service in suitable formats.

The provider follows safe procedures to recruit staff. Care staff are supported in their role through regular supervision meetings. The meetings include discussions about people's needs and progress, practice, staff members' own well-being and their training requirements. The management holds team meetings every two months, and the records show that discussions about people and the service are comprehensive. The records confirm the managers and care staff access suitable training to equip them to provide the right care for people, and care staff told us the quality of the training is good. Staff told us the individual supervision meetings and team meetings are valuable for discussing people's progress and how best to support them.

People are cared for in a home where there is a consistent management team, which sets high standards and there is effective use of resources. Care staff told us they enjoy working at the home and the standard of support from management is high, and the management team and responsible individual are available and approachable. The provider is proactive in seeking to recruit staff, and follows safe employment practices. The provider employs a team of bank staff to cover care staff absences.

The provider has comprehensive quality assurance systems in place to monitor the operation of the home and maintain high standards. The manager said they feel supported and have frequent contact with the responsible individual and other senior managers within the organisation. The responsible individual visits the home at least every three months. They speak with the people living there, care staff and the manager. They also check records and they write a report on their findings, which identifies any areas for the manager to address. The provider employs additional officers to carry out further quality assurance checks. They write a report and make recommendations if required, and this provides a more independent view of its operations. Every six months, the responsible individual completes a thorough review of the quality of care provided at the home. Their findings are included in a report, which contains evidence of the progress made by people and identifies areas for improvement.

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
N/A	No non-compliance of this type was identified at this	N/A

inspection	

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