Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Bryn Edwin Hall Residential Home

Bryn Edwin Hall Residential Home, Northop Road, Flint Mountain, Flint, CH6 5QG

01352761345

www.brynedwinhall.co.uk

The inspection visits for this service took place between 26/08/2026 and 23/09/2026

Service Information:

Operated by:	Amber Care Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care and support for people living with dementia, Care and support for people requiring short-breaks or respite care, Care and support for people with mental health needs
Registered places:	35
Main language(s):	English
Promotion of Welsh language and culture:	The provider makes an effort to promote the use of the Welsh language and culture or is working towards a bilingual service.

Ratings:

Well-being	Good
Care & Support	Good
Environment	Good
Leadership & Management	Good

Summary:

Bryn Edwin Hall Residential Home is a care home providing accommodation and personal care for people living with dementia. Well-being is good at the home because people are supported by staff who know them well and provide respectful, person-centred care. Positive interactions were observed throughout the home, with staff promoting dignity, inclusion and engagement. People are encouraged to maintain relationships, participate in activities and contribute to decisions about their daily lives. Monitoring of wellbeing and health helps ensure people receive appropriate support.

People have good care and support through personalised care based on assessments and regularly reviewed care plans. Staff understand individual needs and provide support that promotes health, wellbeing and independence. Effective arrangements are in place to manage risks and respond to changing needs.

The Environment is good because people live in a clean, comfortable and welcoming home. Bedrooms and communal areas support social interaction, relaxation and meaningful activity. Effective processes are in place to maintain cleanliness, safety and the suitability of the environment, including outdoor spaces that enhance wellbeing.

Leadership and Management is good because the service benefits from effective leadership and a skilled workforce supported through recruitment, training and supervision. Governance systems provide oversight of quality and safety, while audits and reviews drive improvement. Management oversight has strengthened since the previous inspection, contributing to improved quality assurance and service development.

Findings:

Well-being — Good

People at Bryn Edwin Residential Home are supported by staff who know them well and understand their individual preferences, routines and support needs. During the inspection, we observed numerous positive and respectful interactions throughout the home. Staff spoke with people in a warm and familiar manner and took time to engage people in conversation and everyday activities. We observed staff supporting people during mealtimes whilst seated alongside them, promoting dignity and inclusion. In communal areas, staff were visible, available and interacting with people.

People have opportunities to participate in social, recreational and meaningful activities. Staff explained how activities are matched to people's interests and preferences and described the home's "Daily Sparkle" approach, which ensures people receive dedicated one-to-one engagement. We saw records of individual sessions tailored to people's interests. The home engages with a digital Cognitive Stimulation Therapy programme to evaluate outcomes relating to wellbeing, mood, cognition and social engagement. The service has also recently introduced a Behaviour Support and Engagement Lead role to further develop meaningful engagement and person-centred support for people living in the home. People can participate in activities at the home and join trips into the community.

Staff and managers support people to maintain relationships and participate in community life. We saw evidence that the home liaises closely with relatives and friends of people and engages with them about changes in care needs. Relatives told us staff make considerable efforts to encourage social opportunities whilst respecting people's wishes and preferences.

People are involved in decisions affecting their lives and support. We spoke with an advocate who described improvements to the home’s engagement with people around decisions that affect them. We observed strength-based and proportionate documentation that clearly considered people’s ability to make decisions. People are given opportunities to provide feedback on the service through regular resident meetings, which consider activities, food, care and support, environment and safety. Records demonstrate the provider responds to issues raised and provides feedback on progress and actions taken.

Care & Support — Good

People receive care and support that is informed by good assessment and care planning arrangements that support consistency of care and promote person-centred practice. We reviewed care records and found detailed information to guide staff in meeting people's individual needs and preferences. Care plans consider a range of areas including health, wellbeing, communication, nutrition, mobility and personal outcomes. Records are regularly reviewed and updated to reflect people's changing circumstances. Daily records show staff monitor people's wellbeing and provide ongoing support throughout the day.

Staff have effective arrangements in place to promote and monitor people's health and wellbeing. We reviewed evidence of regular weight monitoring, with records demonstrating consistent oversight of nutritional wellbeing. Kitchen staff have access to information relating to food preferences, allergies, intolerances and specialist dietary requirements. Specialist eating and drinking guidance is available to support the safe preparation and provision of modified diets, and staff have access to additional information regarding the equipment and utensils required to support people's eating and drinking needs. Dietary information is routinely monitored and communicated to care staff and kitchen staff, supporting safe and effective care. People's health needs are reviewed on an ongoing basis, and records demonstrate a proactive approach to monitoring changes and identifying potential concerns. Staff work proactively with professionals to support people's changing needs. Records show routine liaison with professionals, including reviews of medicines and health needs to help ensure care remains appropriate and responsive. Good standards of cleanliness are maintained throughout the service and infection prevention and control arrangements are evident. Laundry cleaning schedules demonstrated routine oversight of cleaning processes and equipment

People benefit from risk management arrangements that seek to balance safety with independence and choice. We reviewed individual risk assessments, including those relating to mobility, falls and other safety risks. The provider completes individual falls reviews to analyse patterns, levels of concern and contributing factors when people experience multiple falls. These reviews consider actions required to reduce risk and promote people's safety and wellbeing. Records show ongoing monitoring and review of incidents, helping staff to identify emerging risks and respond appropriately to changes in people's needs. Incident information is used as part of wider review processes to support learning and continuous improvement.

Environment

Good

People live in an environment that is comfortable, homely and supports their wellbeing. We saw people can personalise their living environments and maintain belongings that are important to them. Bedrooms viewed during the inspection reflect people's individuality and personal preferences, with personal possessions and refreshments visible within rooms. Communal areas are clean, welcoming and provided space for people to socialise, participate in activities or spend time quietly according to their preferences. During the inspection, we saw people moving freely around communal areas and appearing comfortable within their surroundings. Outdoor areas are well maintained and provided additional space for people to spend time outside with opportunities to participate in gardening activities and grow vegetables. Information was displayed throughout the home to support people to make choices and remain informed about daily life within the service. This included information about menu options and activities taking place within the home.

Established maintenance and safety arrangements support the ongoing suitability of the premises. The manager and Responsible Individual maintain oversight through routine checks, servicing and monitoring processes, helping to ensure the environment remains safe and suitable for people's needs. Information relating to people's privacy and how personal information is managed is available within the home, helping to promote transparency and awareness amongst people, visitors and representatives.

Effective systems support the monitoring and maintenance of the environment. Staff use an electronic maintenance reporting system to record, track and monitor maintenance concerns across the home. Staff demonstrated how repairs are identified, logged and reviewed to ensure issues are progressed appropriately, and we saw examples of maintenance works and ongoing investment in the environment. We also saw evidence that concerns identified through routine monitoring are acted upon and progressed. During the inspection, we identified some areas requiring maintenance, particularly in parts of the premises not routinely accessed by people living in the home. Management responded positively to the issues raised and demonstrated that appropriate action has been taken.

Leadership & Management — Good

The home benefits from established leadership and management arrangements that support positive outcomes for people. Staff spoke positively about the management team and described managers as approachable, supportive and responsive. We observed sufficient staffing throughout the inspection and received positive feedback about the quality of care provided. A positive organisational culture is promoted within the service, and staff contributions are recognised and valued. We saw examples of staff recognition through an appreciation board and initiatives involving both people and staff.

Staff are supported through recruitment, training and performance management processes. We reviewed workforce information, recruitment records and personnel files, which demonstrated appropriate employment checks and oversight of Disclosure and Barring Service requirements. Staff receive training across a broad range of topics relevant to their roles. The provider had undertaken a detailed analysis of workforce skills, identifying areas of strength and opportunities for further development. An action plan was in place to support ongoing workforce development.

The manager and Responsible Individual maintain oversight of the quality and safety of the service through a range of governance arrangements. We reviewed Responsible Individual reports, incident monitoring, falls reviews, medication reviews, resident feedback and quality assurance documentation. Resident meetings provide opportunities for people to share their views on the service and records demonstrate feedback is considered and responded to. We saw evidence of individual falls and medication reviews being used to identify patterns, monitor risks and inform actions to improve outcomes for people. The Quality of Care Review reporting process considers performance in line with CIW inspection themes and identifies both strengths and areas for further development.

We found evidence that management oversight has strengthened since the previous inspection, including improved analysis of service information, stronger quality assurance arrangements and greater scrutiny of key areas of service delivery. Documentation demonstrated improved consideration of decision-making processes and individual rights, supported by more robust governance and review arrangements. As a result, a Priority Action Notice issued at the previous inspection has been addressed. Whilst progress has been made, opportunities remain to further strengthen some governance processes, particularly in relation to privacy, data management and evidencing the effectiveness of systems used within the service. The Manager and Responsible Individual acknowledged these areas for development and committed to introducing measures to address them.

Areas identified for improvement

Where we identify **Areas for Improvement** but we have not found outcomes for people to be at immediate or significant risk, we discuss these with the provider. We expect the provider to take action and we will follow this up at the next inspection.

Where we find outcomes for people **require significant improvement** and/or there is risk to people's well-being we identify areas for **Priority Action**. In these circumstances we issue a Priority Action Notice(s) to the Provider, and they must take immediate steps to make improvements. We will inspect again within six months to check improvements have been made and outcomes for people have improved.

CIW has no areas for improvement identified following this inspection.

CIW has not issued any Priority action notices following this inspection.

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