



Inspection Report on

Brwynog Residential Care Home

**Madyn Road
Amlwch
LL68 9DH**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

28/01/2025

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About Brwynog Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Isle of Anglesey County Council Adults and Children's Services
Registered places	29
Language of the service	Both
Previous Care Inspectorate Wales inspection	31 January 2024
Does this service promote Welsh language and culture?	The service anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

The service provided is highly praised by people living at the home, their families and visiting professionals. People feel settled, they get on well with each other and with the staff team. The management are approachable, and they are available when people, and their families, want to speak with them. Care is provided by care workers who are appropriately trained and who are supported in their roles.

People's care needs are known by the manager before they move into the service. Care planning documents are co-produced with people. Their individual preferences for how they want to be supported are recorded and respected. However, personal plans are not always completed in a timely manner and although this has not affected any person using the service, this is an area for improvement.

The care home is clean, well maintained and safe. People's own rooms are comfortable, homely and well presented. There are communal areas, lounges and a garden for people to spend time with others, if they want to. Health and safety arrangements are in place to keep people safe.

There are good management and leadership procedures in place, which ensures the service runs smoothly and in line with the statement of purpose. The service provider has good oversight of how well the service is operating.

Well-being

The Welsh language and culture are respected and celebrated at Brwynog. Many people using the service speak Welsh as their first language. We saw care workers and the manager speak with people in their chosen language, Welsh and English. The service is provided bilingually, with all documents available in both languages. Special events take place at the home to mark occasions such as St David's Day. The responsible individual (RI) is fluent Welsh, which means people can choose which language they wish to use when speaking with them.

People are happy because they have positive relationships with the care workers providing their support. We saw care workers speak with people in a kind, caring and respectful manner. They also protected people's dignity. Each person we spoke with praised the care they receive and they told us; *"The manager is everyone's friend, always has time for me if I want to chat"*, *"Deputy manager is lovely"*, *"Dim byd yn ormod o drafferth i'r staff (nothing is too much trouble for the staff)"*, *"Mond canmol i bob un (can only praise each one)"*. Relatives also provided positive feedback. They told us they appreciate the good communication from the team, they are *"Hapus hefo'r gofal (happy with the care)"*, *"Staff yn glên (staff are jolly)"* and they feel the home is part of the local community. A visiting social care professional described the service as *"Fantastic"*. They told us they hear only positive feedback from families, and people quickly *"settle"* at the home.

Choices are available in all aspects of day-to-day decisions, which means people have as much control as possible over their own lives. People told us they choose the time they get up in the morning, when they retire for the evening and how they want to spend their day. A person told us they like to stay up late at times, and this is respected by the staff. The manager told us people who can access the community on their own safely are encouraged to do so, as this enhances their independence and their well-being.

People's voices are listened to. Each person has their own personal plan in place which records their views about how they want to be supported, and what good care looks like to them. The people we spoke with told us care workers know their individual preferences and are respectful of their wishes. Care documentation should be in place before a person comes to live at the service and this is an area of the service which needs improving. The management team and the RI ensures people's views are sought when measuring the quality of the service provided and when considering new ideas for developing the service.

Care and Support

A clear preadmission process is in place which ensures the management are fully aware of people's care and support needs before they offer a placement at the home. We spoke with a visiting social care professional who confirmed the management team obtains a copy of their assessment when gathering information regarding people's support needs. They also speak with people, and their representatives, to gather further relevant information before making an informed decision they can meet people's needs.

Personal plans are co-produced with people, and are outcome focused, but they are not always created in a timely manner following people's move into the home. This affects the level of written information care workers have access to during people's initial period of living at the service. This is an area for improvement, and we expect the service provider to take action. The completed personal plans we saw were regularly reviewed and updated following any changes in people's needs. The support each person needs, and how they want to be supported is recorded. This enables people to achieve their individual outcomes. What matters to people, their life history and what is important to them is also recorded. This gives importance to seeing people as unique individuals, beyond their care and support needs.

Support is provided to encourage people to live a healthy life. People's health conditions and how they are managed are recorded in people's care documentation. We saw medication charts record the medication administered to people, which helps people to manage their health conditions. Relatives told us medical attention was always arranged for their loved ones when required. We saw the outcome of any contact with health professionals is recorded in people's care documents. People are encouraged to keep physically active, with gentle exercises a part of the activities provided. A healthy and nutritious diet is available, and specialist diets are catered for. Those we spoke with told us they were very happy with the food they received and confirmed they always had choices. Records show people's weights are monitored and referrals are made for specialist dietary input when required.

Safeguarding procedures are in place to protect people from harm and abuse. The safeguarding policy is aligned with the current national safeguarding process, and care workers receive safeguarding training. The manager refers safeguarding matters to the local authority appropriately. The RI monitors the safeguarding arrangements in place during their visits to the service. People told us they feel safe and relatives told us they also feel their family members are safe.

Environment

Support is provided in a safe, clean and well-maintained environment. At the previous inspection we found the security arrangements at the main entrance was an area for improvement. At this inspection we found action had been taken, and we were unable to enter the care home without staff's permission. This means all visitors to the care home require staff's authorisation to enter, which protects people's safety. Health and safety checks within the environment, related to fire, water, gas and lifting equipment take place regularly. This means risks to people's safety are well managed to keep people safe. The kitchen has a rating of five (very good) following a recent local authority inspection. Housekeeping staff are employed which means they can concentrate their time completely upon keeping the environment clean. Even though the housekeeping staff were not working on the day of our visit, all areas of the home were clean and tidy. Infection control risks are well managed, which also protects people's health and safety.

There are three spacious, communal lounge areas available, where people can choose to spend time with others. There is a smaller lounge area where people can spend time with their visitors, if they want privacy. A dining room is provided where people have a choice of tables to sit and have their meals. Efforts are made to lay the tables with fresh linen, cutlery, condiments and a small vase with flowers on each table.

The environment promotes people's independence. People can walk around the care home because the flooring is safe to use with walking aids, and a support rail is provided along the wall in the corridors. There is a passenger lift for people to use to go upstairs safely. Baths and showers are accessible, lifting equipment is available should people require their use. People's own rooms are homely and comfortable. We saw people had brought their own items from home to personalise their own rooms. People told us they were happy with their own rooms. There is accessible outside space available. We saw patio seating areas are provided in the garden.

Leadership and Management

People can access written information regarding the service provided, which they can use to decide whether the service is suitable for them. The provider's statement of purpose document (SOP) is updated annually and accurately describes the service provided. There is a guide to the service document which provides further information regarding how the service is provided and what people can expect when they live at the home. This includes how to raise a complaint and how complaints are responded to. People and their families told us they feel able to raise any issues they may have with the care workers or the management team.

Arrangements are in place by the service provider to sustain the financial stability of the service. We saw the décor and the facilities provided within the home are being invested in, and this means people live in a well-cared for environment. We saw there are further plans to invest significantly in upgrading the environment within the home. We saw ample food stocks were available which were high quality and well-known brands. External entertainment, such as singers, are bought into the service, so people have activities to look forward to. People's experiences of living at the service are positive because the service is financially sustainable.

Staffing levels are appropriate to meet people's needs. We saw care workers provide support to people when required, and people confirmed their requests for assistance were responded to promptly. Staffing rotas show kitchen and housekeeping staff are employed, which mean care workers can concentrate their time upon spending time with people and attending to their needs. Staff are recruited safely; they complete relevant training and receive one-to-one supervision sessions with the manager.

The service provider has effective systems in place to oversee the smooth running of the service. This ensures good quality care and support are consistently provided. Regular audits take place to test various aspects of the service provided, to check they are operating as they should be. The RI regularly undertakes formal visits to the service and consults with people, relatives and care workers as part of their monitoring. Quality of care reviews take place twice a year to formally assess people's satisfaction with the service provided and to identify any areas which can be further developed.

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.

Area(s) for Improvement		
Regulation	Summary	Status
15	Initial personal plans are not always in place before people begin to receive care and support. Ensure	New

	personal plans are in place which record how people's care and support needs will be met and the steps which will be taken to mitigate any identified risks to the individual's well-being.	
44	The security arrangements in place at the main entrance to the home are not effectively preventing unauthorised access.	Achieved

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