Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report on

Ael-y-Bryn

Ael Y Bryn
160 Llanllienwen Road Cwmrhydyceirw
Swansea
SA6 6LT

Date Inspection Completed

19/11/2024

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	30 August 2023
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. Relatives we spoke with praised the care and support provided. Care workers told us they receive a good level of consistent formal and informal support from the manager, deputy manager and the responsible individual (RI). Care and support planning processes are detailed in an online care planning system. Personal plans are regularly reviewed to ensure they remain current and provide guidance to care workers. Since the last inspection the provider has invested in continued 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. Electronic 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. People and relatives told us they are involved and consulted on a regular basis. Risk assessments are in place to ensure people are supported safely. People and relatives we spoke with confirm the care and support provided is of a good standard. The manager, deputy 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 are well presented and nutritious. People, care workers and managers told us staffing levels are good with no recruitment or retention issues at the current time. A full time activities coordinator ensures people have access to a range of stimulating activities.

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 three people using the service and three relatives during the inspection. A person told us, *"It's very nice here. The staff are very caring. There is an activities coordinator and always something to do. Food is very good and plenty of choice."* A relative stated, *"More than happy, outstanding care provided here. Room is lovely. Carers are second to none. They really are excellent. Food is good – cooked breakfast/lunch as requested. Drinks are on tap. Good activities and entertainment. Care is very good and all the staff are lovely"*. 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 employs a full time activities coordinator who enhances the wellbeing of individuals through purposeful planned activities.

People's care and support needs are clearly documented in a detailed, thorough, and regularly reviewed online personal plans. A sample of personal support files viewed contain personalised information regarding likes, dislikes, care and support needs and risks. There is comprehensive information regarding health care needs such as pressure area care and specific risk assessments for staff to follow. Where necessary the appropriate community healthcare services provide support to people. There are thorough and robust pre-admission procedures to ensure the service can meet the care and support needs of people. Personal plans are reviewed on a monthly basis and updated as necessary. We received positive feedback from people and relatives about consultation about care and support needs. Relatives told us they are contacted about any changes or concerns.

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. Care Inspectorate Wales (CIW) are notified as required by legislation of any concerns or incidents in the service. All care workers spoken with show good knowledge and awareness of safeguarding procedures. There are good infection control procedures in place to ensure people are as safe as possible and the environment is clean and well maintained. We saw robust and safe medication processes in the service and trained competent staff administer with appropriate electronic records kept.

Environment

People are cared for in a clean, safe, homely, and secure environment. People's bedrooms are nicely decorated, clean and personalised to the taste of the individual. 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. Since the last inspection the provider has continued to invest in the environment both internally and externally. At the time of inspection the rear garden and entrance area were being re-modelled and updated with planters and a new entrance porch. The dining room has been re-decorated and the lounge area is also being completed. The manager told us of future plans to create a safe outside area to the front of the property. The service is clean and well maintained throughout. 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 and a full time maintenance person working in the home. We saw cleaning products are stored safely, appropriately, and according to control of substances harmful to health (CoSHH) regulations. 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. The manager told us the majority of the works have already been completed and others scheduled shortly. 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 a new deputy manager has been recruited since the last inspection. We spoke to care workers who were complimentary about the support they receive from managers. A care worker told us, *“management have been really supportive. RI has been wonderful and also really supportive.”* Another care worker stated, *“The management team here are very good, open door policy. Yes I get very good support”*. 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.

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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