Arolygiaeth Gofal Cymru
Care Inspectorate Wales

Inspection Report

Bryn y Mor Ltd

Bryn Y Mor Residential Home, Llaneilian, Amlwch, LL68 9NH

01407830763

www.brynymor.co.uk

The inspection visits for this service took place between 03/08/2026 and 04/08/2026

Service Information:

Operated by:	Bryn y Mor Ltd
Care Type:	Care Home Service Adults Without Nursing
Provision for:	Care home for adults - with personal care, Provision for mental health
Registered places:	27
Main language(s):	English
Promotion of Welsh language and culture:	The provider promotes, anticipates, identifies, and meets the Welsh language and culture needs of people.

Ratings:

Well-being	Requires Improvement
Care & Support	Requires Significant Improvement
Environment	Requires Significant Improvement
Leadership & Management	Requires Improvement

Summary:

Bryn Y Mor is a large Victorian manor house set within extensive private grounds with views of the surrounding countryside and coastline, close to Penysarn and Amlwch. The home is arranged over two floors, with all 26 bedrooms having en-suite facilities. A lift is provided to support accessibility, and a new registered manager has recently been appointed.

People are supported by a sufficient number of staff who treat them with compassion and respect. However, opportunities for people to participate in meaningful activities are limited, and thus, well-being outcomes at Bryn y Mor require improvement.

Care and support require significant improvement. Though care staff know the people they support well and have developed appropriate relationships with them, people's personal plans do not always contain accurate information, and reviews are not always completed in a timely manner.

Though Bryn y Mor benefits from a newly developed "wing", the condition of both the interior and

exterior of the original property requires improvement. Evidence was provided during the inspection that some of this is being resolved. In addition, the testing of systems has not always been conducted in a timely manner and therefore the environment of Bryn y Mor requires significant improvement.

Leadership and management of the service also require improvements to be made. Whilst people get on well with the staff team, staff are not recruited robustly and adequate staff training, supervisions and appraisals are not undertaken. Furthermore, though the previous Responsible Individuals (RI) quarterly and six-monthly reports have been undertaken, adequate management audits of the service have not been completed.

Findings:

Well-being — Requires Improvement

People at Bryn Y Mor have positive relationships with care workers, who know them well and support them in a warm and caring manner. Throughout the inspection, people appeared comfortable and relaxed in their surroundings. We saw care staff communicating effectively with people, including those who prefer to speak Welsh. Most relatives and visiting professionals also spoke positively about the relationships staff have developed with people living at the service. People are supported to exercise choice and control over some aspects of their daily lives. People told us they can choose when to get up, go to bed and how they spend their time during the day. We observed people moving freely around the home, accessing communal areas and approaching staff for support when needed. People's health and well-being needs are recognised and responded to appropriately. Care staff seek advice from healthcare professionals when concerns arise, one professional told us care workers respond appropriately to concerns and communicate effectively when people's needs change.

People are not always supported to do the things they enjoy. Outcomes for people require improvement because opportunities for meaningful activities and engagement are limited and care is not always planned or delivered in a way which fully reflects people's individual preferences and interests. Though some care staff told us activities with people were undertaken, we didn't witness activities during the inspection. We also spoke with several people who said there is little to do during the day. Some people described spending much of their time watching television, reading or completing word searches. Whilst care staff interacted positively with people, opportunities for meaningful engagement can be limited due to other demands within the service. As a result, people are not always supported to achieve personal outcomes relating to hobbies and interests. Information relating to people's life histories, preferences and personal outcomes are not always incorporated into care plans or used to inform care delivery. We received feedback that information provided to help care workers better understand an individual's history and preferences had not always been reflected within care records. This means people are not consistently supported in a way which reflects what matters most to them. We expect the provider to make improvements.

Care & Support

Requires Significant Improvement

People receive care from care staff who are familiar with their needs and routines. During the inspection, care workers responded promptly when people required assistance and interacted with people in a patient and respectful manner. Records show care staff liaise with healthcare professionals when concerns regarding people's health are identified. People spoke positively about the food provided and care staff demonstrated a good understanding of people's dietary needs and preferences. Mealtimes are a positive experience for people with care workers present in the dining room and attentive to people's needs. The cook is knowledgeable about people's individual likes, dislikes and nutritional requirements, and appropriate arrangements are in place to support people with specialist diets.

People cannot be confident care staff have an up-to-date plan of how their care is provided. Outcomes for people require significant improvement because we viewed documentation which showed people's personal plans, risk assessments and monitoring records are not always completed or reviewed within required timescales, and we have therefore issued a priority action notice. The provider must take immediate action to address the issue.

Care staff do not always have enough information to carry out their role effectively, and this information is not always an accurate reflection of people's current needs. Outcomes for people require significant improvement because we viewed information within people's personal plans and risk assessments which do not always provide care workers with enough or clear guidance about how people should be supported. As a result, people cannot be assured care, and support is consistently delivered in accordance with their assessed needs, and we have therefore issued a priority action notice. The provider must take immediate action to address the issue.

At this inspection we saw people's personal plans are not always an accurate reflection of the care and support they require. Outcomes for people require significant improvement because we viewed people's records relating to the delivery of care and saw they are not always maintained accurately and do not consistently demonstrate that care has been provided in line with people's individual requirements. Repositioning records, monitoring documentation and observation records do not always reflect the support outlined within people's care documentation. This reduces assurance that important aspects of people's care are being monitored effectively and delivered consistently, and we have therefore issued a priority action notice. The provider must take immediate action to address the issue.

Medication arrangements are not always effective, and people cannot always be assured medicines are managed safely and consistently. Outcomes for people require significant improvement because we viewed medication administration records and controlled drug documentation which contained omissions and inaccuracies. Although we did not identify evidence that people have experienced harm, there is a risk of harm if improvements are not made. The concerns identified mean people cannot be assured medicines are always managed and recorded

in accordance with best practice and we have therefore issued a priority action notice. The provider must take immediate action to address the issue.

Environment

Requires Significant Improvement

People can access communal areas throughout the home independently and spend time socialising with others or receiving visitors. During the inspection we saw people using lounges and dining areas throughout the day and moving freely around the home. Communal areas are generally clean, comfortable and suitably furnished to meet people's needs. People's bedrooms reflect their individual tastes and preferences and contain personal belongings, photographs and keepsakes which help create a homely environment. People have access to facilities and equipment which support their health, safety and well-being. Bathrooms and toilet facilities are available throughout the home and specialist equipment is provided. The kitchen is clean and well maintained, with appropriate quantity of food stocks available to support people's dietary needs.

Though both the new and old parts of the home are clean, and the new section of the property is in good decorative condition, the older part is not. People cannot be assured they live in a home that is in good decorative order. Outcomes for people require improvement because the provider has not consistently ensured the premises are well maintained and decorated. We identified areas of damaged plasterwork, torn wallpaper, water damage, damp and mould, chipped woodwork and damaged flooring. Some fixtures and fittings in people’s rooms and communal areas also required repair or replacement. Although people are able to continue using their home as intended, these issues detracted from the overall quality of the environment and require attention. Improvements are also required to external areas of the home and although the provider took immediate action to address some of the concerns identified outside, we saw trip hazards within the garden and outdoor areas which may affect people's ability to safely access and enjoy these spaces and we expect the provider to make improvements.

People cannot be assured that they live in an environment that has undergone appropriate testing of equipment as appropriate health and safety checks have not been undertaken. Outcomes for people require significant improvement because we viewed records which showed some fire safety checks, emergency lighting checks, equipment checks and water hygiene monitoring has not always been completed as required. We also found actions identified through the fire risk assessment remain outstanding, and remedial works arising from an unsatisfactory electrical inspection have not commenced. We also saw that an annual gas safety check has not been completed, though this was rectified quickly. As a result, people cannot be fully assured all environmental risks are being effectively monitored and managed. We have therefore issued a priority action notice. The provider must take immediate action to address this issue.

Leadership & Management Requires Improvement

People benefit from care staff who are committed to providing good care and support. A new manager has been appointed very recently which has ensured there is more structure and guidance for the team and for people who live at the service. Staff, relatives and professionals spoke positively about the newly appointed manager and describe them as approachable, supportive and visible within the home. The manager demonstrated an understanding of the improvements required and has already begun implementing changes to strengthen oversight and service delivery.

The service provider has some governance arrangements in place to support the running of the home, however oversight by the provider is not always adequate. There are policies and procedures in place, though some of these, such as safeguarding and infection prevention and control need reviewing. The RI completes their regulatory visits every three months, and as part of their visits they actively seek the views of people living at the service, staff who work at the service, inspect the premises, and review a selection of records of events. The quality-of-care review reports are completed every six months. However, outcomes for people require improvements in regards management oversight as we found there were no management audits in place. Manager audits of all aspects of the service are required to ensure their oversight and to ensure managers have suitable arrangements in place to assess, monitor and improve the quality and safety of the service as set out in the regulations. We expect the provider to make improvements.

People are supported by a service which provides appropriate numbers of staff to support people. However, people cannot be confident that care staff have received regular supervision, appraisals and training. People should receive care and support from workers who are appropriately trained and supervised. Outcomes for people require improvement because training records show gaps in staff training across a range of key subjects, including safeguarding, medication administration, moving and handling, infection prevention and control and fire safety. Though care staff told us they received supervisions and appraisals, we reviewed documentation which identified gaps in these areas. This means people cannot be fully assured the provider has effective systems in place to ensure care staff possess the knowledge, skills and receive the support required to undertake their role safely and effectively. We expect the provider to make improvements. People also cannot be confident that care workers have been recruited robustly. Outcomes require improvement as we reviewed files of care staff and found recruitment records were not consistently complete, with some files having documents, such as employment history, contract of employment, birth certificate and proof of residency, missing. One care workers file which was viewed was seen to be empty. A lack of up to date or complete documentation is essential as it shows care staff are able to be employed legally and have the required background checks undertaken. We expect the provider to make improvements.

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.

The table(s) below show the area(s) for priority action and/or those for improvement we have identified.

Summary of Areas for Improvement	Date identified
People should live in an environment that is safe, comfortable, well maintained and visually pleasing. The provider should ensure the home is maintained in good structural repair and that identified hazards and environmental issues are addressed in a timely manner.	04/08/26
Effective monitoring systems should enable the provider to identify concerns promptly, evaluate service quality and implement improvements to ensure people consistently receive safe and effective care and support.	04/08/26
People should receive care and support from staff who have been recruited through robust procedures and where the provider is able to demonstrate staff are suitable, qualified, competent and appropriately vetted for their role.	04/08/26
Staff should receive regular supervision, appraisal and training to ensure they possess the knowledge, competence and skills necessary to undertake their roles and meet people's needs safely and effectively.	04/08/26
People's personal plans should contain information in regards life histories of individuals and what people like to do so activities can be organised by care staff. Staff should have access to information contained in people's personal plans which ensures they have the knowledge, competence and skills necessary to undertake meaningful activities with people and that sufficient resources are in place to ensure activities are undertaken by people which they enjoy and are meaningful to them.	04/08/26

Summary of areas for Priority Action	Date identified

People's care documentation and risk assessments do not always give staff enough detail in regards people’s conditions and support requirements or instruction or direction for staff to undertake their role. The provider needs to ensure people's personal plans contain appropriate information and instruction to ensure staff are able to undertake their role effectively and accurately. People's personal plans should be an accurate and up to date reflection of their care and support requirements.	04/08/26
Personal plan reviews have not been undertaken in line with regulation. The provider needs to ensure that personal plans are reviewed in line with their own time schedules but at least every three months or as and when people's needs change.	04/08/26
The wellbeing of people is at risk if the appropriate tests, servicing and assessments are not undertaken in regards fire, electrical and water safety. the provider needs to ensure all appropriate testing is undertaken in a timely manner.	04/08/26
We found inadequate medication administration practices that included poor record keeping, administration taking place. This is placing people at risk of harm to their health, safety and well-being. The provider needs to ensure that medication records are completed in line with best practice guidelines and are accurate and up to date, fridge temperatures are taken and recorded, covert medication plans are in place and follow best practice guidelines, and Controlled drugs are stored correctly.	04/08/26
People's care and support needs in relation to repositioning should be undertaken in line with people's support requirements. Repositioning charts need to be completed on time and the support outlined in the personal plan needs to be undertaken in line with the persons medical need. People's personal plans and the support people receive need to be an accurate reflection of their needs. If not it may put people at risk of harm, neglect or abuse.	04/08/26

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