



Inspection Report on

Bron Haul Care Home

Bron Haul Residential Home

41-43

Brighton Road

Rhyl

LL18 3HL

Date Inspection Completed

27/11/2024

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About Bron Haul Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Sky Care North Wales Ltd
Registered places	37
Language of the service	English
Previous Care Inspectorate Wales inspection	30/11/2023
Does this service promote Welsh language and culture?	This service is making a significant effort to promote the use of the Welsh language and culture or is working towards being a bilingual service.

Summary

People living in Bron Haul are treated with dignity and respect by a dedicated care team who know them well. Care staff enjoy working here and some have done so for many years. Care staff are kind, cheerful and respectfully familiar with the people they support, and their care practices ensure privacy and dignity is promoted and maintained. Health is monitored all the time with external health professionals' input where needed.

Care staff are recruited safely and have training opportunities to enhance their skills and knowledge. Care staff have information in personal plans to support people how they want to be supported but including more information in the personal plans will enhance this. People have choice about the food they eat and where they dine; options are varied and nutritious and people's preference sought daily. People can choose which activities to engage with.

People live in a comfortable, homely environment that is warm, clean and suitable to meet their needs. The environment and layout of the service supports people to be as independent as possible and there is an ongoing programme of maintenance and renovations.

The service provider ensures a good oversight of the home, making contact daily with the manager and carrying out checks and audits to monitor practices and progress. Improvement continues to be needed with quality-of-care reviews and engagement with people and others to enable feedback on all aspects of service provision.

Well-being

People can speak for themselves and contribute to the decisions that affect their lives or have someone who can do it on their behalf. People are encouraged to personalise their rooms. Personal plans contain a document that describes each person's personal preferences, but this could be further enhanced by including more information. Care staff have a good knowledge of people's needs. We observed good communication, mutual respect, friendly and fun interactions and it was clear they knew the people they supported very well. People have a choice of healthy homemade meals and are offered a choice of refreshments.

The service provider has systems in place to protect people from abuse and harm. We saw any risks to people's health and well-being are clearly recorded in their care documentation, along with the necessary control measures to minimise risks. Care staff recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and told us they are confident to go to the manager or external agencies such as safeguarding if they ever had any concerns.

People benefit from a service, which is committed to improvement. Relevant policies and guidance are in place and kept under regular review. The Statement of Purpose (SOP) is a true reflection of the service we observed during our inspection. Care staff recruitment is robust, and staff receive relevant supervision and training. We saw evidence that the quality of care is reviewed, but this needs to contain more information which considers the views of people living at the service to inform the service's continuous development.

People are supported to remain healthy and active to promote their wellbeing. Support is provided from a committed care staff team who told us staffing numbers and teamwork is exceptionally good. This means people get the support they want when they need it as we saw during our visit. Referrals are made to health and social care professionals in a timely way and people have support with their medicines as prescribed. People are supported to do things they enjoy on an individual basis and in groups.

Care and Support

People are happy with the care and support they receive. Personal plans are in place to guide care staff on how best to support people, but more information is required to ensure they are person centred. Management complete comprehensive assessments with the person and their representatives before they move into the service. We saw good evidence of healthcare professionals being involved and care staff support people to access specialist, medical support when necessary. Family members are informed of any changes to their relative's care needs and very happy with care their loved ones receive. One relative said, *"gold stars all round, we can't fault anything the care is above and beyond"* and another said, *"we're really glade we chose Bron Haul, we know 'X' is in very safe hands and the care is excellent and we're kept updated"*.

Whilst some people living in the service are unable to fully express their opinions to us, people were seen smiling, laughing, and engaging with care staff. Some people told us how much they like living in the service, the support from care staff, and their daily lives. Activities are person centred and are coordinated and reviewed with people. Birthdays are celebrated and people said they are looking forward to and preparing for festive celebrations. Other activities include baking cookies, pumpkin carving, a childhood memories afternoon, trips out to garden centres, pet therapy, trips to the seaside and a pub afternoon are to name just a few exciting activities on offer. Care staff speak warmly about caring for people and working at the service.

Mealtimes are relaxed, people have choices of what to eat and food is well-presented and appetising. All meals are homemade, and food is sourced from local suppliers. Dietary choices and preferences are recorded in the kitchen, so care staff are aware of them. The service has achieved a food standard rating of five, which is the highest level possible. The cook is knowledgeable about the variety and choices of food available and specific dietary needs of people.

People can be satisfied the service promotes safe medication practices. Medicines administration, storage, and practices in the home are good and keep people safe. Care staff administering medication complete the correct training, their competencies are tested, and regular medication audits are carried out by management.

Environment

People live in an environment suitable to their needs. The service provider continuously invests in the decoration and maintenance of the home to ensure it meets people's needs. There is an ongoing refurbishment plan in place. New flooring has been laid on the ground floor corridor, some bedrooms and the designated smoking room. People can enjoy the well-kept gardens to the front and rear of the property. People's rooms are clean, tidy and personalised to their own taste with belongings. They like their rooms and confirmed they can personalise them with their own belongings. There are communal lounges and a dining area for people to use to socialise, and they can have privacy in their rooms if they wish.

The service provider identifies and mitigates risks to health and safety. Health and safety audits are completed, and actions are dealt with swiftly by maintenance staff. Routine health and safety checks for fire safety, water safety and equipment are completed. Records also show required maintenance, safety and servicing checks for the gas, and electrical systems are all up to date. Domestic staff were seen cleaning around the building throughout our visit and all areas were clean and tidy. The service provider has infection prevention and control policies and good measures in place to keep people safe. All care staff have access to personal protective equipment. There is a detailed cleaning schedule in place for all areas of the home. Moving and handling equipment is stored accessibly, but safely out of the way to prevent trips and falls.

Leadership and Management

The service provider has governance arrangements in place, and people benefit from a well led, effective management team. Arrangements are in place for the oversight of the service, such as audits of care planning, medication, environment and health and safety checks. The service is provided in line with the objectives of the SOP, which is regularly reviewed. Policies and procedures are in place and are updated when required. We looked at documentation confirming the responsible individual (RI) conducts quarterly visits to the home for quality assurance monitoring and produces a report. The report covers a range of areas relating health and safety and care provision but more information regarding the RI's findings is needed in the report.

A quality-of-care monitoring report has now been produced. The report includes limited amounts of feedback from people who use the service and consultation with other relevant parties on the quality-of-care and support provided. The report contained no evidence of analysis of safeguarding, complaints, and notifications so there are no lessons learned or actions to improve the quality of the service. While no immediate action is required, this remains an area for improvement, and we expect the service provider to take action.

The service provider recruits and inducts all staff appropriately. Staff receive an induction that includes shadow shifts, and this was supported by care staff we spoke to. However, the induction is not in line with the All-Wales Induction Framework, from Social Care Wales (SCW) (the social care staff regulator for Wales) or similar. The manager has been looking at this area and will be making improvements. Appropriate recruitment and vetting checks are done for new staff, and Disclosure Barring Service checks for all staff are renewed in a timely way. Care staff are registered with SCW or are working towards this.

All staff receive regular one to one supervision as well as annual appraisals of their performance. Compliance with training requirements is monitored and meets the needs of living people in the service. Training is done via an online provider as well as some face-to-face sessions delivered by appropriately qualified staff. Some staff did comment they would benefit from more face-to-face training to further improve their knowledge and skills. This was discussed with the management who will address this. Team meetings are held regularly allowing for information to be shared with the team and topics can be discussed as a group. The manager has an open-door policy and care staff told us they feel confident reporting any issues or concerns to the manager, and they are very well supported.

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	
80	A six-monthly quality of care review has been undertaken; the information provided in the report is not in sufficient detail. The service provider must ensure the quality-of-care review contains more detail to identify patterns, and trends and analyse the range of information regarding the running of the service.	Not Achieved

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