



Inspection Report on

Options Pen-Y-Bryn

Holywell

Date Inspection Completed

02/10/2024

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About Options Pen-Y-Bryn

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	OA2 ADULTS LIMITED
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	26 July 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 Pen-y-Bryn receive a high standard of care and support in a well-managed service. People participate in a range of activities of their choosing. Care staff support people to develop their independence, confidence and self-esteem.

Care staff and managers are committed, enthusiastic and have established positive relationships with people. They understand and know how to respond to people's needs and there are effective arrangements in place to monitor and review the care people receive and to support their progress. Care plans are accurate and detailed, reflecting what is important to people and how care staff can provide the best care. The care people receive is regularly reviewed by the service provider's clinical team, managers and care staff, and family are fully involved in the process.

The manager and head of care have effective oversight of the care and support provided, taking action to drive forward improvements. The service provider invests in comprehensive quality assurance systems, which ensure the service is regularly checked by independent visitors and other departments within the organisation. This has contributed to the excellent quality of care people are receiving.

The home environment supports people's well-being. Improvements are made in line with people's wishes, which provide a sense of belonging. The home is attractively decorated, well maintained and homely. The manager ensures the home is as safe as possible from risks to people's health and safety.

Well-being

People's well-being is at the heart of the service provided. People's complex communication and care needs are understood by care staff and their voice is heard and listened to. People's family members are invited to their personal plan reviews and are encouraged to say what is working well and what could be improved. In addition, people use independent advocacy services where they want support in issues that affect them. The service provider is working towards the Welsh Active Offer by promoting the importance of the Welsh language and culture within the home and employing some Welsh speaking care staff.

People's health and well-being is prioritised and appointments and referrals to relevant professionals are made in a timely way. Care staff are vigilant in monitoring people's emotional and physical health. A multi-disciplinary (clinical) team meets regularly to discuss individuals' progress or any issues, and they provide specialist advice and guidance for the care team. This ensures people get the right care and support as early as possible.

Care staff and the management team actively seek to enhance people's experiences. They support them to access and participate in community-based activities of their choice such as swimming, shopping and trips. They complete a weekly activity planner with their keyworker. The support provided by care staff encourages people to increase their independence.

The service provider takes appropriate steps to safeguard people from neglect and abuse. Care records clearly state any risks to people's health and well-being, and detailed risk management plans help to keep people safe and as independent as possible. Care staff recognize their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises. They would approach any of the senior staff team but would also contact external agencies such as the local safeguarding office if they thought they needed to.

People personalise their surroundings in line with their interests and hobbies. People showed us bedrooms that had been decorated and furnished to their preferences. People have access to care staffs' one-page profiles with their picture and their interests. People are happy in their home environment. The home has a relaxed ambience and people are comfortable in its range of spaces. People can access the facilities they need to develop their skills. Care staff support people to undertake activities safely in and away from the home. Management has effective oversight of the maintenance and health and safety of the service.

Care and Support

People each have an individual personal plan, which provides a clear record of their support arrangements. Risk assessments and personal plans describe health interventions, these give care staff a clear picture of the persons needs and how they want to be supported. Plans are reviewed and amended following meetings with people, their relatives and professionals. Assessments of physical and mental health and up-to-date risk assessments help to maintain people's independence and improve their quality of life.

The service provider follows a holistic model of care to ensure people have genuine relationships and meaningful experiences. Care staff listen patiently to people, they are attentive to their needs, and they help them to make choices and decisions. People's well-being is at the centre of the care and support strategies used. The clinical team meet every month to review people's progress and to provide advice and guidance to care staff on the best approaches to support people. The service provider ensures care staff understand people's physical and emotional health needs, and how these affect their behaviour, so care staff can respond appropriately.

Care staff support people to have good physical and emotional health. People are registered with health professionals and attend regular appointments with support. There are good systems in place to ensure safe management of medications. The manager proactively responds to people's health conditions and consults with medical professionals. The manager and care staff work closely with other services to support people's social and emotional development and understand the importance of demonstrating warmth, affection, and positive regard.

There are suitable systems for recording incidents. The service provider has introduced an external audit of all physical interventions by a specialist team. This provides another level of scrutiny, and monthly reports are produced to assist with identifying any patterns or trends. To provide a balanced picture of people's lives, the service provider has introduced positive events forms and weekly updates to focus on the positive and meaningful experiences people have. The weekly update is a newsletter that shares the activities people have done during the week across the service provider's homes.

Environment

Pen-y-Bryn is situated in a semi-rural area within the County of Flintshire. People live in a home which has facilities and equipment to meet their needs and support them to achieve positive personal outcomes. The home is clean, tidy and comfortable with sufficient space for people to spend time with others or on their own. People have bedrooms with en-suite bathroom facilities. They can personalise their rooms and any changes that are requested or needed are actioned. The service provider ensures maintenance issues are responded to promptly.

The lounge has new seating and provides a comfortable space for people to socialise, relax and watch television. There is a large, well-equipped kitchen for people to help prepare their meals and snacks. The dining room provides plenty of space for people and we saw people and care staff eating together at the table and using the table for games and activities. Information on display in the hall includes Welsh words with pictures, information about making complaints, safeguarding processes, and care staff one-page profiles. Kitchen and laundry facilities provide people with opportunities to develop their independence skills. There is a trampoline in the garden and people can use the conservatory and swings at the service provider's other care home located next door.

A record is maintained of all visitors to the home. Procedures are in place to ensure confidential information is stored securely. Health and safety checks of the premises and vehicles are being carried out. There are regular health and safety checks as part of the daily routine of the home, including fridge and freezer temperatures and fire safety equipment. The boiler and electrical equipment are checked annually. There is a fire risk assessment in place and regular fire evacuation drills are conducted. The service provider promotes hygienic practices and manages risk of infection.

Leadership and Management

The service provider has ensured there are strong governance arrangements in place for the safe and smooth operation of the home. There are well established and clear routines and structures to ensure the home runs effectively and safely, from regular supervision and appraisals to daily handovers and team meetings. The service provider demonstrates they value their staff and encourages and motivates them to develop to their potential. Care staff feedback was gathered through discussions and Care Inspectorate Wales (CIW) surveys. The level of support and feeling valued, and the quality of learning and development opportunities were rated as excellent or good. Many made very positive comments about the home, including: *“it’s very organised”* and *“brilliant support from co-workers and the managers.”* Care staff described an “open door policy” and never feeling like they are bothering managers. They also said the clinical team work well with the care staff team.

There is a mix of long-standing and newer care staff. This means most of the care staff team are well-known to people, we saw during our site visit how excellent the rapport is, with good-natured humour and genuine respect for people in the home. Pre-employment checks take place before new employees start work - these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to individual learning outcomes and the ‘All Wales Induction Framework for Health and Social Care.’

The service provider has robust and effective quality assurance systems in place to monitor the operation of the home, and ensure they deliver high quality care and support to people. When required, action is taken swiftly to address any issues, this evidences the manager is diligent in their role. They are supported by the head of care who visits the home frequently and spends time with people and care staff. The responsible individual (RI) visits the home at least every three months and speaks with care staff and the manager and produces reports of their findings. There are additional visits are carried out by the national care manager and the service provider commissions an independent visitor to provide external scrutiny of the operation of the home. Managers conduct visits during the night to speak with night duty care staff and observe their practice. The manager conducts quality-of-care reviews every six months using consultation exercises and feedback from professionals and relatives. The reports of the reviews are very detailed and provide evidence of improvements and identifies areas for further development.

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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