



Inspection Report on

Bryn Edwin Hall Residential Home

**Bryn Edwin Hall Residential Home
Northop Road
Flint Mountain
Flint
CH6 5QG**

Date Inspection Completed

23 May 2022

23/05/2022

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About Bryn Edwin Hall Residential Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Amber Care Ltd
Registered places	33
Language of the service	English
Previous Care Inspectorate Wales inspection	17/09/2019
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

Bryn Edwin Hall provides a warm secure and friendly place for people to live. People living in the service are happy and well cared for by trained staff who know them well.

People have choice over how they spend their day and are involved in the development of the service through resident meetings. Staff treat people with kindness, respect, and dignity. People are encouraged to maintain hobbies and remain active and build relationships within the home as well as maintain relationships through visits from family and friends.

Management and the Responsible Individual (RI) routinely monitor all aspects of care and service delivery to ensure people are well supported to achieve their desired outcomes. Relatives we spoke to are happy with and the care provided to their loved ones and appreciate the good levels of communication they have with the management team. The service provider continually invests in all aspects of the service to ensure the care and support needs of people living there are met.

Well-being

People have control over their day-to-day life. People are encouraged to choose how they spend their time throughout the day. We saw people spent their time in the various communal areas, with their visitors, or in their rooms. We also saw people enjoying the secure garden and patio areas. People are able to personalise their rooms with their choice of colour, pictures, ornaments, soft furnishings, and personal possessions. People are offered a choice of meals, drinks and snacks throughout the day.

People's physical, emotional and mental health and wellbeing is monitored. Advice is sought when required from health and care professionals. People we spoke to appeared happy and smiled a lot. We saw people having visitors and seeing visiting health care professionals during our visit. Staff support activities in addition to their care role. We saw administration staff playing dominoes with some people and we heard care and domestic staff having meaningful conversations with people. A resident who expressed an interest in gardening was seen strimming the grass and filling up planters in the secure garden.

People are encouraged and supported to maintain family relationships and develop personal relationships with other residents. We saw friendly and warm interactions between people and staff. A visitor told us their relative is "*happy living here and staff treat them like family*". We saw people enjoying chatting together whilst walking to the dining room together for lunch. There are a small number of Welsh speaking people living in the service, and a member of staff speaks Welsh. The manager told us people are encouraged to socialise and speak Welsh with other people if they wish to.

People are protected from harm and abuse. Staff are fully vetted prior to starting in post and receive good training to ensure they support people effectively and safely. Policies and procedures are also in place to keep people safe. The home is welcoming, secure and comfortable, and people are well supported to achieve their desired outcomes.

Care and Support

People are happy and benefit from positive interactions with staff. Staff are friendly, caring and kind, and develop good relationships with people. We heard respectful and dignified conversations between residents and staff when providing personal care. Care staff provide discrete and personalised care to people following their personal plans. We saw staff chatting to people about their daily activities, their family, laughing, joking, and singing along with them to the radio. People we spoke to are happy living there. A visitor told us their relative has settled in very well and they are confident they are well cared for.

The pre-admission assessment process considers health professional assessments and information from people and their family to ensure the service can meet their needs and develop an interim care plan. People's personal plans are drawn up during their first month in the home by senior care staff who work with people on a day-to-day basis. A wide range of sources is used to gather information and record in their personal plans. This includes the views of people, their relatives, and health professionals. Management monitor personal plans and ensure they are updated and reviewed regularly and include a good level of personalised detail.

People can be certain staff are suitably trained and know people well enough to provide personalised care and support. Senior staff involved in care planning are currently undergoing specialist training to further improve the quality of personal plans. Staff receive training in safeguarding people from abuse and neglect. Daily care activities are entered into an electronic system in real-time; the records are detailed and show that care is provided as described in people's individual personal plans.

People have access to assessments and advice from social care and health care professionals as required. During our visit specialist equipment was delivered by occupational therapists to one resident and staff received instruction in its use. A specialist dementia-friendly robotic dog and robotic parrot are available for people to use and interact with. We observed many residents in the lounge were interacting positively with the dementia dog and were relaxed and calm.

Environment

The service provider has invested in the environment of the home. The building and grounds are extensive, and a dedicated team of staff look after maintenance and repairs. The RI regularly visits and inspects the whole premises. There is a plan of works and budget set aside each year for re-decoration and upgrading. We noted the front of the main house required some tidying up and the large front lawn required mowing. We raised this with the RI who confirmed they will address this. A gardening contractor is employed three times a year, and a gardener visits regularly over the summer period to keep on top of the grounds.

On the day we visited the home was welcoming, calm, relaxed and homely. The main house entrance, lounge and dining room are bright, airy, and well decorated and corridors are uncluttered. The dining room is a little cool and has a number of dining tables and chairs, but on the day we visited these were not laid out with place settings in readiness for the midday meal. We observed people were waiting for their lunch to arrive, some were confused as to why they were there. We heard staff reassure them "*its time for dinner and you eat better at the table*". More work is required to help people with dementia orientate to where they are and why when they are in the dining room; the manager and service provider say they will address this.

In the dementia specialist unit, the bedrooms were bright and airy with views out to the secure communal gardens. A small kitchenette allows people to maintain independence in making drinks and snacks with support from staff. Upstairs bedrooms are reached via stairs or a lift. The manager informed us some redecoration is planned, including converting a small room into an upstairs lounge for people to use with visitors.

People's health and safety is monitored, and potential risks identified in a timely way and action taken to reduce them. The service provider has policies and procedures in place to keep people safe. People are protected from harm through good hygiene practices throughout the home. We saw dedicated staff cleaning communal areas and people's rooms throughout our visit. Hygiene procedures and policies are in place for visitors to protect people during the pandemic, whilst also ensuring people get to see friends and relatives. Staff complete mandatory training in various health and safety areas including infection prevention and control, food hygiene, and fire safety.

Specialist equipment is available to meet people's needs, and all equipment is maintained and serviced regularly. Records show the home's mains utility services and systems are inspected, maintained and certified by qualified professionals as required.

Leadership and Management

The service provider has robust governance and audit arrangements in place to ensure their oversight of the management and quality of care and support of the service. The manager is well supported by the RI and service provider, and we received very good feedback from relatives about the manager.

Management use an electronic care recording system to monitor care support and staffing requirements across the home. Regular monthly meetings are held between the RI and the management team to ensure any issues raised are dealt with in a timely fashion. The RI and service provider monitor quality of care and service provision through these meetings, through regular visits to site, and remotely by reviewing care activity reports and alerts on the electronic care record system. Staff training and supervision are also monitored by the RI and service provider through the monthly management meetings.

We saw senior staff who administer medication do not have protected time to ensure they are not disturbed and can be called away to support colleagues elsewhere. This impacts on the length of time it takes them to complete the medication rounds. This was discussed with the manager and RI who confirmed they will address this before the next inspection.

Regular staff meetings are held, along with resident and relative meetings to maintain communication between people living here and the service provider. The manager has introduced a regular newsletter for relatives about what is happening in the service and any future planned activities and events. Relatives have access to an online portal where they can see the care and support their individual relative has received each day. A relative told us they like it a lot and communication between the manager, staff, and relatives is very good.

Staff receive a range of training including specialist courses to better support the needs of people living in the service. All staff complete the same training regardless of their role. People can be confident that all new staff are fully checked and vetted by management prior to starting. Depending on their existing qualifications and experience, new care staff undergo a twelve-week induction programme under the supervision of experienced staff, so people can be sure new staff are appropriately trained, experienced and qualified at the end of their probation period. All staff complete ongoing mandatory training to keep people safe and are encouraged to complete social care qualifications. Staff also receive documented formal supervision through a regular one to one meeting with management.

The service provider maintains a dedicated budget for ongoing maintenance, upgrade, and repair of the home. We saw evidence of continuous investment in all areas of the service from the building fabric to staff development. The service as a whole is financially sustainable and budgets are monitored through the monthly management meetings.

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. Where the provider has failed to make the necessary improvements we will escalate the matter by issuing a Priority Action Notice.

Area(s) for Improvement

Regulation	Summary	Status
N/A	No non-compliance of this type was identified at this inspection	N/A
	Regulation 23(1) and 23(2) (a) Information	Achieved

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