



Inspection Report on

Bakelyn Lodge

**86 Martin Street
Morrison
Swansea
SA6 7BL**

Date Inspection Completed

18 March 2022

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About Bakelyn Lodge

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Accomplish group ltd
Registered places	4
Language of the service	English
Previous Care Inspectorate Wales inspection	
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

Bakelyn Lodge is a small care home service for adults with mental health support needs in Swansea, it sits on a busy road with limited parking to the side of the building and a small secured garden to the rear.

People living in Bakelyn Lodge are treated with dignity and respect and by a consistent and skilled staff team who know them well. People are supported to engage in the development of their support plan and build on their independence. These personal plans are reviewed regularly to reflect people's changing needs and encourage further progression of their independence. People appear comfortable and settled in the service which is homely, modern and well maintained. Care workers spoken with are happy in their roles and are sufficiently trained and supported through routine supervision and an approachable manager. The responsible individual (RI) visits the service routinely and there is good oversight of how the service is being delivered with opportunities for people to participate in driving improvements in the service.

Well-being

People have a voice and are treated with dignity and respect. Personal plans and their development are informed by people who are encouraged to set their own goals and targets where possible. Robust risk assessments are in place to ensure people are supported appropriately according to their needs. Both personal plans and risk assessments are reviewed routinely and up to date. People are content in the service on the whole and are encouraged to participate in community activities where possible.

People are protected from harm and neglect. Care workers have received safeguarding training and those spoken with understand their responsibilities to protect people and know the procedures to follow to report if they have any concerns. There is a safeguarding policy in place and this reflects the Wales Safeguarding Procedures. Environmental checks are in place and routine services of equipment take place as required to ensure the service remains comfortable and safe for people.

People's physical health, mental health and emotional wellbeing is promoted. Care workers spoken with know the people they support well. They adapt their approach in line with the risk assessments to support people when there are changes in their mental health and seek medical support when required. There are good procedures in place to manage people's medication and monitor any side effects. However, logging temperatures every day in medication storage area is important to ensure safe storage of medication. People are supported to attend medical appointments.

There is good oversight of the service. The manager in post is approachable and care workers verified this. Care staff are in receipt of routine supervisions and appraisals are planned for next month. Care workers are trained appropriately to carry out their roles. Routine visits by the service RI are carried out and we saw the last two reports. The most recent quality of care review detailed a good overview of the service events that have taken place. Feedback is obtained from people and staff to drive improvements in the service.

Care and Support

People living in Bakelyn Lodge are encouraged to be involved in the planning of their care to ensure it meets their needs. We looked at care files and saw personal plans are detailed and give a good overview of people and how best to support them at different times. People are encouraged to follow a self-led recovery tool focus on aims and objectives. We saw routine reviews take place with people so that once achieved people can set new goals to further their ambitions and independence. Detailed risk assessments are in place. These give care workers the information to recognise people's mental health triggers and the best approaches to support them during these times.

People are supported to maintain relationships with family. We spoke with relatives who told us that they were able to see their loved ones and in general were complimentary of the level of support from the service. However, felt more activities could be provided now the restrictions of the pandemic are over. During the visit, people were seen accessing the community and the manager was looking at booking an event for one of the people supported. The manager told us there are regular activities from the service which include cinema trips, bowling and golf and they are looking at more activities now restrictions have been lifted. They also explained that encouraging people to re-engage in activities after such a long period of restrictions was challenging but they will continue to assist with confidence building until activities are enjoyed by all again. We spoke to people and feedback included *"I like living here, they're all good"* and *"it's nice here"*.

There are safe systems in place for the management of medication in the service and to maintain people's health. We saw that medication is stored securely in a designated cupboard with each person having their own drawer. We looked at two Medication Administration Records (MAR) and saw there is a photo available to quickly recognise the person, we found MAR charts are completed appropriately. Although the medication is stored securely we noted there are gaps on the temperature checks in the area which the manager said would be addressed immediately. Care workers spoken to know the people they support well and are able to recognise any deterioration in health and seek prompt medical advice. We saw that people are supported to attend routine medical appointments and documentation to support this was seen in care files.

The service promotes hygienic practices and manages the risk of cross infection. Care staff are encouraged to participate in testing regimes and those working were seen wearing Personal Protective Equipment (PPE) appropriately. Hand sanitiser is available on entry to the property and we were asked to show our negative lateral flow test (LFT) result on arrival and sign in, in the visitor's book. The provider has a Covid-19 guidance document in place which is updated in line with governmental guideline changes.

Environment

The provider ensures that individual's care and support is provided in a location and environment with facilities and equipment that promote achievement of their personal outcomes. Bakelyn Lodge is located on a busy road on the outskirts of Morriston. There is a small enclosed garden to the rear of the property with a smoking shelter and summer house and a small amount of car parking space to the side of the property. The ground floor of the property has a homely lounge, kitchen and newly refurbished dining room. The office, laundry and medication storage is also on this floor along with one of the four en-suite bedrooms. The upstairs of the property houses a further three en-suite bedrooms and the communal bathroom. We saw that all communal areas in the service are clean, homely and well maintained. The office has also been refurbished since the last inspection and the conservatory has been repurposed as a dining room which is very homely and encourages people to sit together at mealtimes.

The service provider has procedures in place to identify and mitigate risks to health and safety. As a service of a large provider, Bakelyn Lodge benefits from a maintenance team that can be called upon for any maintenance works required in the property. The required works are logged on an electronic system and flagged up to the maintenance contractor for the work to be carried out in order of urgency. We saw that there is a maintenance book in place in the service for daily checks in the service which include fridge temperature and food date checks. We saw up-to-date certificates are in place for annual service checks including: gas, electricity, portable appliance testing (PAT), and fire safety.

Leadership and Management

People are supported by a dedicated care team who are vetted and recruited appropriately. We looked at two staff personnel files and saw the required pre-employment checks are in place. However as staff can move between services with the provider it is important that their personnel information and documentation moves with them for easy perusal. We saw Disclosure and Barring Service (DBS) checks are in place for employees and there are systems in place to ensure these are updated as required.

Care workers are supported and trained to ensure they are able to meet the needs of the people they support. We saw that over 90% of all staff were up to date with mandatory training on the training matrix, this includes first aid, Covid 19 and safeguarding training. We also saw that over 84% of care staff have also completed developmental training which includes person centred planning, brain injury and mental health awareness. We saw routine supervision of care staff is carried out as required. Care workers spoken to confirmed this and were complimentary of the support and training they receive in the service. Comments included: *“there’s plenty of support and the manager is approachable”* and *“the training is good, my manager is very easy to talk to”*.

The provider has arrangements in place for the effective oversight of the service through ongoing quality assurance. The RI told us they visit the service regularly and have been there more frequently in recent months. We saw the last two RI reports which contained feedback from people and staff and notes were made for any improvements required in the service from people’s feedback. The oversight of the environment and management perspective in the reports contain an overview of key documentation including the statement of purpose, complaints, compliments and safeguarding referrals. We saw the last quality of care report was completed in December and the manager told us the next one is scheduled for June. The quality of care reports gives a good overview of the service. These contain feedback from people using the service about experiences they have had since the last report. Also included are updates on the service itself and improvements planned for the future.

The service provider has oversight of financial arrangements and investment in the service. We saw since the last inspection, the office has been refurbished and new flooring laid. Improvements have also been made in the conservatory to make it more user friendly and homely as a dining room. The service is well maintained and there is good oversight to keep the home in a good state of repair. Staffing levels in the service are adequate and staff feedback about this was positive. Compliments were given about the team work in the service in general.

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
80	Regulation 80- the last quality review reports available was from October 2018, since then there	Achieved

	should have been two reports available to view at inspection. The manager was unable to find a more recent review on the system,	
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28 June 2022