



Inspection Report on

Maes Y Bryn Residential Care Home

**Maes Y Bryn Residential Home
119 Penycae Road
Port Talbot
SA13 2EG**

Date Inspection Completed

27/04/2023

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About Maes Y Bryn Residential Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	ACCOMMODATING CARE (PORT TALBOT) LIMITED
Registered places	22
Language of the service	English
Previous Care Inspectorate Wales inspection	11 July 2022 & 14 July 2022
Does this service provide the Welsh Language active offer?	The service is working towards providing an 'Active Offer' of the Welsh language and demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

Maes Y Bryn Residential Care Home had a change of ownership in November 2022. CIW is currently processing the new owner's application to become the Responsible Individual (RI). This inspection was carried out to review the areas where the service was not meeting legal requirements at the last inspection. These related to the overall governance and delivery of the service.

Standards at the service have improved significantly. The home is being run with due care and attention, in line with its statement of purpose. The manager has implemented effective systems of audit. Staff are open to new and improved ways of working. The acting RI is overseeing the management of the service effectively. Managers and staff feel supported in their roles. Morale has improved and levels of staff training and formal supervision have increased.

People enjoy life at the home. Care workers are visible and attentive to their needs. More detailed, personalised care documentation has been introduced, providing clear guidance about people's care and support needs. People are benefitting from continuous environmental upgrades.

Well-being

The service promotes people's physical and mental well-being. There is a homely atmosphere that gives people a sense of belonging. People have meaningful interactions with others and value the relationships they have built. Care workers have a good understanding of people's needs. They encourage people to maintain a healthy, varied diet and act upon any health concerns. Safe medication systems ensure people consistently receive their prescribed medicines. Care workers have access to accurate, up to date guidance for meeting people's care and support needs. Records show people receive care in line with their personal plans.

There are measures in place to help protect people from harm. The manager monitors practice closely and carries out regular audits to ensure good standards of care are maintained. The acting RI oversees the management of the home, setting and reviewing actions for improvement. Suitable staffing levels are maintained to ensure people receive prompt, appropriate care. Care workers have completed safeguarding training and know how to report concerns about people's welfare. The home has equipment and facilities that help keep people safe. The service is taking action to improve fire safety and is awaiting a further inspection by the fire service.

The home is constantly improving its accommodation and facilities. People have access to private and communal rooms that are comfortably furnished and decorated. Hallways have been thoughtfully designed to offer some sensory stimulation. People are satisfied with the design and facilities within their bedrooms, which they can personalise as they wish. Equipment is regularly serviced and safe for use. There is a pleasant front garden where people can relax. The service intends to increase the outdoor space available to people by developing part of the rear garden into an inviting, usable place.

People have influence over the service they receive. They are involved in developing and reviewing their personal plans. The format and quality of these has improved so they provide a clearer picture of people's backgrounds and preferences. Care workers respect people's routines and support them to do things they enjoy. People can share their views about home life during resident meetings.

Care and Support

People are content in their home. We saw people enjoying positive interactions with others whilst going about their daily routines. One person said, *"We're all friends here"*. Care workers are visible and attentive to people's physical and emotional needs. We saw care workers giving people time to express their wishes and feelings, responding with kindness and compassion. One person said, *"Oh, I like it! You're all nice people"* when a care worker asked how they felt about the home. People told us they have a lot of fun and laughter, which we observed. People had enjoyed a recent birthday party and were looking forward to celebrating the King's coronation with a themed cake.

People are complimentary about the quality and range of food and drink on offer. People have a say in what meals are provided as menus are discussed during resident and family meetings. We saw people eating in various places, as desired. Some staff dined with people, adding to the home's family atmosphere. Care workers keep clear records of what people eat and drink. These show that people experience a varied, balanced diet overall. People's weight is regularly monitored, and medication records show that people receive their prescribed nutritional supplements. The manager completes monthly audits so any concerns about people's nutrition can be acted upon quickly.

The service has improved its care planning and review process. Managers assess people's needs before they move into the home to ensure the service is suitable for them. These assessments are used to develop personal plans, along with the care and support plans provided by commissioners. The manager has introduced more detailed, person-centred care documentation. We found care records to be well organised, accurate and up to date. 'At A Glance' and 'Who I Am' documents provide an insight into who people are and how they like to be supported. People told us they are well cared for. Regular reviews with people and their representatives help ensure personal plans remains suitable.

People receive a safe service. Managers are in the process of completing more detailed risk assessments relating to people's falls risk and level of mobility. Accidents and incidents are clearly recorded and dealt with appropriately. The manager carries out monthly audits to help identify trends and practice improvements. Care workers know people well and make timely referrals to medical and specialist services.

The service manages medicines safely. Medicines are stored securely within an office on the ground floor. We found stock levels to be consistent with those expected and recorded. Records show that people consistently receive their prescribed medication. People's anti-psychotic medicines are regularly reviewed to ensure their use remains appropriate. Medicines are administered by senior care workers following training and observation-based competency assessments. The manager carries out monthly medication audits to check that procedures are being followed safely and correctly.

Environment

There are measures in place to promote people's health and safety. People are protected from strangers entering the premises. Sensor equipment and alarms are used to help keep people safe and we found these to be working correctly. Records show that specialist equipment has been serviced within recommended timeframes. We found chemicals and other harmful items to be stored securely. Window restrictors are fitted to reduce the risk of people experiencing falls from significant height. The service is working to address concerns raised following a fire safety inspection. Personal emergency evacuation plans (PEEPs) are in place and can be accessed quickly and easily. The manager plans to review these during care plan audits to ensure they remain accurate and up to date. The manager will consult the fire service about installing a suitable lock on the office door, which will ensure confidential information is fully protected.

People live in comfortable, homely accommodation that has the facilities to meet their needs. Communal rooms are sociable spaces where people spend much of their time. One person told us they like to sit in the lounge and watch the activity around them. Another told us they have a favourite lounge chair that sometimes enables them to observe horses in nearby fields. Handrails and colour contrasts help people identify with their surroundings and move around safely. We saw care workers directing people as they moved between private and communal rooms. People can personalise their private rooms with furniture and furnishings. Bedrooms are thoughtfully furnished and laid out, taking into account people's individual needs and preferences. One person told us they are "*very pleased*" with their room, which has a large window overlooking the mountain. There is an attractive front garden where people can relax and enjoy the views and some fresh air.

The service makes continuous environmental improvements. The entrance hall has recently been redecorated and is both homely and inviting. First floor hallways offer some sensory stimulation; they have been decorated in a meadow theme that features a blossom tree, flower decals and artificial flowerpots. The manager told us of plans to extend the meadow theme to the rear outdoor space, which will include a seating area and outdoor artwork. There are also plans to create a 'Memory Lane' along the ground floor hallway, which will include images from the 1950s and furnishings of a traditional style. A ground floor bathroom has been fully refurbished to include a bath with ceiling hoist, new flooring, storage cupboards and better ventilation. New shelving, baskets and storage trolleys have been provided in the laundry room, although work to improve the finish of the walls is planned due to some minor damage. Bedrooms are being fitted with new flooring and carpets in order of priority.

Leadership and Management

The change of ownership has had a positive impact on the service. Staff and managers feel more supported in their roles and reassured by how approachable and engaging the new owner is. The manager has implemented clear systems of audit, which the acting RI is overseeing. The acting RI is also visiting the service regularly to monitor standards and drive improvement. Trusting relationships have been established, which has resulted in staff being open to new ways of working. The manager receives formal and informal supervision from the acting RI, although this needs to be clearly documented. Training for managers is available and will be a focus over the summer. The manager is confident embedding changes into practice with advice and support from commissioners. Professionals are in regular contact with the service and have observed steady progress.

There is evidence of investment in the service as new systems are being implemented and environmental upgrades made. Managers told us the acting RI responds promptly to requests for new equipment.

The service has a statement of purpose that sets out how it intends to provide the best possible outcomes for the people it supports. We found this document to accurately reflect the service being provided. The service is in the process of implementing new policies and procedures that will be available through an online platform. The manager told us these will be emailed to staff once approved. Staff have access to the platform so will be able to view the home's policies and procedures online at any time. We will formally test the effectiveness and availability of policies and procedures at the next inspection.

The service ensures enough staff are available to meet people's care and support needs. Care workers described staffing levels as "good" and told us their new shift pattern is working well. Care workers are available to assist people within communal areas and respond quickly to call bells and sensor alarms. One person told us staff are always around to ask questions. Despite experiencing significant change, staff told us morale has improved. The manager has a system to ensure staff receive annual appraisals and individual supervision every three months. We found that managers increase the frequency of supervision if staff need extra support, or their performance needs to be assessed and monitored more closely. The service has improved its delivery and oversight of staff training. Records show staff have completed a range of mandatory and specialist training, which includes safeguarding, dementia, behaviour that challenges and infection control. Care workers told us they feel valued by managers and confident sharing their views and ideas.

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
73	The responsible individual (RI) has failed to carry out formal visits to the service at least every three months and ensure people's views about the service are obtained during visits.	Achieved
7	The service is not being provided in accordance with the statement of purpose.	Achieved
6	The service is not being provided with sufficient care, competence and skill, having regard to the statement of purpose.	Achieved

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
12	The service is not consistently being provided in line with its policies and procedures, and these are not being kept up-to-date.	Reviewed
16	The service has not involved people, or their representatives, in the review of personal plans. Reviews have not considered the extent to which people's personal outcomes are being met, or whether any changes to personal plans are required.	Achieved
36	Staff are not receiving formal supervision every three months or annual appraisals. Staff have not completed core and specialist training relevant to their roles.	Achieved
15	There is limited detail within personal plans. As a result, these do not fully reflect people's individual care and support needs, their personal outcomes, how risks will be managed and how people will be supported to take positive risks, if appropriate. There is little evidence that people, or their representatives, are involved in developing their personal plans.	Achieved

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