



Inspection Report on

Brocastle Manor Care Home

**Brocastle House
Bridgend
CF35 5AU**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

24/05/2022

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About Brocastle Manor Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Hafod Housing Association Ltd
Registered places	80
Language of the service	Both
Previous Care Inspectorate Wales inspection	11 March 2022
Does this service provide the Welsh Language active offer?	Working Towards. The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture.

Summary

People receive care and support from a team of care workers who treat them with warmth and kindness. Feedback from people on the day of our inspection suggested they are happy with the service they receive. They are also very satisfied with the meals served at the home. Personal plans and risk assessments are in place and are reviewed. The management and monitoring of medication ensures good practice is maintained. The service has good infection control measures in place and access to a sufficient supply of personal protective equipment (PPE). The home environment is clean, well maintained and has good facilities for people to use but the provider needs to ensure that all restricted areas are locked. Care staff are appropriately recruited, vetted and have regular supervision sessions to discuss any professional issues or development needs. However, the service needs to ensure all staff are up to date with mandatory training. The equipment and facilities are regularly serviced to ensure they are fit for purpose. Governance and quality assurance arrangements are strong and enable the service to reflect and develop.

Well-being

People are encouraged and assisted by care staff to be as healthy as they can be. Drinks were offered and topped up as necessary. Meals looked appetising, portion sizes were appropriate, and people appeared to enjoy their meal. The service had been inspected by the Food Standards Agency and had been given a rating of 5 demonstrating the service was rated as very good. We noted people's likes and dislikes, allergies and specialist diets were known. People have developed good relationships with care staff whom they know well and this helps to support people's well-being and emotional health. Appointments with health and social care professionals are arranged for regular checks or if individual needs change.

Opportunities to participate in activities are available to people, there are two dedicated activity co-ordinators who work Monday to Friday. Management is looking to employ a further activity co-ordinator to ensure activities take every day. We were shown the jubilee weekend plans, which include Queen's birthday parade, service of thanksgiving, fish and chips in the garden, royal quiz/bingo, strawberries and cream and outside entertainers will be performing. Care staff spoken with all state recent staff shortages have prevented the amount of time they can interact meaningfully with people. The recent staff recruitment should address this.

The service is working towards providing an 'Active Offer' of the Welsh language and intends to become a bilingual service or demonstrates a significant effort to promoting the use of the Welsh language and culture. We saw bi-lingual signage around the home. We were told documentation could be provided in Welsh if requested.

People are protected from harm and abuse. Policies and procedures are kept under review and contain the most up-to-date guidance. Care workers are aware of their safeguarding responsibilities and know the process for raising concerns. All necessary pre-employment checks are conducted to ensure care workers are suitable to work with vulnerable people. Infection control measures are in place to reduce the risk of infections. Care workers wear the required level of personal protective equipment (PPE) and are routinely tested for Covid-19.

People live in suitable accommodation, which supports and encourages their well-being. Brocastle is a safe environment that is secure and permits authorised visitors only. Overall, the home is clutter free, care staff and management reduce hazards as far as practically possible. People's rooms contain personalised items of their choice and are suitably furnished. Bedrooms include facilities, which encourage independence and provides a private space to use if they wish. Relevant health and safety checks are completed.

Care and Support

The service considers a range of information to determine whether it can meet people's individual needs. The service has a clear admission process. This includes an initial assessment of people's needs. People's plans are detailed and specific to their individual needs. We saw there are personal and social histories in people's records which also indicate choices and preferences about their care. Personal plans are reviewed and updated regularly. There are systems in place to ensure people's best interests are promoted. We saw where people lacked the mental capacity to make important decisions relating to their life, Deprivation of Liberty Safeguard (DoLS) authorisations had been requested and put in place. The service maintained a record of applications it had made. We spoke with 2 visiting health professionals who told us they had no concerns and that there is good communication and the service acts on recommendations made.

People are treated with dignity and respect. Personal plans of care highlight people's preferences, likes and dislikes. People are supported to maintain their personal appearance. We observed good interactions when people receive assistance with moving and transferring and saw care staff interacted with people in a natural friendly caring manner.

People living at the service receive their medication as prescribed. The service completes checks, which ensures medication is stored at correct temperatures, and therefore remains effective. Audits ensure staff maintain good practices and identify any areas of improvement. Medication is generally stored safely in a locked facility and controlled drugs and stock checks managed effectively.

People experience warmth and kindness. We saw care staff treat people as individuals. They are attentive and respond to people's different needs with appropriate levels of prompting and support. People look relaxed and comfortable in the presence of staff. Staff speak in a friendly, caring and respectful way and people respond positively. Relatives told us "*I'm happy with what I see*" and "*X is very happy here*". People living in the home told us "*the staff are fabulous*", "*they are excellent*" and "*overall I am happy with the care I get*". We witnessed positive interactions during the inspection and saw care staff supporting people in a dignified manner.

Environment

People residing at Brocastle are cared for in an environment that supports their wellbeing. The home is set in its own extensive grounds on the outskirts of Bridgend. It is a purpose built home on two levels and provides personal and nursing care for up to 80 individuals. People have their own rooms, which are warm, clean and personalised to their own taste. Most people have family photos, cards and trinkets in their rooms, which gives a homely feel to their surroundings. We saw there are several communal areas on both floors of the home. They provide adequate space for residents to engage with each other, take part in activities and meet with visiting relatives and friends. These communal areas include a 'bar' and a 'café'. Corridors in the home are wide, airy and free of obstructions, making it easy for residents, staff and visitors to navigate their way round. All communal areas and other rooms such as medication rooms and storage rooms carried bi-lingual signage stating their use. The kitchen and laundry were on the lower floor of the home. During the inspection we found several rooms which should have been locked and were not. These included cleaning stores, sluice and treatment rooms. We expect the provider to take action and this will be followed up at the next inspection.

There are safety systems to help limit risk to people, such as key fob secured doors and a sign in book for visitors on arrival. Safeguarding training is available, care staff we spoke with all confirmed they would raise any observed poor practice and understand how to raise a concern. People living at the home said they felt safe and well looked after. There are policies and procedures to help keep people safe that are reviewed to ensure they remain current.

There are effective infection control arrangements in place, which care staff follow. When we arrived at the home, the staff followed procedure to ensure the visit was safe and testing undertaken. Visitors' identities are checked on entering the property along with signing of the visitors' book. Care workers have access to a sufficient supply of personal protective equipment (PPE) to manage infection control in the home.

Leadership and Management

The service strives to provide continuity of care to people they support. Staffing levels were sufficient on the day of our inspection to meet people's care needs. However, staffing levels and deployment of staff should remain under review to ensure people's emotional wellbeing is also met. The home's manager has been on a planned absence since April 2021. An experienced deputy manager has day-to-day responsibility for the home, supported by a senior management team. The home has struggled with staff vacancies and sickness in recent months which has impacted morale. To address this, a recruitment drive has taken place and several new care staff have been employed. There is also an enhanced pay incentive for staff who work extra shifts. Staff spoken with stated staff shortages have been extremely difficult and their biggest challenge but accept the provider is doing all they can to address the issue. There have been improvements to the frequency of individual staff supervisions, providing regular opportunities for staff to discuss any issues they have. Staff comments included "*I love my job*", "*I really enjoy coming to work*", "*It's hard work, we are short staffed*", "*staff don't feel appreciated*", "*management are approachable and supportive*" and "*manager is brilliant*".

The human resources (HR) department confirm the staff recruitment process meets all regulatory requirements. New care staff receive an induction in line with Social Care Wales's requirements. Improvements are required to ensure care workers are compliant with the service's core training requirements. Care workers speak positively about their training and say they feel competent and comfortable in their roles. However, records show not all care workers are up to date with their core training and require refresher training in some areas. We expect the provider to take action and this will be followed up at the next inspection.

People can be clear about the services that are provided at the home. The statement of purpose (SOP) is a key document setting the home's aims and objectives. It provides a detailed picture of the service offered, and clearly demonstrates the range of health and care needs the service will provide support for, including any specialist service/care provision offered.

The vision, values and purpose of the service are clear and actively implemented. The RI carries out three monthly and six monthly quality assurance visits. These visits involve talking to people and support workers to gain their views on the service provided. The six monthly quality assurance reviews, in addition to talking to support workers and people, involve a detailed look at other aspects of the way the service is delivered such as environmental assessments, and sets out areas of improvements that have been identified.

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
36	Training matrix does not evidence that mandatory and specialist training for staff is up to date.	New
44	The service provider has not ensured the home has been kept free from hazards and risks eliminated as	New

	far as reasonably practicable.	
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