



# Inspection Report on

**Celynbrook Care Home**

**Barry**

## **Date Inspection Completed**

16/10/2024

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## About Celynbrook Care Home

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Valebrook Care Homes Ltd
Registered places	5
Language of the service	English
Previous Care Inspectorate Wales inspection	04 April 2023
Does this service promote Welsh language and culture?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

### Summary

People are happy with the care and support they receive from kind and dedicated care staff. The service highly values the well-being of people and is a strong advocate for those who need support to make decisions about their care and support. People have ample opportunity to take part in activities which are of interest to them and all experience busy and fulfilling lives. Care staff are knowledgeable and compassionate and know people well. We saw positive interactions between care staff and people. The service reviews people's care and support with them on a regular basis and care staff are well-informed of people's needs.

The responsible individual (RI) and management are consistently available to people, care staff, and visitors. There is solid leadership and governance to monitor the quality of the service people receive. Consistent levels of training and supervision ensure care staff know how to keep people safe and protect them from harm. The culture of the home is to put "*People first.*" Management, and care staff work together to give people support to achieve their best outcomes and there is a united protective characteristic about the service.

## Well-being

People do things which make them happy and are settled living together. We saw people enjoying each other's company and there is genuine warmth and kindness towards everyone in the home. Care staff recognise people's unique likes and interests. Since the last inspection the provider has diversified the care staff team. This is enabling some people to have tailored support with care staff who they can identify with. The service does not currently provide the Welsh language active offer; however, we saw some bi-lingual signs and cultural references in the home.

People contribute to an active social life, and they spend time with people of their choice. The provider arranges weekly social gatherings which people highly value. People get together with friends and have their social needs met. People told us they enjoy a good range of activities, such as going to the cinema, visiting cafés, pottering in the garden, and keeping in touch with those who are important to them. For some people they require support to maintain meaningful relationships and the service facilitates visits. People's significant others are considered, and the service ensures celebrations such as birthdays and Christmas are marked. Representatives told us the service is "*Caring and thoughtful, even to family members*" and "*It is like a small family, not a care home*"

People are encouraged to speak for themselves and contribute to the decisions which impact their day-to-day life. The service provides people with support to make decisions in their best interest. We found appropriate procedures and documentation in place for people who require additional measures to keep them safe. There is opportunity for representatives and visiting professionals to provide formal feedback to the service. Engagement with people who use the service is positive and frequent meetings take place to enable them to have their say.

The service protects people from harm and abuse. A safeguarding policy and whistleblowing procedure are in place to fully inform care staff. All care staff are up to date with training and supervision. Care staff understand their responsibilities to safeguard people and know how to raise a concern should a person's well-being be compromised. People and their representatives are provided with information about the service which includes how to raise a concern or complaint.

## Care and Support

People understand what care, support and opportunities are available to them. The service completes regular reviews of the personal plan with people. For those who require additional support to review their needs, the service invites appropriate representatives to participate. People access advocacy to support decision making when it is a requirement.

The service provides a high standard of care and support in-line with the personal plan. Care staff know people very well and have an in-depth understanding of individual preferences. Daily outcomes are consistently met. Staffing levels are sufficient to meet people's needs. Care documentation is clear and kept under review. We found people at the service well dressed, well-groomed and receive daily support to maintain good personal hygiene. We observed care being provided with dignity and respect, and people form great bonds with care staff. The service is invested in people's emotional well-being.

People receive support to be as active and healthy as they can be and receive the right care at the right time. Care staff respond promptly to changes in people's needs and communicate well to inform others of the changes. People access health services and care staff maintain consistent records of health appointments and outcomes. The service is quick to respond to a person's change in health and well-being and they ensure people access prompt medical intervention. Care staff complete daily records to document met care needs such as food and fluid intake, skin integrity and personal care. We found some daily records did not sufficiently document accidents and the RI is taking prompt steps to address how care staff maintain records.

People have home cooked meals and choices are given daily. We observed drinks and snacks being offered to people throughout the day. The service completes referrals to other professionals for people with additional support needs with eating and drinking. Risk assessments are complete which fully inform care staff of how to keep people safe whilst eating and drinking.

There are good systems in place relating to infection control. Care staff use personal protective equipment appropriately. Medication is stored safely. There are thorough procedures relating to medication management to ensure people receive the right medication at the right time. Medication is administered by care staff who complete training, and the service evaluates skills and competency on a regular basis. People receive medication reviews with the appropriate health care professional.

## Environment

People live in a home which best supports their well-being. The home is well-maintained and recent refurbishment and redecoration is done to a good standard. The environment is comfortable, with pictures and items such as games, books and DVDs which are important to people and contribute to a homely environment. It is clean, warm, and uncluttered.

People have their own bedrooms which are unique and personalised. All bedrooms are maintained to a very good standard. People's bedding is clean with an ample supply of laundered bedding and towels available. Furniture in people's bedrooms meet their individual needs and provide them with a comfortable space to relax. Since the last inspection, the provider has completed essential work, such as replacing the flooring throughout. Oversight of the environment is effective in picking up on wear, tear and repairs. Management discuss updates on the environment at care staff and resident meetings meaning everyone is informed.

We found good cleaning regimes in place and care staff complete paperwork to document the facilities being checked. Some areas in the home are restricted to keep people safe, such as the medication room and where cleaning products are stored. Environmental risk assessments are complete. Systems are in place to ensure the security of the home and the safety of people living there, records of visitors are maintained. Equipment in the home is well maintained and support people's daily outcomes. Service records are kept in order. There are sufficiently equipped washroom and bathing facilities for people.

External grounds are accessible, with parking for personal vehicles. Since the last inspection, the provider has invested in a Poly-Tunnel which is situated close to the home. People are planning and participating in growing fruit and vegetables and plants for the patio. People told us they enjoy the garden. In the warmer months they have BBQs and social gatherings, where people meet with friends.

People share mealtimes together in the kitchen diner. The service holds a rating of 5 by the Food Standards Agency. During inspection we found most food stored and labelled appropriately. Personal Emergency Evacuation Plans and the fire risk assessment is up to date. We saw improvements with fire drill documentation. Care staff receive training and support to understand how to respond safely to an emergency.

## Leadership and Management

There continues to be strong governance arrangements at the service. The RI and manager are present and available to all, and this is highly valued by people and care staff. The RI completes and records regulatory visits to the service. We found records of the visit thorough and provide a solid evaluation of the quality of the service people receive. The RI produces a quality-of-care-review which is a regulatory requirement. The reviews present the findings of quality monitoring activities in detail. Action plans evidence the service continues to be reflective of its practice. The RI consults with people and representatives to inform service improvement. The views of people and their participation is highly respected and adds value to quality monitoring. The service acts upon feedback to better the outcomes for people.

Care staff are well informed and attend regular staff meetings, they receive timely supervision and practical competencies are assessed. Communication within the staff team is good and essential information is shared. Policies and procedures are kept up to date. The provider follows safe recruitment processes and care staff complete a thorough induction. Care staff are up to date with core training, and specialist training is complete to meet specific needs. Eligible care staff hold relevant qualifications and are registered with Social Care Wales, the workforce regulator. Promoting staff development and well-being is a strength of the service. Care staff consistently told us they feel supported, listened to and respected. Care staff said they have complete confidence the provider will act quickly to concerns which may impact on people's well-being. The provider is swift to act when there are safeguarding matters, and the service can evidence learning and improvements in processes from events and incidents. Record keeping is mostly effective, but we found minor gaps in some documents. The RI is prompt at addressing the training needs of some care staff in this area.

We found a nurturing and caring culture across the staff team which positively impacts people's well-being and personal outcomes. Procedures are in place to record concerns, complaints, and compliments. Governance and oversight of the service is impressive, and the RI informs the provider on how the service is performing on a regular basis. The statement of purpose accurately describes the service, which is a regulatory requirement. Promoting positive outcomes and delivering high standards of care for people is at the heart of the service

### Summary of Non-Compliance

Status	What each means
<b>New</b>	This non-compliance was identified at this inspection.
<b>Reviewed</b>	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.
<b>Not Achieved</b>	Compliance was tested at this inspection and was not achieved.
<b>Achieved</b>	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



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