



## Inspection Report on

**Glanmarlais**

**Glanmarlais Care Home  
Maes Piode Llandybie  
Ammanford  
Carmarthenshire  
SA18 3YS**

## **Date Inspection Completed**

14/08/2023

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## About Glanmarlais

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	PADDA CARE LTD
Registered places	74
Language of the service	English
Previous Care Inspectorate Wales inspection	
Does this service promote Welsh language and culture?	This 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

Glanmarlais provide good-quality care from motivated care staff, with whom people have developed positive relationships. There are frequent and varied opportunities for people to take part in activities. People have choice and are treated with dignity and respect. The service is committed to enhancing people's quality of life and supports people to achieve their goals.

The environment is safe, secure and well-maintained. The service uses the space to support peoples' wellbeing.

Arrangements for the effective management and oversight of the service are in place.

## Well-being

People and their representatives spoke positively about the care provided by care staff at the service. A person using the service told us, “*Pretty good here. They are very friendly and helpful*”. People live with dignity and respect and receive appropriate, kind, and caring support from care staff they know. Staff enjoy spending time with people. Meaningful interactions were observed. Individuals and representatives told us that care staff are good, make you feel safe and respond to any issues. A family member told us the manager resolves any issues that may arise.

People can communicate in Welsh, to Welsh speaking care staff. We were told that documentation is available in the Welsh language if requested.

People are happy and can do the things that make them happy. Empathy and care is shown to people, who have as much autonomy over their own lives as possible. People benefit from activities being organised and enjoy the choice of foods available at the service. A person who uses the service told us’ “*They make lovely cake*”. Care workers encourage people to make daily choices and decisions about how they spend their time. They have good rapport and professional relationships with people and interact in positive ways.

People are safe, protected, and receive care and support from care staff who have been safely recruited. People receive a good standard of care and support from a well-trained and supported care staff team, who are registered with Social Care Wales, the workforce regulator. Care staff know how to raise concerns. People and their representatives know how to raise a complaint and have confidence in this being dealt with by the manager.

## Care and Support

People are happy with the care and support they receive at the service. The process for admitting new people into the service is well-planned. Personal plans are person-centred, detailed and contain all the information required to enable care staff to meet the needs of people. The service is currently working with Designed to Smile to ensure good dental plans are in place for all residents. People's wishes of how their support should be provided are documented. Individuals and their representatives are involved in developing their personal plans, where possible, and their representatives. A member of care staff told us, *"Plans tell me about people, their background, their likes and things they don't like"*. Personal plans are reviewed in a timely manner and updated when changes are identified.

Care staff are committed, kind and caring; they provide individual support to people as detailed in their personal plans. We were told that the service is not using agency staff, which allows for consistent staff to develop relationships with people they support. They are knowledgeable about the people in their care and are empathic and patient in their approach.

People have freedom to choose what to do with their days. The service employs an activities co-ordinator and people are supported to access individual or group activities of their choosing and have a choice of menu options. A person using the service told us, they were very happy at Glanmarlais; *'Dwi'n wrth fy modd 'ma'*.

People's physical health and wellbeing is promoted. Care records show people receive support to access social and health care professionals when needed. The service understands people's health conditions, the support they require and can identify changes in the usual presentation of people they support promptly. People are encouraged to be as healthy as possible.

People are protected from harm and abuse. Care workers have completed safeguarding training and have a clear understanding of how to report matters of a safeguarding nature. A person using the service told us, *"If I was worried about anything at all, I could say. The Manager listens"*.

Infection prevention and control procedures are good. Care staff have access to personal protective equipment (PPE) if required.

Systems are in place for the safe management of medication within the service. We saw that medication is stored safely and care staff complete medication records accurately. Medication audits are completed regularly, and controlled drugs are accurately recorded and stored safely.

## Environment

The environment supports people to achieve their personal outcomes. The home is welcoming, comfortable, clean, and well-maintained. The home is large enough to provide space for socialising and privacy, with comfortable communal living areas. Visiting is unrestricted and people can meet with their family members whenever they want, in their own rooms or in one of the quieter communal lounges. Bedrooms are decorated to people's personal preferences and interests. Individuals have photos of loved ones, pictures, flowers, and ornaments.

People benefit from a safe and secure environment. We saw appropriate oversight of health and safety at the service. Appropriate arrangements are in place to ensure risks to people's health and safety are identified and dealt with. Records show checks are carried out around the home to identify and address issues promptly. The service has a maintenance program, with routine maintenance taking place. People are safe from unauthorised visitors entering the building, with visitors having to ring the door to gain access to the service.

Regular checks of the fire alarms take place at the home and staff are trained in fire safety. On the day of the inspection, staff were receiving fire drill training. Fire drills and fire alarm checks are conducted within the required frequency. People living in the home have a personal emergency evacuation plan to guide staff on how to support people to leave safely in the case of an emergency.

The service promotes hygienic practices and manages the risk of infection. We saw Personal Protective Equipment (PPE) and hand sanitising stations located around the home.

## Leadership and Management

The statement of purpose (SoP) clearly states what people can expect from the service.

The service has strong quality assurance arrangements in place, underpinned by core values. This effective oversight ensures a good-quality service, focussed on meeting the needs of individuals and promoting their wellbeing. The responsible individual (RI) visits the service and spends time talking to people. The most recent quality of care review identifies areas for development and improvement and uses the experiences of people to develop and improve the care and support provided.

The manager is suitably qualified for the role and registered with Social Care Wales, the social care workforce regulator. The manager knows people well and demonstrates commitment to providing strong leadership, ensuring effective day-to-day management and oversight of the service takes place. The manager is supported closely by two deputy managers. The service is in regular communication with the responsible individual (RI). Care staff team meetings and a staff buddy system support the provision of good-quality care. Care staff told us that the management team are approachable and always there to help or advise when required. A member of care staff told us, *"I feel supported. The management are amazing. The door is always open for us"*.

The service has systems in place for the safe recruitment of staff. Disclosure and Barring Security (DBS) checks are in place and current. Care staff are registered with Social Care Wales, the workforce regulator, or the application is being processed. Staff personnel files contain information required by Regulations to ensure they are safe and fit to work at the service.

Throughout our visit, we saw there was sufficient care staff on duty to support people and the service does not rely on agency staff. Newly appointed care staff complete an induction programme which includes training, shadow shifts and competency checks to ensure they can perform specific care tasks. Care staff training records indicate care staff have access to a variety of training opportunities, and care staff have completed a good level of training.

Care staff are provided with one-to-one support, through supervisions and annual appraisals. A member care staff told us *'We talk a lot everyday anyway, but it is that extra chance to focus on yourself too'*. Management offers daily support to care staff when required, undertakes frequent spot checks and quality monitoring checks. The service also operates a buddy system, where experienced staff members support care staff in providing good-quality care.

### 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. 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
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N/A	No non-compliance of this type was identified at this inspection	N/A
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