



Inspection Report on

Glangarnant Care Home

**Glan Garnant
Neuadd Road
Ammanford
SA18 1UF**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

20 September 2022 & 21 September 2022

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About Glangarnant Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Arkash Management Consultants Limited
Registered places	43
Language of the service	Both
Previous Care Inspectorate Wales inspection	11 May 2022 & 12 May 2022
Does this service provide the Welsh Language active offer?	The service provides an 'Active Offer' of the Welsh language. It anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

This inspection was carried out to review areas where the service was not meeting legal requirements in May 2022. These relate to standards of care and support, surveillance within internal communal areas and upholding people's right to privacy and dignity. A full inspection was carried out. Overall, we found that the service has made sufficient improvements in these areas to meet legal requirements.

Glangarnant Care Home has a relaxed, homely atmosphere where care workers respect people for who they are. The service has made many positive changes to improve standards of care. Care workers uphold people's privacy and dignity and promote their health and well-being. People have up-to-date personal plans in place that accurately reflect their needs. Work is underway to make these more person-centred. Record keeping has improved and progress has been made with regards to completing care reviews with people and their representatives. The service must continue these improvements.

The home is clean and well-maintained. People are also benefitting from environmental upgrades. The responsible individual (RI) supervises the management of the service effectively. Clear systems of audit have been implemented to monitor and improve practice. Progress has been made with regards to the training and supervision of staff, which must continue. Staff roles are being developed, but work is needed to boost morale. Care workers have a better understanding of people's needs. The home's key documents need reviewing and updating.

Well-being

People's rights are promoted. Surveillance cameras are being used in line with the service's CCTV policy. Care workers ensure people's privacy and dignity is upheld when providing care and support. They respect people's care preferences and routines, which are outlined within personal plans. The service is gathering information about people's backgrounds, including what really matters to them. This information will be reflected in a single document that care workers can access within people's individual rooms. People are encouraged to make daily choices and share their views about the service. Arrangements have been made for people to formally review the content of their personal plans and care and support outcomes. The service secures the relevant authorisations to ensure people are not unlawfully deprived of their liberty. Information about the service is available, although key documents would benefit from further detail and updates.

People's physical and emotional needs are recognised and catered for. The service has significantly improved the quality of information within personal plans. These have been kept up-to-date following changes in people's needs. The service regularly meets with health professionals to discuss people's health, care and treatment. The service is continuing to improve its management of medicines. People enjoy taking part in various activities and socialising with staff and other residents. People are encouraged to eat and drink well. Information and updates about people's health and well-being are shared with care workers during shift handovers and staff meetings. Audits are carried out to help identify any areas of practice that could be improved.

There are measures in place to help protect people from harm. The service acts upon any advice given by health and social care professionals. Care workers are visible to people and able to anticipate their needs. They understand how to keep people safe and respond promptly when safety alarms are activated. Staffing levels are increasing following a recent dependency audit. Managers are supporting staff to develop their roles. Staff have completed recent training in relation to safeguarding. The overall level of staff training and supervision is improving. People are confident in staff's abilities and feel comfortable speaking out about any issues. The RI is monitoring the management of the service closely.

People live in clean, comfortable accommodation that promotes their safety and well-being. Communal rooms are light and spacious and offer comfort. Their layout is practical and includes areas where care workers can supervise people in a non-intrusive way. Lounges are popular spaces where people can relax, socialise with others and enjoy entertainment. An ongoing programme of refurbishment ensures the home is decorated and furnished to a good standard. There are suitable maintenance arrangements in place to ensure the facilities and equipment are safe for use. The RI reviews the premises during formal visits and makes sure works are carried out if needed.

Care and Support

Standards of care and support have significantly improved. At the last inspection, we considered people's safety and well-being to be at risk as people were not always receiving appropriate care. We issued a Priority Action Notice requesting the provider take immediate action. During this inspection, we found that people receive the care and support they both need and want. People enjoy various activities and have opportunities to go on regular outings. Welsh speaking staff support people's Welsh language needs. People have good interactions with care workers, who are visible within communal areas. We heard much laughter as people enjoyed light-hearted conversation with them. One person said, *"They're all good here really"*. A relative commented *"They're marvellous"*.

Personal plans are adequately detailed and accurately reflect people's current needs. 'This Is Me' documents are being completed to provide a snapshot of people's care preferences and routines. Managers are working with staff to improve the quality of information recorded on monitoring charts and within daily records. This is to ensure they fully reflect the care being provided. Professionals have noted improvements in record keeping during recent visits. The service has made some progress with regards to arranging and recording care reviews with people and their representatives. This remains an area for improvement, which we will test at the next inspection.

People have access to the medical and specialist services they need. Care workers can discuss any concerns regarding people's care during weekly multidisciplinary team meetings. Records show the service follows advice given by professionals during safeguarding procedures. Care workers have a clear understanding of people's needs. They attend handover meetings between shifts to receive important information and updates about people's care. Care workers have received additional training to improve their knowledge and skills. Managers carry out clinical audits to monitor practice and ensure people are receiving the best possible care. Improvements to medication systems have been made following a recent medication audit. We found that people receive appropriate support with their medication, although more consistency is needed with regards to documenting the application of prescribed creams.

The service supports people to maintain a suitable diet. The home offers a varied menu and people can view photographs to help choose the meals they want. We saw care workers giving people the time and assistance they needed during their lunchtime meal, and they were aware of any specific precautions that needed to be taken. People appeared to enjoy their meals, which they described as *"good"*. We saw people being provided with their preferred drinks and snacks. Lists of people's dietary needs and preferences have been introduced as a quick reference guide for staff. Care workers monitor people's weight and generally make good, detailed recordings about their dietary intake. Managers carry out audits to ensure any concerns regarding people's weight have been acted upon.

Environment

People live in a secure environment where their right to privacy and dignity is upheld. We observed care workers supporting people in a dignified way. Care workers respect people's privacy when entering their individual rooms or bathrooms. Deprivation of Liberty Safeguards (DoLS) procedures are followed to ensure any restrictions people face are lawful. During the last inspection, we found that people had not been properly consulted about the use of surveillance cameras within internal communal areas, which was compromising their privacy and dignity. We issued a Priority Action Notice requesting the provider take immediate action. The service has since consulted with people and decided not to use internal CCTV cameras. The service uses surveillance cameras externally for security purposes. This is reflected within the service's CCTV policy and statement of purpose. Signs are in place to inform people about the home's use of CCTV. We can therefore conclude that the service is now meeting legal requirements.

The environment is clean, appropriately furnished and homely. Photographs and bilingual signs help people orientate to their surroundings. We saw people moving comfortably around their home. Staff make sure visitors have completed a negative lateral flow test before allowing them into the building. Hand washing facilities, hand sanitiser and personal protective equipment (PPE) are available and easily accessible. We observed private and communal rooms to be clean and furnished to a good overall standard. There have been some environmental upgrades since the last inspection, including new flooring in the reception area and fresh paintwork to some corridors and bathrooms. We observed some damage to a bedroom door and an area of the floor in one of the dining rooms. The RI assured us these would be repaired or replaced.

Health and safety measures are in place. The service has a maintenance officer who carries out routine health and safety audits, which the manager reviews. Staff are reminded about health and safety matters during staff meetings, such as how to store chemicals securely and request general repairs. People told us they feel safe during moving and handling procedures, as care workers support them with due care. We saw care workers responding immediately when safety equipment alarmed. Regular audits of the call bell system are carried out. People told us care workers generally respond promptly to their calls, although there have been occasions when their call bells have been left out of reach. Care workers need to be more vigilant in ensuring people have access to a call bell, as outlined within their personal plans. Records confirm regular servicing of moving and handling and fire safety equipment. The manager told us work is ongoing to address recommendations made following an update to the home's fire risk assessment. Gas safety and electrical installation inspections have been carried out within recommended timeframes.

Leadership and Management

The RI supervises the management of the service closely and ensures the home has the resources it needs to provide a safe, good quality service. A deputy manager and extra nursing staff have been appointed, which has eased pressure on the manager. The manager has received formal supervision from the RI and established an effective way of working with other members of the management team. Managers have implemented a clear system of audit to ensure good standards of practice are maintained.

The RI considers people's experiences during three-monthly visits to the home, setting and reviewing actions to improve the service. People told us they feel comfortable speaking out about their experiences. One person said, "*Staff are all friendly and pretty good at sorting out any issues*". However, many staff do not feel valued or supported by management and report that staff shortages are affecting morale. The manager told us extra staff are being recruited so overall staffing levels can be increased; a decision prompted by a recent dependency audit. The deputy manager will continue to provide leadership and direction to staff during care and management shifts. Staff attend regular meetings and we observed these to be interactive and informative. However, managers should consider engaging further with staff to try and improve morale.

The service has made progress with regards to staff training and supervision. Since the last inspection, all staff have received formal supervision or an annual appraisal. These have been scheduled at appropriate intervals to ensure legal requirements are met. Probationary reviews have also been implemented. Records show that staff can discuss people's care during their formal supervision and review their training and development needs. The supervision of staff remains an area for improvement, which we will test at the next inspection. The service's quality and compliance officer is monitoring and supporting staff to register with Social Care Wales. Managers are working with staff to develop their roles through formal and informal training. Staff have completed various training courses since the last inspection, including care planning, safeguarding, falls awareness and positive behaviour support. End of life training has been arranged and training courses in relation to nutrition and skin integrity are being explored.

Information about the home and its services is available but could be improved. The home has a statement of purpose and written guide that set out its aims and objectives and how these will be achieved. Overall, these documents accurately reflect the service being provided. However, they need to be updated and more detailed. The service should also ensure these documents are available in a format that suits the needs of the people living in the home.

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
25	The service installed cameras within communal areas without proper consultation with people, compromising their privacy and dignity. The service should encourage people to contribute their views about how the service is run.	Achieved
43	The service's CCTV policy has not been adhered to. The service installed cameras within communal areas without consulting with people.	Achieved
21	Care and support is not being provided in accordance with people's personal plans. The service is not being provided in a way that protects and promotes people's safety and well-being.	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
16	There is no evidence that reviews of personal plans are being carried out which consider the extent to which people's personal outcomes are being met and include the individual, their representative (if applicable) and the placing authority.	Reviewed
36	Staff are not receiving three monthly supervision and annual appraisals.	Reviewed
66	The responsible individual has not made suitable arrangements to ensure the manager receives the required supervision and training to assist them in their role. Challenges in relation to the recruitment of nursing staff have impacted on the management team's ability to effectively implement systems that support in the delivery of a good quality service that complies with the Regulations.	Achieved

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