



# Inspection Report on

**Gelli Aur Care LTD**

**Carmarthen**

## **Date Inspection Completed**

05/08/2022

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## About Gelli Aur Care LTD

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Gelli Aur Care LTD
Registered places	6
Language of the service	English
Previous Care Inspectorate Wales inspection	
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 a good service through dedicated managers and staff team. The Responsible Individual (RI) has oversight of the service. The service is monitored through quality audit tools and the RI's Regulation 73 visits.

People's individual health and wellbeing are important to those providing the care and support. People living in the service are at the centre of the service. Care and support records provide a good sense of the person, their needs and what is important to them.

The service provides a safe environment for people to live. There are appropriate infection prevention and control measures in place in line with Public Health Wales guidance. The service is well maintained with ongoing improvements being made. The rural location offers people a wealth of opportunities to learn new skills, hobbies and develop their knowledge.

## Well-being

People's choices and views are recognised. The RI seeks the views of people, their relatives and staff working in the service during their visits. Choices of meals and refreshments are offered according to their needs and preferences. People are able to participate in a range of activities, hobbies and interests they enjoy.

People are protected from the risk of harm and abuse. Staff speak caringly about the individuals living in the service and have a good understanding of people's needs and how to meet these. Staff interact with, and support people in a warm and thoughtful manner. Care records provide detailed information about the needs and preferences of people and provide a good sense of the individual. Staff are clear on their responsibilities to protect people and this is supported by policies, which are regularly reviewed and updated.

Appropriate infection control measures are in place and staff are clear about their role and responsibilities around infection prevention and control. The service is clean with no malodours and is well maintained. Recruitment measures ensure staff working at the service have the right skills and approach to care. The service liaises with health and social care professionals to ensure people remain as healthy as possible.

## Care and Support

Care records are detailed and provide a good picture of the individual, their needs and how best to support them. The care records include the use of a range of communication tools. Staff members are knowledgeable and speak enthusiastically about supporting individuals and working in the service. Staff told us; *“I get the biggest buzz when working with X (SU)”* *“this is a great place to work, so rewarding”*. Care records and associated risk assessments are regularly reviewed and updated when needed. Health and social care professionals are actively involved with people, and this is well recorded in their care records. There are appropriate measures in place for the safe storage, administration and recording of medication.

The service is working towards the requirements of the “Active Offer” of the Welsh language including having a member of the management team who is the Welsh Champion.

There are sufficient staffing levels in place to meet the care and support needs of people living at the service. Care workers respond to requests from people in a timely manner and interactions are friendly, respectful and unrushed. People told us they are happy with the care they receive and praised the care staff. One person told us; *“it’s lovely here, the staff are great”*. People and / or their representatives are involved in the planning, delivery and review of their care.

People can participate in regular group and individual activities that are important to them. Activities and hobbies are facilitated around the service and beyond. People’s interests and hobbies are encouraged and supported by the facilities in the service and the enthusiasm and commitment of the managers and staff.

The service promotes hygienic practices to reduce the risk of infection. Staff wear appropriate PPE and adhere to the current Public Health Wales (PHW) Guidance. The RI and managers have worked with Environmental Health and the Local Health Board to ensure the service is meeting its obligations around infection, prevention and control measures. Policies and procedures are in place to support good practice. Staff are clear on these, and their responsibilities around protecting people from infection.

## Environment

Arrangements are in place to minimise risks to people's health and safety. Testing and servicing of firefighting and moving & handling equipment are carried out within the required timescales. Substances hazardous to health are stored safely and communal areas are uncluttered. Entrances to some of the buildings are potentially a trip hazard. This has been raised with the manager and RI.

Infection prevention and control measures are in place, there are sanitation and PPE stations located throughout the service. COVID-19 testing procedures are in place for all visitors, who come to meet people at the service. There are thorough maintenance checks, servicing and audits in place. The environment is clean and free from malodours.

The environment supports people to achieve their personal outcomes. People enjoy living in comfortable surroundings with access to farmland and far-reaching views across the countryside. The main home (barn) and two lodges have been built to meet the needs of individuals. During the inspection we saw one bathroom being converted into a wet room to better accommodate a person needs who is due to move in shortly. In addition, there are several buildings and facilities available to support people's interests and hobbies. These include a quiet room, gym, activities room, small swimming pool, a games room with table tennis, pool, darts and a karaoke machine. There is also a new summer house in the grounds a vegetable plot and polytunnel.

Décor and signage throughout the service is designed to stimulate and assist orientation. People's homes are personalised with choices of colour scheme, items of furniture, ornaments, photographs, and artwork.

## Leadership and Management

There are good governance arrangements in place. The RI undertakes Regulation 73 visits to the service within the required timescales. CIW have received copies of reports that demonstrate people, their representatives and staff are spoken with as part of his visits to the service. Staff and people living in the service confirmed this with us. There are a range of monitoring tools and audits undertaken by the managers. Actions required from these audits are acted upon and reviewed regularly. The Statement of Purpose accurately reflects the service being provided and is updated to reflect any changes.

Staff are knowledgeable, valued and competent to care for people living in the service. Staff told us they feel well supported by the managers and the RI including *“the manager is brilliant, she is reasonable, respectful and approachable. She provides staff centred care and always says thank you to staff”, “the manager and deputy are brilliant, they go out of their way for you”* and *“the RI visits regularly always talks to staff and residents”*. Staff feel confident should they have a concern they can speak to a member of the management team and their concern would be listened to and addressed. Care workers speak very positively about working in the service including *“I love it here, staff are great, residents are lovely. It’s different to my previous job but I really enjoy it”*.

Staff records show they receive a good induction. This was confirmed by three staff members who were in the process of completing their induction. They told us *“the induction is intense, very thorough”* and *“It’s been great, staff and managers are very supportive”*. Staff have regular supervision and an annual appraisal. Managers feel well supported by the RI who is regularly at the service. Staff attend a range of mandatory and service specific training and the service’s training matrix corroborates this. Staff told us about the training they have attended and are able to demonstrate a good understanding of their role in the protection of individuals. Recruitment records hold all the required information and checks.

Staff follow appropriate infection, prevention and control measures and they are able to explain their responsibilities in reducing the spread of COVID-19. There are up to date and regularly reviewed policies and procedures in place to support staff.

### 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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