



# Inspection Report on

**Llanfair Grange**

**Llanfair Hill  
Llandovery  
SA20 0YF**

**Date Inspection Completed**

18/12/2023

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## About Llanfair Grange

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Parkmore Healthcare Ltd
Registered places	34
Language of the service	English
Previous Care Inspectorate Wales inspection	11/12/2022
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

People are happy living in Llanfair Grange and have the care and support they need. People and visiting professionals praise the care workers and the management of the service. Care workers have a good understanding and respect people's individual needs and choices. Care records provide a sense of the individual; however, these need to be kept updated to ensure they reflect the persons current care needs. The involvement of the person and/or their representative in their care planning and reviews needs to be better recorded.

The management team are respected by staff and are supported by the Responsible Individual (RI). The RI visits the service regularly and uses these and quality audit tools to ensure they have a good overview of the service.

The service offers people an environment which is welcoming and clean. Internal décor and furnishings help to support people to orientate independently, however, some improvements to the communal bathrooms and shower room are required.

## Well-being

People have their choices and views recognised. People personalise their bedrooms, choose their meal preferences and get up and retire when it suits them. Their views about the service are actively sought by the RI through their Regulation 73 visits and through questionnaires used to inform the six-monthly Quality of Care reports. People communicate and receive information in Welsh if this is their preferred language. The individual and /or their representative are involved in the planning and review of their care, however, this needs to be better documented.

People are safe from the risk of harm and abuse. Care workers are knowledgeable, well trained and care about the individuals living in the service. They also have a good understanding of people's needs and how best to meet these. Care records provide information about the requirements and preferences of people; however, these need to be kept updated to accurately reflect the persons current needs. The service liaises with health and social care professionals to make sure people remain as healthy as possible. People feel able to raise concerns about the service should they have the need to do so. There are effective recruitment, supervision and training procedures in place to ensure staff have the right skills, knowledge and approach to care. Consideration needs to be given to improve staff inductions. Care staff are clear on their responsibilities to protect people and are supported by regularly reviewed and updated policies.

In the main people achieve their well-being because of the environment. The improvement to internal decoration supports people to orientate around the corridors or to their bedrooms. Some work is needed, however, to make communal bathrooms and a shower room more welcoming for people to use and enjoy. The communal gardens offer a safe place for people to relax, meet visitors and socialise.

## Care and Support

People's individual care and support needs are recognised and understood. Care workers are knowledgeable about people's personal histories and their specific care needs and daily preferences. Whilst care records we looked at provide a sense of the individual, these should be kept updated to ensure they reflect the persons current care needs. The involvement of the person and/or their representative in their care planning and reviews needs to be better recorded. Accompanying risk assessments are regularly reviewed.

People speak positively about the care and support and living in the service; *"It's lovely here, I moved in before Christmas last year. I have no complaints at all, I am being well looked after", "I'm very happy in the home, the carers are great and the food is fine".* and *"the carers are very good and kind"*.

Health and medical professionals are involved in the care and support of people when required and this is documented in care records. On the request of the manager a GP visited an individual due to a concern about a medical condition during the period of the inspection. The GP told us *"I am happy with the service, there are no issues. The carers and manager report issues appropriately. The carers know the residents and appear kind when I have visited. I think the residents are well cared for"*.

Care staff interact very kindly and warm heartedly with people. A number of the staff team speak to people in Welsh if this is their preferred language. Activities play an important part in people's routines and photographic displays of people involved a range of activities are displayed in communal areas.

People are able to choose when to get up and retire and this is clearly recorded in people's care and support plans. There are always a range of meal options and bilingual information is readily available. People told us *"the food is very tasty – I know there are different options if I want anything different"*.

People feel safe. People told us they feel safe living in Llanfair Grange and are able to raise concerns if they need to *"I know I can speak to [Manager] if I was unhappy about something"*. There are policies and procedures in place for the safe handling of people's personal monies.

## Environment

The risks to people's health and safety are minimised. All visitors are required to sign in and out of the service. There are a range of maintenance checks and audits undertaken. Testing and servicing of firefighting, moving and handling equipment are completed within the required timescales. Personal Emergency Evacuation Plans (PEEPS) are individualised and readily available. There are restrictors in place on the first floor windows.

Communal areas and emergency exits are uncluttered and free from hazards. Substances harmful to health (COSHH) are stored safely. Keypad entry systems are used where considered required. Emergency alarms are accessible for people to use and are responded to in a timely manner. The service is clean with no malodours.

People are supported to achieve their personal outcomes. Bedroom corridors are decorated and personalised to support orientation around the service. There is a picture of the person or an image which represents them on their bedroom doors. Bedrooms are personalised according to people's choices and preferences. One person told us *"I like sitting in my bedroom it's very comfortable"*. There are bilingual / pictorial signs throughout the service which help people to orientate around the communal areas. Some windows have been replaced which helps to brighten communal corridors

Contrasting coloured seats and handrails in the communal toilets support people to use the facilities. Whilst communal bathrooms are clean, they appear "clinical" and not very welcoming or homely for people to use and enjoy a bath. The lighting in a communal shower room is very dim and could contribute to people falling or tripping. These points have been discussed with the manager and RI.

Communal gardens with scenic views over the local countryside are available for people to use and offer a number of areas for people to sit and socialise with friends and family when the weather permits.

## Leadership and Management

People can be assured there are appropriate governance arrangements in place. The RI is in regular contact with the service and has undertaken Regulation 73 visits. CIW have received copies of the reports, which demonstrates they speak to people and staff as part of the visits to the service. Staff and people confirmed this with us. There are a range of monitoring tools and audits undertaken. Actions from the audits are acted upon and reviewed regularly.

There are good recruitment and selection processes in place. The correct clearances and checks are undertaken and documented before staff commence employment. Whilst staff have an induction on commencing in the service, this should be in-line with the Social Care Wales framework. This has been discussed with the manager and RI.

People are cared for by a skilled, well trained and valued staff team. Care workers have a good understanding of the people living in the service and are able to provide details about the individuals in their care and their particular care needs. Care workers told us they attend a wide variety of training courses, and this is corroborated by reading the staff training matrix.

Care workers show a good understanding about their responsibility to protect the people living in the service and to report any concerns. People are moved and handled safely, and their individual needs considered. Care workers receive regular documented supervision and an annual appraisal; the staff we spoke to confirmed this. In the main, supervision records are in order, however, the reasons for any gaps in supervisions should be recorded.

Care workers speak positively about working in Llanfair Grange and the support they get. They told us *“the manager and deputies are very approachable, they have an ‘open door’ policy”, “I am thoroughly enjoying the role. I’m well supported by manager and RI (they are always at the end of a telephone if I need them)”, “the manager and deputy are very approachable, you can speak to [manager] about anything, she is so caring” and “I have met RI a couple of times, he always asks how we are”.*

There are policies and procedures in place which are reviewed regularly. The Statement of Purpose reflects the service being provided and CIW are appropriately notified of incidents.

### 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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