

Inspection Report on

Glanmorfa Care Home Ltd

52-54 Station Road Kidwelly SA17 4UR

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

9 November 2021

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About Glanmorfa Care Home Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Glanmorfa Care Home Ltd
Registered places	24
Language of the service	Both
Previous Care Inspectorate Wales inspection	
Does this service provide the Welsh Language active offer?	This is a service that is working towards providing an 'Active Offer.'

Summary

Glanmorfa Care Home has a relaxed atmosphere that helps people and visitors feel at ease. Care workers are enthusiastic and strive to make a positive difference to people's lives: they know people well, interacting in a kind and caring manner. Care records clearly describe how care workers are to meet people's individual needs. The home keeps each person safe by the use of robust infection control measures.

An established management team continually strives to develop people's support wherever possible. The Responsible Individual (RI) is regularly available to talk to people who live in the home, their relatives, other healthcare professionals and care workers to obtain feedback about the service provided. Auditing systems monitor the quality of care people receive and senior staff take prompt action to address areas that require improvement.

The provider has been proactive during the pandemic, keeping people in the service and care workers healthy by the use of safe practices. A small maintenance team maintains the home to a high standard. Care workers say they feel supported by the manager and receive regular individual supervision to discuss their work. There is a wide range of staff training available to help care workers support people safely and effectively.

The manager invites people to voice their opinions on many aspects of their lives, such as food menus, activities and décor. Keyworkers regularly take time to talk to people about their preferences and people say care workers really listen to them. People are encouraged to maintain good relationships with relatives and friends: during the pandemic, the home supported people via a range of means to keep in contact with others who are important to them, including the adaptation of a room for safe visiting. Life histories describe what is important to people and personal plans clearly describe each person's support needs. This means people receive the support they want. However, the manager cannot currently show people and/or their representatives are involved in care plan reviews. The manager agrees they need to evidence this is happening and intends to change the way these processes are documented. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

Care workers are aware of the importance of each person's well-being. There is good sharing of communication within the team and senior staff make prompt referrals to healthcare professionals such as doctors and district nurses when necessary.

The provider is working towards the Active Offer of the Welsh language: this means being proactive in providing a service in Welsh without people having to ask for it. Many people in the home are Welsh-speakers and several staff members speak Welsh. The manager is currently looking into ways to develop this, such as the possibility of having the home's statement of purpose and service user guide translated into Welsh.

The provider considers a range of information to ensure they can meet people's needs before admission to the home. This includes obtaining information from relatives and external healthcare professionals such as social workers. From this, senior staff develop care records that describe people's support arrangements and requirements. However, it is currently difficult to see that senior staff regularly review each person's care plans. The manager agrees they need to evidence this is happening and intends to change the way these processes are documented. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

People receive support as described in their care plans. It is clear that people can follow their own routines as they wish and feel the staff team support them well. People say, *"The staff are wonderful," "nothing is too much trouble for them"* and *"they're always around when you need them."* Other people say the care workers in the home are *"kind"* and *"respectful"*. People say they like the food, can choose alternatives if they do not like what is available at the time and are regularly offered drinks and snacks.

As far as possible, the provider takes appropriate steps to safeguard people from neglect and abuse. Care records clearly state any risks to people's health and well-being, and detailed risk management plans help to keep people safe and as independent as possible. Care workers recognise their personal responsibilities in keeping people safe. They are aware of the whistleblowing procedure and are confident to use it if the need arises.

The home promotes each person's safety at all times. There are detailed policies and procedures to manage the risk of infection and good hygiene practices throughout the home. Care workers may refer to infection management policies whenever necessary. All measures are in constant use to ensure people are safe from Covid-19 infections, including the monitoring and testing of all visitors to the home. Although the home generally stores cleaning products securely, we noted some people had left their toiletries in a communal bathroom for anyone to potentially misuse. The manager will look into why this is happening and intends to make sure people keep their toiletries safely in their rooms when not in use. While no immediate action is required, this is an area for improvement and we expect the provider to take action.

Environment

People receive support in a homely and pleasant environment. The home is safe, warm and clean and people say they feel comfortable and happy living at Glanmorfa Care Home. People live on either the ground floor or first floor of the building. There is a lift as well as stairs available for people to access different areas if they choose. Bedrooms are spacious and personalised to reflect the occupant's taste and interests, with items such as ornaments, soft furnishings, photos and items of furniture. Facilities and equipment promote each person's independence as much as possible: there are adapted bathrooms and wide corridors throughout the premises to help people with reduced mobility. There is also a hydrotherapy pool on the premises for people to use when they wish.

People are able to choose where to spend their time, be it in their own rooms or with others in communal areas. We noted that people had grouped themselves in one small lounge area, while another more spacious lounge was unoccupied – the manager explained that they had tried everything to encourage people to use the other lounge but on each occasion, they had all returned to the small lounge. People are happy here and like to see care workers and visitors come and go throughout the day. However, the staff team continues to persevere with this, for example, having entertainers use it when they visit.

People are safe from unauthorised visitors entering the building, as all visitors have to ring the front door bell before gaining entry and record their visits in the visitor's book when entering and leaving. Care records are kept securely in an office, and only available to authorised care workers. Employee personnel records and Deprivation of Liberty Safeguards (DoLS) records are securely stored in a locked office.

Clear infection control procedures are in place and care workers use all relevant PPE when providing personal care. Two maintenance people check equipment monthly. Fire exits are free of obstructions and maintenance records evidence weekly fire alarm tests. Maintenance safety inspections are carried out within the recommended timeframes and there are clear instructions displayed in the home on what to do in the event of a fire.

Overall, the provider has a clear vision of the support it provides, and a positive regard to each person receiving support. During this year's pandemic, the RI and other senior staff have maintained regular contact with people in the home and the staff team. Regular discussions have taken place with peoples' family members and professionals involved in their care. Regular audits monitor all aspects of people's care, including medication, infection control measures and record keeping. Any issues that arise are resolved in a timely manner.

The provider ensures there are enough knowledgeable and skilled care workers to provide the right support for people. Pre-employment checks take place before new employees start work - these include reference checks, photo identification and Disclosure and Barring Service (DBS) checks. The staff induction programme links to the 'All Wales Induction Framework for Health and Social Care.' Care workers undertake specific training relevant to the people they support, including dementia awareness. Regular staff meetings give care workers the opportunity to discuss their work and to keep up-to-date with developments in the service. All audits findings are summarised in six-monthly quality of care reports, which identify actions and planned improvements for the service. In addition, employees may discuss any issues they wish to raise in three-monthly supervision meetings.

People and relatives say they feel safe. Care workers treat people with dignity and respect. When people first come to the home, they have a service user guide that describes what they can expect from the home as well as details of the complaints process should they need to use it. People say they know how to make a complaint if they need to and are confident the manager would listen to them if they did. One person said, *"No, I've never needed to complain. It's all so good here and the staff are absolutely wonderful."* Care workers have regular safeguarding training updates and are aware of current best practices. They told us senior staff members support them well and are always available for advice if necessary.

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

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	Not easily evidenced that care records are being reviewed 3-monthly - or that people or	New

	their representatives are included in the reviews.	
16	Not easily evidenced that people and/or their representatives are involved in care plan reviews.	New
44	Toiletries left in a communal bathroom for anyone to potentially misuse.	New

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