



Inspection Report on

Glencoe Villa

Penmaenmawr

Date Inspection Completed

10/05/2022

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About Glencoe Villa

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Inspired Homes Network Ltd.
Registered places	3
Language of the service	English
Previous Care Inspectorate Wales inspection	21 September 2019
Does this service provide the Welsh Language active offer?	No. This is a service that does not provide an 'Active Offer' of the Welsh language. It does not anticipate, identify, or meet the Welsh language needs of people /children who use, or intend to use their service.

Summary

People are settled in a home that meets their needs. They are supported to take part in activities they enjoy, and they build on their interest and hobbies. The home is homely and welcoming. People can choose to spend time in their individual living accommodation or socialise in the shared living space. Care staff know those they work with well, they are familiar with their roles and responsibilities, enable those they care for to achieve positive well-being.

Personal plans provide care staff with information about how to meet people's needs. There is some evidence the plans are reviewed and updated. The manager gathers the required information about the people who live at the service, but this is not always available before someone moves to the service.

The home is maintained to a good state or repair and maintenance work is completed in a timely manner. The responsible individual visits the service regularly and he has oversight of the day to day running. There are clear lines of accountability, and the manager is fully supported. Improvements have been implemented since the last inspection showing the service has made progress.

Well-being

People benefit from individual support, which helps them to have opportunities and experiences they enjoy. Person centred care means individual routines are consistent, providing people with control over their day-to-day life. Consistent support means care staff understand and know those they are caring for well. Care staff spend quality time with those they care for, they chat and laugh whilst going about their daily tasks.

People regularly spend time taking part in activities they enjoy, either in the home or out in the community. When needed, additional staff are used to support participation in specific activities, this allows people to do things that are important to them. The manager works with outside agencies to access suitable activities, choices are presented to people, and they decide whether they want to participate or if they want to choose an alternative activity. Changes in behaviour are recognised, meaning they know when something is wrong and when changes are needed to an individual's care.

People access appropriate services to support their health. They are supported to access medical appointment and any changes in health needs are monitored and appropriate arrangements made to see GP. Meals are planned and tailored to individual preferences and needs. People are safe and protected from abuse and neglect. They have an open and supportive relationship with those caring for them, they confidently ask for what they want and raise any issues or concerns freely. Care staff have attended up to date safeguarding training meaning they are familiar with the process to follow should they have any concerns needing to be taken forward.

People benefit from consistent relationships, and they help care for the resident dog. There is a sense of belonging, they spend time together, but they are also encouraged to follow their own interest to maintain their happiness and security. Visitors are welcomed, with records of some family members visiting regularly. Care staff have access to a company vehicle meaning people can visit places of interest in the community. The environment supports independence and helps people to achieve well-being. Individual living accommodation provides privacy and space to reflect individual interest, and communal areas allows for socialisation and group activities.

Care and Support

The manager is in the process of reviewing and updating the format of all personal plans. Personal plans already updated are user friendly and contain current information, this enables care staff to care for the people in line with their individual care needs. Personal plans are being reviewed; however, this was not being completed consistently for all those living at the service. Additionally, provider assessments had not been completed, meaning there was not a document available that builds on the information available about those being cared for. Meaning they fail to recognise and review changes in care needs following a significant change or incident.

When placements are accepted it is evident the manager has gathered information about people and know them well. However, there is limited evidence the admission process is followed. There was no evidence there had been an assessment of individual needs and how the service would aim to meet identified needs. Neither was there an assessment to consider the compatibility of all those living at the service. We did not see this as having and adverse impact on people' needs, but it is expected that the issues above are addressed before the next inspection.

The manager has clear oversight of individual needs, care staff are supported to provide meaningful and tailored care which supports people to reach their full potential. The care staff recognise what people in their care need to help them feel settled and secure. This is a major factor in contributing to the homely feel within the home. If suitable, care staff encourage participation in community activities and personal hobbies, and where suitable they develop independent living skills. When needed, external professional advice is sought and health and safeguarding referrals are completed in a timely manner, with the manager advocating on behalf of people.

The service has systems for medicines management, and new Medication Administration Records (MAR) have been ordered. Medication is securely stored, and regular audits are carried out by the manager to make sure people's medication is stored and administered safely. It is not always possible for a double signature to be provided in the controlled medication book because of how the service is staffed and this was discussed with the manager. Care staff access medication training and they have had a review of their knowledge, skills and competencies relating to managing and administering medicines.

Environment

The premises are suitable, and the design and location are consistent with the statement of purpose. Each person has the use of one floor of the premises, providing them with their own rooms for sleeping, ensuite and living room. A communal kitchen is located on the ground floor with a separate room with resources available to use the space as a sensory room. Individual spaces are decorated to personal taste; furniture and equipment are made available to support additional needs.

The outside area allows for group activities and is secure. A consistent system for monitoring and auditing on-going works enables the maintenance of the property and any immediate repairs required are completed promptly, thus supporting the safety and well-being of those living at the property.

The property is secure, and people have access to secure storage to keep personal belongings. Communal spaces are welcoming, light, and airy. There are spaces available for private discussions, and care staff have access to an office.

The service provider ensures the premises comply with current legislation in relation to health and safety. External agencies have completed fire risk assessments and identified work has been completed ensuring the safety of the property. Additional precautions are being taken in response to Covid-19. A covid-19 risk assessment outlined what needed to be done to maintain safety and reduce the risk of spreading infection.

Leadership and Management

The manager oversees the day to day running of the service. The Responsible Individual (RI) visits the care home regularly, meaning personal knowledge is gathered about people. By working together, the RI and manager implement improvements and achieve positive outcomes for the people. Clear lines of accountability enables efficient working, and consistent staffing arrangements provides security and stability. Care staff are familiar with people they are caring for, enabling individual needs to be recognised and met.

Policies and procedures provide information about the service and how it operates, they are currently being reviewed to ensure they are current. The statement of purpose provides an accurate picture of the service, and what people can expect to receive. The updated document is shared in line with regulations. Consistent quality review processes mean the service provider monitors the progress made and this informs future improvements. Feedback is an integral part of the review process, the views of people are gathered, with evidence of what they have done in response to feedback received.

The service provider employs skilled and experienced staff. They follow a thorough vetting system at the start of a new employment. Training is relevant to care staff's role, and mandatory training is completed within timescales. The service has accessed virtual training during the Covid-19 pandemic. Improvements since the last inspection mean care staff receive regular supervision and annual appraisals. Consistent team meetings provide a forum for discussions and the sharing of updated policies and procedures.

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	The inspection found that Personal Plan's were not being reviewed every 3 months as is required by regulations. The service was failing to review whether individuals had achieved their personal outcomes, and plans were not being updated to	New

	reflect their current situation.	
18	Regulations require that services complete a provider assessment within 7 days of the start of any placement. This assessments is to be made available and reviewed and updated if there are significant changes. The service had not been completing provider assessments for the individuals living at the home.	New
14	The service provider has not documented and evidenced that pre-admission assessments have been completed. They have failed to evidence they have assessed the individuals needs and conclude how their service will be able to meet the needs of the individual. They have failed to consider how the admission is compatible with individuals already resident at the home.	New
79	The service provider has not reviwed and updated policies and procedures to make sure they are relevant and current for the service.	New

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