



Inspection Report on

Glascoed Ltd

**149 Conway Road
Colwyn Bay
LL29 7NA**

Date Inspection Completed

05/12/2022

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About Glascoed Ltd

Type of care provided	Care Home Service Adults Without Nursing
Registered Provider	Glascoed Residential Care Home Limited
Registered places	10
Language of the service	English
Previous Care Inspectorate Wales inspection	27 January 2020
Does this service provide the Welsh Language active offer?	This service does not provide an 'Active Offer' of the Welsh language and does not demonstrate a significant effort to promoting the use of the Welsh language and culture.

Summary

There is good oversight of how the service operates. The responsible individual (RI) is also the manager of the service and currently applying to register with Social Care Wales. A range of audits and oversight by the RI ensures the smooth operation of the service. Staff receive a good range of training and regular supervision to ensure they are competent and skilled.

People spoke very highly of the care provided and they receive timely care to ensure they can remain as healthy as possible. People's personal plans contain detailed information about the support they receive, and care workers provide care in a respectful, warm, and patient manner. People are supported in a well-maintained environment, which has good health and safety measures in place. Attention is given to ensuring the environment is clean and homely.

Well-being

People have choice and control over the care and support they receive and how they spend their daily life. We saw people have good relationships with care staff and exchanged banter, and that care staff knew people well. The RI is in the home most days a week and told us he makes a point of speaking with everyone daily. People have a choice of meals and told us the food choice is good and meals are all homemade. A choice of different meal is offered if they do not like what is on the menu. People's rooms are personalised to their own liking with their own pictures, and personal items that are important to them.

People's physical and mental health and well-being are looked after by care staff who respond in a timely manner to their needs. Personal care plans are detailed and include clear instruction in how all aspects of people's daily living are met. Different activities are available for people to participate in. We saw one person knitting and another looking forward to watching the World Cup. Staff make referrals to other healthcare professionals as required. There is documented evidence in care files of support from other professionals such as GP and dietician.

The home meets people's needs and is a welcoming and friendly environment. People told us they are happy with their rooms, and they feel at home at the service. Personal touches such as photographs and ornaments are displayed for people to remember and reflect on important aspects of their lives. The environment is warm, clean, and spacious. Regular audits of the environment are carried out to ensure the service is safe.

The registered provider has processes in place to protect people from abuse and neglect. Care staff are trained in safeguarding and follow policies put in place to protect people from harm, neglect, or abuse. Access to the service is secure and a log of visitors to the home is maintained. People told us that they feel safe in the home and would talk to the manager/RI care workers if they were worried or upset about anything.

Care and Support

People are happy with the care they receive and are supported by a caring and committed staff team. Care staff have worked in the home for many years and people said they liked living in the home and got on very well with all the staff. We observed people are treated with respect and care. Care staff encouraged people's independence and spoke with them in a positive manner. They sat and chatted with them whenever there were opportunities to do so and took an active interest in what they were saying.

People are supported to have choice and control as far as practically possible. A 'this is me' document is completed for every resident which informs staff of people's personal wishes, aspirations, hobbies, interests, and past lives. There is a varied menu for people to choose from and people told us they like the food. An alternative of meal is available if someone does not like what is being served. People can stay in their rooms or use the communal lounge if they wish to. We observed staff supporting people and could see it was individualised and that care staff were passionate about providing person centred care.

People are supported with their physical, mental health, emotional and social well-being. Personal plans are in place and reviewed as and when required, at least every three months. Health and social care professionals are liaised with such as the district nurses, chiropodist and GP's, when required, to seek further information and advice to ensure people are provided with the best possible care and support. There is a variety of group and one-to-one activities available within the home and in the wider community, which enables people to be involved in activities that matter to them. Staff promote people's independence and encouraged them to do as much for themselves as possible.

There are procedures in place to safeguard people. People told us they could approach management or staff if they were worried about anything. Staff receive appropriate training and have access to policies and procedures in relation to safeguarding and whistleblowing. Individual risk assessments are in place, which provided clear guidance to staff on the steps required to mitigate the risks to the person's well-being.

Environment

People live in accommodation that is suitable for their care and support needs. People can arrange their rooms to their liking, and we saw people had personalised them to varying degrees with their own items of furniture, pictures, ornaments, and memorabilia. The outdoor space consisted of a well-maintained lawn, ample seating areas and a patio area which are complimented by an array of shrubbery. We saw that the home is clean, and a weekly cleaning schedule is kept. Records document all areas of the home are cleaned on a regular basis. We saw the décor and furnishings helped to make it feel a natural, homely environment for the people living in the home. People we spoke with are happy with the home's décor and made positive comments about its cleanliness.

People can be assured they live in a safe environment. We were unable to enter the premises upon our arrival as it was secure and safe from unauthorised access. Entrances are locked and our identification was checked, and the RI requested we signed the visitor's book. We saw evidence of regular fire safety checks being carried out on a weekly and monthly basis. We viewed records confirming the PAT testing record of electrical appliances, personal emergency evacuation plans (PEEPs), servicing of the fire alarm system and equipment checks have been completed on a regular basis. All control of substances hazardous to health (COSHH) materials are stored correctly, in line with the required regulations. Environmental audits are regularly undertaken, with any hazards identified addressed. The lift is currently out of use and awaiting repair, in the meantime a temporary stairlift has been installed to enable people with mobility difficulties to access their rooms on the upper floor.

Leadership and Management

People can be sure that the quality-of-care review is embedded in the operation of the service. The RI is also the manager of the service and present in the service on a daily basis, and currently applying to register with Social Care Wales. People complimented the care being provided and stated they had been warmly welcomed by the staff team and others residing at the home. The quality assurance report had been completed and shows that people's views have been obtained. It highlighted the positive aspects of the service provided and how the home intended to address areas for improvement. An extensive range of audits are carried out such as medication and environment to ensure all aspects of the service are monitored and reviewed. Notifiable events are not being submitted to the regulator in a timely manner however, this was addressed during the inspection.

People are supported by an established staff team who have worked at the service for many years. Staff are supervised and supported to make positive changes in the home. Supervision records show care workers had just received formal supervision sessions; however, this should be completed on a consistent basis. We noted that there is adequate number of staff on duty and very low turnover of staff, which is beneficial for the people supported. The RI is present in the home on a daily basis to provide support and care.

Staff are safely recruited and have access to varied and regular training. Staff files show pre-employment checks are completed and found to be satisfactory, however, some staff Disclosure and Barring Service (DBS) checks had expired. This is important information, which registered providers must have in place for all persons working in the home. The RI gave reassurances immediately after the inspection that every staff member DBS had now been applied for. We viewed the staff training record and saw numerous and varied training opportunities had been completed such as food hygiene safety, medication, infection control and dignity and respect.

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
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N/A	No non-compliance of this type was identified at this inspection	N/A
68	Regulation 68 (1) - the RI must appoint a manager who is registered with Social Care Wales.	Achieved
80	Regulation 80 - The RI must establish and maintain a system for monitoring and improving the quality of care and support and review this at least every six months.	Achieved

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