



Inspection Report on

Glangarnant Care Home

**Glan Garnant
Neuadd Road
Ammanford
SA18 1UF**

Mae'r adroddiad hwn hefyd ar gael yn Gymraeg

This report is also available in Welsh

Date Inspection Completed

19/06/2024

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About Glangarnant Care Home

Type of care provided	Care Home Service Adults With Nursing
Registered Provider	Arkash Management Consultants Limited
Registered places	42
Language of the service	Both
Previous Care Inspectorate Wales inspection	20 September 2022 & 21 September 2022
Does this service promote Welsh language and culture?	This service anticipates, identifies and meets the Welsh language and cultural needs of people who use, or may use, the service.

Summary

People have positive experiences at Glangarnant Care Home. They receive warmth and kindness from a stable team of friendly, motivated care staff. People take part in a range of activities and enjoy socialising with others. Care staff respect people's individual routines and preferences. Personal plans are up to date and outline how people need and want to be cared for. The home has good connections with health and social care professionals, which promotes people's health and well-being.

The environment is safe and has appropriate facilities to meet people's needs. Internal and external areas are frequently upgraded. The central garden has recently been developed and includes many interesting, stimulating features. The premises is clean and well-maintained.

People have a say in how the home is run. The manager and responsible individual (RI) value people's views and take action to improve the service where necessary. There is a positive culture throughout the staff team, which contributes to the home's calm and inviting atmosphere. Staff feel content and respected in their roles. They are safely recruited and have the knowledge and skills to meet people's care and support needs.

Well-being

People know what to expect from the service. They are given information in an appropriate format to allow them to make decisions. One person told us *“I picked this place because it’s right for me”*. Care staff understand what is important to people and how to communicate with them effectively. The Welsh language is actively promoted. People are invited to meetings where they can influence decisions which affect them, such as menu changes. Their views about the service are sought by the RI during formal visits and quality-of-care reviews. Family and friends receive a warm welcome to the home and are also invited to share their views. The manager deals with complaints promptly and appropriately.

People experience physical, mental and emotional well-being. They spoke highly about their experiences at the home. One person said, *“I’ve got nothing but absolute praise for these people... I’d give it twenty out of twenty”*. People enjoy meaningful interactions with care staff, who are kind and attentive to their needs. One relative commented *“They truly are marvellous here; I can’t fault them at all”*. Care staff work closely with health and social care professionals to ensure people receive the best possible care. Risk assessments and personal plans are regularly reviewed and updated. People have things to look forward to, such as parties and outings to local clubs. Care staff offer regular drinks and snacks to support people’s health and nutrition.

There are systems in place to help keep people safe. Service standards are continuously monitored through internal systems of audit. These help to identify risks to people’s safety and well-being, along with aspects of the service that could be improved. The manager takes action to improve the service following advice from various agencies and professionals. There is continuous investment in the service and the RI oversees the running of the home effectively. Staff are recruited, trained and supervised appropriately. The home has enough staff to ensure people receive appropriate, responsive care. The home and its facilities are safe and properly maintained.

People live in pleasant, comfortable accommodation. They are benefiting from various internal and external upgrades. People are pleased with their individual rooms and enjoy socialising and relaxing with others within communal lounge and dining areas. Many rooms offer views of the attractive garden. The home uses a weekly minibus service to enable people to spend time in the community.

Care and Support

The service carries out assessments to ensure the home is suitable for people before they move in. People are also given written information, which is offered in both English and Welsh. A statement of purpose and written guide explain clearly what the home sets out to provide and how. These are well presented, informative documents. One person said, *“I thought it sounded too good to be true but it’s very accurate”*. Care staff communicate with people effectively, using pictures if needed to help people make decisions. We heard people frequently conversing in Welsh and English.

People are involved in developing and reviewing their personal plans. These identify how care staff can safely meet people’s care needs and preferences. People’s interests and backgrounds are reflected in detailed ‘Me, Myself and I’ documents. People and/or their representatives are invited to review care and support arrangements every three months. The manager is working with staff to ensure these reviews are logged in a consistent way. Personal plans are adjusted as needed so they accurately reflect people’s current needs. The service follows Deprivation of Liberty Safeguards (DoLS) procedures to ensure people are not unlawfully restricted.

People receive a good standard of care and support. Care recordings and supplementary charts show that people receive the right level of care, as outlined within their personal plans. Care staff encourage people to do things for themselves, but also recognise when they need assistance and provide this in a dignified, respectful way. People told us *“Nothing is too much trouble”* and *“All the carers are very good; very gentle and patient”*. Care staff meet with professionals from local health services every week to discuss and address any concerns regarding people’s health and well-being. People told us the manager arranges visits from the community optician and dentist, which they benefit from. People receive appropriate support at mealtimes and are offered regular drinks and snacks. Records show that people consistently receive their prescribed medication. We saw that medicines are stored and managed safely.

People enjoy life at the home. They have control over their day-to-day activity as care staff support their individual routines. People spoke affectionately about care staff. One person said, *“They’re unbelievable”* and their visitor confirmed *“This is a lovely place. They really are so kind and caring”*. We heard much laughter and free-flowing conversation, with many jokes being shared. People are offered activities of interest, including pet therapy, film afternoons, live entertainment and weekly bus trips. Mealtimes are unrushed, sociable occasions. People can choose from a varied menu, which is available in written and picture format. They help develop new menus during resident meetings.

Environment

The home is warm and inviting and has many homely touches. For example, a photograph slideshow of people enjoying various activities is on display in the reception area. A noticeboard also promotes Welsh words and phrases. All bedrooms and communal areas are provided at ground level. Handrails and colour contrasts help people move freely and safely along corridors. The location and layout of rooms has been carefully considered for those at risk of social isolation. Many have windows facing the central garden, providing a pleasant outlook. Private rooms reflect who people are, with many containing treasured items. The garden has recently been developed and has some interesting features, including various plants and flowers, ornaments and water fountains. New garden furniture has also been bought for the newly laid patio. Raised flowerbeds enable people to grow and tend to herbs and plants. People told us they enjoy their time in the garden and often watch the birds at the strategically placed birdfeeders.

The home is safe and well-maintained. There are effective maintenance arrangements in place to ensure repairs are carried out promptly. Records confirm that equipment and utilities are safe and have been serviced and inspected within recommended timeframes. The manager monitors environmental standards during internal audits, and these are also reviewed by the RI during formal visits. We saw that chemicals are stored securely, and hazardous areas are restricted. Care staff ensure people have access to a call bell should they need to request assistance. Personal emergency evacuation plans (PEEPs) can be accessed quickly. Fire safety equipment is checked routinely, and staff regularly practise fire drills. They also complete mandatory training in relation to fire safety, first aid and the Control of Substances Hazardous to Health (COSHH).

The home promotes good standards of hygiene. We found private and communal rooms to be clean and tidy throughout. Cleaning schedules ensure all areas are periodically deep cleaned. Shower rooms and toilets are accessible and new equipment has been purchased to better support people when showering. There is one bath available, although few people can access this easily and comfortably. The RI acknowledged that replacing the bath with an alternative one would give more people the choice of having a bath or shower. The manager has taken action to address recommendations made by Environmental Health officers. We observed a good supply of personal protective equipment (PPE), which staff use appropriately. The home received a food hygiene rating of 4 (good) in April 2024. All staff complete training in relation to food hygiene and infection control.

Leadership and Management

The home benefits from strong leadership and management. The manager has instilled a positive culture within the service. People's well-being is prioritised, and staff feel valued and supported in their roles. We found morale to be high, as many staff spoke proudly about the strong sense of teamwork and consistent leadership. One person told us the manager will *"always acknowledge you"* and a staff member said, *"If you've got a problem, you go straight to her and she sorts it"*. Staff attend regular meetings to discuss their role and responsibilities. They feel comfortable speaking out during individual and group meetings. The frequency of staff supervision and appraisal meetings has increased to meet legal requirements. These meetings allow staff to reflect on their performance and relationship with the people they support. Meetings for residents and relatives are also arranged, allowing people to influence decisions regarding home life.

People experience good continuity of care. The service has a stable team of staff, with absences covered by other team members. Rotas show that staffing levels are maintained in line with the home's statement of purpose. Staff told us they have some flexibility with shift patterns and there are enough staff during the day and night to provide the level of care people need. Recruitment procedures are robust and include a check by the Disclosure and Barring Service (DBS). This ensures people are cared for by a suitable workforce. Staff complete an appropriate induction programme and are supported to register with Social Care Wales. They are satisfied with the quality of their mandatory and specialist training, describing it as *"very good"* and *"constant"*. Staff training and development needs are discussed during supervision and appraisal meetings.

The quality of the service is closely monitored by the manager and RI. Monthly clinical audits help the manager identify and reduce risks to people's health and safety. The RI also considers the outcome of internal and external audits during formal visits and quality-of-care reviews. These result in actions being set to improve the service. The manager takes prompt action to address recommendations made by various agencies. One professional described the manager as *"very passionate"* and *"hardworking"*. The manager responds to complaints in line with company policy, although the current filing system makes it difficult to confirm actions and outcomes. The manager agreed to address this. Findings from recent quality surveys show that people have positive experiences at the home. We saw many cards and letters thanking staff for the care they have provided.

There is clear investment in the service. Staff vacancies have been filled to ensure the home operates with adequate staffing resources. The home also benefits from continuous environmental upgrades. For example, new kitchen cabinets have been fitted in one dining room, improved fire safety systems have been installed and bedroom floors are gradually being replaced. There are also plans to renew the flooring in one dining room and level the garden paths to make the patio area more easily accessible.

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
16	There is no evidence that reviews of personal plans are being carried out which consider the extent to which people's personal outcomes are being met and include the individual, their representative (if applicable) and the placing authority.	Achieved
36	Staff are not receiving three monthly supervision and annual appraisals.	Achieved

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