



Inspection Report on

Glanmorfa Supported Living

**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

16/07/2024

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About Glanmorfa Supported Living

Type of care provided	Domiciliary Support Service
Registered Provider	Glanmorfa Care Home Ltd
Registered places	0
Language of the service	Both
Previous Care Inspectorate Wales inspection	13th March, 2023
Does this service promote Welsh language and culture?	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

Glanmorfa Supported Living is a person-centred service providing care which enables people to live happy, healthy and increasingly independent lives. People speak positively about the service. The service centres on what matters to people. A consistent staff team are knowledgeable about the people they support. A new manager has recently commenced working at the service.

An area for improvement has been identified regarding oversight and governance of the service. Whilst no immediate actions are needed, we expect the provider to take action to address this.

Well-being

People speak very positively about the service and the care and support they receive. People meet their personal outcomes and increase their independent living skills because they receive personalised support from a service which values the uniqueness of people. People have a strong voice throughout the service and are actively involved in their support arrangements. A person who uses the service told us, *"I get to do the things I like to do and have choice over everything"*.

People develop impactful rapport with care staff as the service values and champions positive relationships in promoting good well-being for people receiving care and support. People live with dignity and respect and receive appropriate, kind, and caring support from motivated care staff, who they know well. A person using the service told us, *"They are all really caring"*. A member of staff at the service told us, *"It is all about what matters to people"*.

People have as much autonomy over their daily lives as possible and can do the things that matter to them. People are encouraged to improve their well-being and become more independent through planning and engaging in activities, volunteering opportunities, educational courses, and daily tasks. We heard about weekends away and many valuable activities that people had enjoyed, such as escape rooms, trips to London and opportunities to see Dancing With The Stars. On the day of inspection, we saw people accessing the community and doing what matters to them.

Risks to people are not consistently identified and remedied by the service, to ensure people are as safe as possible. Whilst the provider does ensure checks to the Disclosure & Barring Service (DBS) are completed for all care staff, some staff are in employment without robust recruitment and vetting procedures. Arrangements for the completion and monitoring of staff training, including safeguarding training, were not sufficiently robust to ensure all staff have the necessary required knowledge.

Care and Support

People are happy with the care and support they receive at the service. The process for admitting new people into the service is well-planned. Person-centred plans are detailed and contain all the information required to enable care staff to meet the needs of people. Plans place focus on what is important to people, their personal goals and how these will be achieved. Plans are reviewed in a timely manner and consider whether people's personal outcomes are being met.

A team of highly motivated and committed care workers are employed at the service, which allows people to develop strong relationships with care staff. They are knowledgeable about the people in their care and are empathic and patient in their approach. We saw care staff understand and anticipate people's changing care and support needs and are attuned to changes in their well-being. People have freedom to choose what to do with their days and are supported to access individual or group activities of their choosing.

People's physical health and well-being is promoted. Care records show people receive support to access social and health care professionals when needed. Care workers we spoke with understand people's health conditions, the support they require and can identify changes in the usual presentation of people they support promptly. People are encouraged to be as healthy as possible.

A range of beneficial activities are offered by activity co-ordinators. These include arts and crafts opportunities, cooking and sharing a meal together, engaging in hobbies and interests and attending community events that are important to them. People are supported in decorating their personal spaces and are proud of their achievements. People are actively involved in setting short and long-term goals that are fun or support increasing independence. A member of care staff told us, "*We make plans and have a wish list of what we want to achieve and it is all doable. A holiday to Butlins is the next big one*".

Infection prevention and control procedures are very good. Care staff have access to personal protective equipment (PPE) if required.

Leadership and Management

The statement of purpose (SoP) clearly states what people can expect from the service. There is a written guide which gives people who live at the service, their relatives and others, accurate information about the service.

The Responsible individual (RI) visits the service daily and is very well known by people. We observed the RI engaging with people. The most recent quality of care review identifies areas for development and improvement and uses the views of people to develop and improve the care and support provided. Whilst the RI has a daily presence in the home, we could not be assured the oversight arrangements in place are driving an improvement in the quality of the service provided. We did not see evidence that all risks to people at the service had been identified and appropriate action taken. While no immediate action is required, this is an area for improvement, and we expect the provider to take action. We will follow this up at our next inspection.

A new manager, who is suitably qualified has recently been appointed to oversee the day to day running of the service. The manager knows people well and demonstrates commitment to ensure effective day-to-day management of the service takes place. The manager leads with compassion and humanity, which models the values and standards expected from all care staff. Care staff told us that the management team are approachable and always there to help or advise when required.

Throughout our visit, we saw there was a sufficient number of care staff to support people. The service are not reliant on agency staff, meaning people are supported by familiar and consistent care staff. We saw care staff engaging in meaningful interactions with people. A member of care staff told us, *"You really get time to spend with people and do some lovely things with them"*.

Care staff are registered or working towards registration with the social care workforce regulator, Social Care Wales. Disclosure and Barring Security (DBS) checks are in place and current. However, the service has inconsistent recruitment, vetting and ongoing monitoring arrangements in place. Not all staff personnel records contain all the information required by Regulations to ensure they are safe and fit for work. Some files did not have sufficient identity checks, references, the person's full employment history recorded or reasons for leaving prior work with vulnerable people. Arrangements for the induction and training of staff were insufficiently robust to ensure all staff can perform tasks for their role. The RI provided assurances that safer recruitment and staff training procedures will be strengthened. We will follow this up at our next inspection.

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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6	Service providers cannot be assured that they have clear arrangements for the oversight and governance of the service, to ensure people achieve the best possible outcomes and the service meets the requirements of Regulations.	New
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